



200609120046  
Skagit County Auditor

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**After Recording Return To:**

Wells Fargo Bank, N.A. Attn: Document Mgt.  
P.O. Box 31557 MAC B6908-012  
Billings, MT 59107-9900

**DEED OF TRUST**

**Trustor(s)** DAVID B. GODDARD, A MARRIED MAN, AND SHEILA D GODDARD, A NON-VESTED SPOUSE, HUSBAND AND WIFE

**Trustee(s)** Wells Fargo Financial National Bank, 2324 Overland Ave, Billings, MT 59102

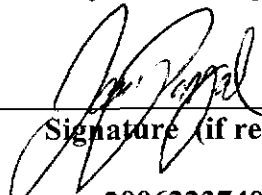
**Legal Description** LOTS 1 THROUGH 8, INCLUSIVE, BLOCK 6, FIRST PLAT OF SHIP HARBOR, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 1 OF PLATS, PAGE 13, RECORDS OF SKAGIT COUNTY, WASHINGTON.

**Assessor's Property Tax Parcel or Account Number** P58954

**Reference Numbers of Documents Assigned or Released**

**Beneficiary:** Wells Fargo Bank, N.A.

**Beneficiary** Wells Fargo Bank N.A. 101 North Phillips Avenue Sioux Falls SD 57104

  
\_\_\_\_\_  
Signature (if requesting non-standard recording)

**Reference:** 20062237400040

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Documents Processed 08-18-2006, 16:42:08

Prepared by:  
Wells Fargo Bank, N.A.  
LINDA L EDWARDS  
DOCUMENT PREPARATION  
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State of Washington  
REFERENCE #: 20062237400040

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Account number: 651-651-0598946-0XXX

## SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. **DATE AND PARTIES.** The date of this Short Deed of Trust ("Security Instrument") is AUGUST 18, 2006 and the parties are as follows:  
TRUSTOR ("Grantor"): **DAVID B. GODDARD, A MARRIED MAN, AND SHEILA D GODDARD, A NON-VESTED SPOUSE, HUSBAND AND WIFE** whose address is: **5705 SHEILA ANNE CT, ANACORTES, WASHINGTON 98221-4097**

TRUSTEE: **Wells Fargo Financial National Bank, 2324 Overland Ave, Billings, MT 59102**

BENEFICIARY ("Lender"): **Wells Fargo Bank, N.A., 101 North Phillips Avenue, Sioux Falls, SD 57104**

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:  
Assessor's Property Tax Parcel Account Number(s): **P58954**  
**LOTS 1 THROUGH 8, INCLUSIVE, BLOCK 6, FIRST PLAT OF SHIP HARBOR, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 1 OF PLATS, PAGE 13, RECORDS OF SKAGIT COUNTY, WASHINGTON.**

with the address of **5705 SHEILA ANNE CT, ANACORTES, WASHINGTON 98221** and parcel number of **P58954** together with all rights, easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, 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 **\$ 55,000.00** 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 **AUGUST 15, 2021**.

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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 **2/6/1997** as Auditor's File Number **9702060051** in Book **1626** at Page **614** 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.

6. **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).

David B. Goddard 8/19/06  
Grantor **DAVID B GODDARD** Date

Sheila D. Goddard 8/19/06  
Grantor **SHEILA D GODDARD, A NON-VESTED SPOUSE** Date

\_\_\_\_\_  
Grantor Date

\_\_\_\_\_  
Grantor Date

\_\_\_\_\_  
Grantor Date

\_\_\_\_\_  
Grantor Date

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Grantor

Date

Grantor

Date

For An Individual Acting In His/Her Own Right:

State of Washington

County of SKAGIT

On this day personally appeared before me

David B. GODDARD and Sheila D. Goddard  
(here insert the name of grantor

or grantors) to me known to be the individual, or individuals described in and who executed the within and foregoing instrument, and acknowledged that he (she or they) signed the same as his (her or their) free and voluntary act and deed, for the uses and purposes therein mentioned. Given under my hand and official seal this 19 day of August, 2006.

Witness my hand and notarial seal on this the 19<sup>th</sup> day of August, 2006

Signature

Kimberly Ann Kane  
Print Name:

Notary Public

[NOTARY SEAL]



My commission expires:

July 19, 2010

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