

**Skagit County Auditor** 

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

State of Washington

Space Above This Line For Recording Data

REFERENCE # 20060127300892 ACCOUNT #: 0651-651-9533486-1998

## SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is 02/08/2006 and the parties are as follows:

TRUSTOR ("Grantor"):
JOHN ENTERMANN AND DULCIE E. ENTERMANN, HUSBAND AND WIFE

whose address is: 5526 SUGARLOAF ST ANACORTES, WA, 98221

TRUSTEE: Wells Fargo Financial National Bank

2324 Overland Ave., BILLINGS, MT 59102

BENEFICIARY ("Lender"): Wells Fargo Bank, N.A.

P. O. BOX 31557

BILLINGS, MT 59107

CONVEYANCE. For good and valuable consideration, the receipt and sufficiency of which is 2. 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 SKAG+T , State

of Washington, described as follows:
TRACT 26, SKYLINE NO. 1, ACCORDING TO THE PLAT THEREOF, RECORDED IN VOLUME
8 OF PLATS, PAGES 49 THROUGH 50, RECORDS OF SKAGIT COUNTY, WASHINGTON.
SITUATED IN SKAGIT COUNTY, WASHINGTON. ABBREVIATED LEGAL: TRACT 26, SKYLINE

NO. 1, PLAT V 8, PGS 49-50, DOC # 200504270067

with the address of 5526 SUGARLOAF ST ANACORTES, WA 98221 and parcel number of P59033 together easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, WASHINGTON - DEED OF TRUST EQ249A (11/2005)

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 \$61,000.00 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 02/08/2046
- 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

M/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-ecorded Master Form (the Deed of Trust-Bank/Customer Copy).

John Entermen		2/9/06
JOHN ENTERMANN	Grantor	Date
Delai & Enternam		$\frac{2/9/06}{\text{Date}}$
DULCIE E ENTERMANN	Grantor	Date
	Grantor	Date
	Grantor	Date
	Grantor	Date
\(\frac{1}{3}\)	Grantor	Date
ACKNOWLEDGMENT: (Individual)		
STATE OF DG , COUNTY OF	5 Kagit	} ss.
I hereby certify that I know or have satisfactory evidence th	at	
Tohn Entermann and Ducie etcr person(s) who appeared before me and said person(s) ack acknowledged it to be his/her/their free and voluntary act i	nowledged that he/she/they	is/are the signed this instrument and entioned in the instrument.
Dated: Jebruary 9,2004  Hussa Elyons  (Signature)	THERESA E. YOUN	POR V S
(Print name and include title) My Appointment expires: 12-16-07	NOTARY PUBL MY COMMISSION EXPIRES 12-	al or Stamp)

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