



200606260033  
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 # 20061257500205 ACCOUNT #: 0651-651-0238097-1998

## SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. **DATE AND PARTIES.** The date of this Short Deed of Trust ("Security Instrument") is 05/31/2006 and the parties are as follows:

TRUSTOR ("Grantor"):  
CORY K. BOWEN, AN UNMARRIED MAN

whose address is: 920 N 16TH ST MOUNT VERNON, WA, 98273

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

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:

THE SOUTH 91.8 FEET OF LOT 5, BLOCK 1, CHENOWETH ADDITION TO MOUNT VERNON, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 6 OF PLATS, PAGE 39, RECORDS OF SKAGIT COUNTY, WASHINGTON. TITLE TO SAID PREMISES IS VESTED IN CORY K. BOWEN AND SUZANNE L. BOWEN, HUSBAND AND WIFE BY DEED FROM ORRIN G. MAGHIRANG, A MARRIED MAN, AS HIS SEPARATE ESTATE, AND LEAH A. MAGHIRANG, ALSO KNOWN AS LEAH A. KINCAID, A SINGLE WOMAN, AS HER SEPARATE ESTATE DATED 7/28/2000 AND RECORDED 8/4/2000 AS INSTRUMENT NO. 200008040044.

with the address of 920 N 16TH ST MOUNT VERNON, WA 98273

and parcel number of P52471

together with all rights,  
easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches,

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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.

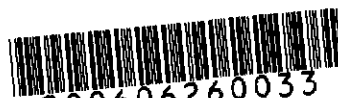
3. **MAXIMUM OBLIGATION LIMIT AND SECURED DEBT.** The total amount which this Security Instrument will secure shall not exceed \$ 50,000.00 together with all interest thereby accruing, as set forth in the promissory note, revolving line of credit agreement, contract, guaranty or other evidence of debt ("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 05/31/2046
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.

☒ **Third Party Rider**

☒ **Leasehold Rider**

☒ **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).

----- **FOR CLARIFICATION PURPOSES ONLY** -----

_____	Grantor	_____
CORY K BOWEN		Date
_____	Grantor	_____
		Date
_____	Grantor	_____
		Date
_____	Grantor	_____
		Date
_____	Grantor	_____
		Date
_____	Grantor	_____
		Date

**ACKNOWLEDGMENT:**

(Individual)

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_ } ss.

I hereby certify that I know or have satisfactory evidence that \_\_\_\_\_ is/are the

person(s) who appeared before me and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print name and include title)

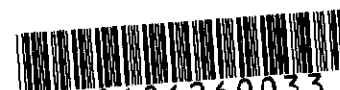
My Appointment expires: \_\_\_\_\_

(Affix Seal or Stamp)

**For clarification purposes, I declare under penalty of perjury, 6/7/2006, that this is an exact copy of the original document to which it is attached.**

Erica Hanson \_\_\_\_\_  
WASHINGTON COUNTY, OREGON

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**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).

<u>Cory K Bowen</u> CORY K BOWEN	Grantor	<u>6-02-06</u> Date
_____	Grantor	_____ Date
_____	Grantor	_____ Date
_____	Grantor	_____ Date
_____	Grantor	_____ Date
_____	Grantor	_____ Date

**ACKNOWLEDGMENT:**

(Individual)

STATE OF WASHINGTON, COUNTY OF SKAGIT } ss.

I hereby certify that I know or have satisfactory evidence that CORY K BOWEN is/are the

person(s) who appeared before me and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in the instrument.

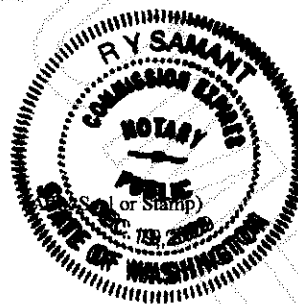
Dated: 6/2/2006

Ry Samant  
(Signature)

RY SAMANT NOTARY PUBLIC

(Print name and include title)

My Appointment expires: 12/19/2009



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**ILLEGIBLE NOTARY SEAL DECLARATION**

I CERTIFY UNDER PENALTY OF PERJURY THAT THE NOTARY SEAL ON THE DOCUMENT TO WHICH THIS STATEMENT IS ATTACHED READS AS FOLLOWS:

Name of  
Notary:

R Y Samant

Commission  
Number:

N/A

Commission  
Expires:

Dec 19, 2009

Date & Place of  
Notary Execution:

6/2/06 Skagit

COUNTY, WASHINGTON

Date & Place of  
This Execution:

6/7/06

Washington County, OR

Erica Hanson

Signature

Erica Hanson  
WELLS FARGO BANK, N.A.



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