

7/8/2005 Page

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Return Address: Wells Fargo Bank, N.A. P. O. BOX 31557 BILLINGS, MT 59107 DOCUMENT MANAGEMENT State of Washington

Space Above This Line For Recording Data

REFERENCE # 20051307400600 ACCOUNT #: 0651-651-8245681-1998

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is 06/13/2005 and the parties are as follows:

TRUSTOR ("Grantor"):
SUN NYO CODY, AN UNMARRIED WOMAN, AS HER SEPARATE PROPERTY

whose address is: 2609 RAINBOLT PL MOUNT VERNON, WA,

Wells Fargo Financial National Bank TRUSTEE: c/o Specialize Service

401 West 24th Street, National City, CA 91950

BENEFICIARY ("Lender"): Wells Fargo Bank, N.A. P. O. BOX 31557

BILLINGS, MT 59107

For good and valuable consideration, the receipt and sufficiency of which is 2. CONVEYANCE. acknowledged, and to secure the Secured Debt (defined below) and Granfor's performance under this Security Instrument, Grantor irrevocably grants, conveys and sells to Trustee, in trust for the benefit of Lender, with power of sale, all of that certain real property located in the County of SKAGIT . State of Washington, described as follows: OT WASHINGTON, DESCRIBED AS TOLLOWS:

LOT 48, 'PLAT OF LITTLE MOUNTAIN ADDITION', AS PER PLAT RECORDED IN VOLUME
15 OF PLATS, PAGES 1 THROUGH 5, INCLUSIVE, RECORDS OF SKAGLT COUNTY,
WASHINGTON, SITUATED IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON, TITLE TO
SAID PREMISES IS VESTED IN WILLIAM G. CODY AND SUN NYO CODY, HUSBAND AND
WIFE BY DEED FROM WITHERS CONSTRUCTION, INC., A WASHINGTON CORPORATION
DATED 12/24/92 AND RECORDED 12/24/92 AS INSTRUMENT NO. 9212240073 BOOK 1148 PAGE 0616 .

with the address of 2609 RAINBOLT PL MOUNT VERNON, WA 982746119 and parcel number of P100658 together with all rights, easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, WASHINGTON - DEED OF TRUST EQ249A (12/2004)

and water stock and all existing and future improvements, structures, fixtures, and replacements that may now, or at any time in the future, be part of the real estate described above.

- 3. MAXIMUM OBLIGATION LIMIT AND SECURED DEBT. The total amount which this Security Instrument will secure shall not exceed \$30,000.00 together with all interest thereby accruing, as set forth in the promissory note, revolving line of credit agreement, contract, guaranty or other evidence of debt ("Secured Debt") of even date herewith, and all amendments, extensions, modifications, renewals or other documents which are incorporated by reference into this Security Instrument, now or in the future. The maturity date of the Secured Debt is 06/13/2045
- 4. MASTER FORM DEED OF TRUST. By the delivery and execution of this Security Instrument, Grantor Agrees that all provisions and sections of the Master Form Deed of Trust ("Master Form"), inclusive, dated February 1, 1997 and recorded on February 6, 1997 as Auditor's File Number 9702060051 in Book 1626 at Page 0614 of the Official Records in the Office of the Auditor of SKAGIT County, State of Washington, are hereby incorporated into, and shall govern, this Security Instrument.
- 5. USE OF PROPERTY. The property subject to this Security Instrument is not used principally for agricultural or farming purposes.

RIDERS. If checked, the following are applicable to this Security Instrument. The covenants and agreements of each of the riders checked below are incorporated into and supplement and amend the terms of this Security Instrument.

N/A Third Party Rider

N/A Leasehold Rider

N/A Other N/A



SIGNATURES: By signing below, Grantor agrees to perform all covenants and duties as set forth in this Security Instrument. Grantor also acknowledges receipt of a copy of this document and a copy of the provisions contained in the previously recorded Master Form (the Deed of Trust-Bank/Customer Copy).

Long Culm		6/13/05
SUN NYO CODY	Grantor	Date
	Grantor	Date
ACKNOWLEDGMENT: (Individual) STATE OF WASHINGTON , COUNTY OF SK	Grantor 461	Date } ss.
I hereby certify that I know or have satisfactory evidence that	SUN NYO	C004
		is/are the
person(s) who appeared before me and said person(s) acknowledge acknowledged it to be his/her/their free and voluntary act for the under the said person(s) acknowledged it to be his/her/their free and voluntary act for the under the said person(s) acknowledged it to be his/her/their free and voluntary act for the under the said person(s) acknowledged it to be his/her/their free and voluntary act for the under the said person(s) acknowledged it to be his/her/their free and voluntary act for the under the said person(s) acknowledged it to be his/her/their free and voluntary act for the under the said person(s) acknowledged it to be his/her/their free and voluntary act for the under the said person (s) acknowledged it to be his/her/their free and voluntary act for the under the said person (s) acknowledged it to be his/her/their free and voluntary act for the under the said person (s) acknowledged it to be his/her/their free and voluntary act for the under the said person (s) acknowledged it to be his/her/their free and voluntary act for the under the said person (s) acknowledged it to be his/her/their free and voluntary act for the under the said person (s) acknowledged it to be his/her/their free and voluntary act for the under the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the said person (s) acknowledged it to be account to the		
(Signature) GRING DEWS SHUSTV! (Print name and include title) PD2 My Appointment expires: Muy 29, 2009	O (A)	l or Stamp)
	3-29.09 (6)= Or Washing	

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