

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# 2005 1967200426 ACCOUNT #: 0651-651-8789959-1998

SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is 09/19/2005 and the parties are as follows:

TRUSTOR ("Grantor"):
ANDREW W. SLIPPER AND NANCI L. SLIPPER, HUSBAND AND WIFE

whose address is: 4307 EAGLE VIEW CT ANACORTES, WA, 98221

TRUSTEE: Wells Fargo Financial National Bank 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

2. CONVEYANCE. For good and valuable consideration, the receipt and sufficiency of which is acknowledged, and to secure the Secured Debt (defined below) and Grantor'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:

Of Washington, described as follows:
LOT 3, SHORT PLAT NO. ANA 98-002, APPROVED JUNE 15, 1998, RECORDED JUNE 22,
1998 IN VOLUME 13 OF SHORT PLATS, PAGES 140 AND 141, UNDER AUDITOR'S FILE
NO 9806220012, AND BEING A PORTION OF THE NORTHEAST 1/4 OF THE SOUTHEAST
1/4 OF SECTION 22, TOWNSHIP 35 NORTH, RANGE 1 EAST, W.M. SITUATE IN THE
CITY OF ANACORTES, COUNTY OF SKAGIT, STATE OF WASHINGTON, ABBREVIATED
LEGAL: PTN NE 1/4 SE 1/4, 22-35-12 AKA TR. 3, SP ANA-98-002

with the address of 4307 EAGLE VIEW CT ANACORTES, WA 982211168
and parcel number of P31682 together with all rights, easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, EQ249A (12/2004)

WASHINGTON – DEED OF TRUST

- 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.
- Instrument will secure shall not exceed \$20,000.00 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 09/19/2045
- 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.

M/A Third Party Rider

N/A Leasehold Rider

N/A Other N/A



10/11/2005 Page

2 10.36AM

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).

and the		9/19/05
ANDREW W SLIPPER	Grantor	Date
- Jana Juliana		Date 9/19/05
NANCI L SLIPPER	Grantor	Date
	Grantor	Date
ACKNOWLEDGMENT: (Individual) STATE OF Washington, COUNTY OF I hereby certify that I know or have satisfactory evidence that	Sheigh	_} ss.
Andrew W Slipper and Mance I	Slippor	is/are the
person(s) who appeared before me and said person(s) acknowledged it to be his/her/their free and voluntary act for pated:		
(Print name and include title)		MANAGER AND
My Appointment expires:O4-O9-O9	(ATIX S	i s
		SHING
	34	W. SHINGTON

EQ249C (12/2004)



10/11/2005 Page

3 10:36AM