

WHEN RECORDED,  
RETURN TO:

WASHINGTON FEDERAL SAVINGS  
1241 SW BARLOW STREET  
OAK HARBOR WA 98277

Attn: JML



200905210001  
Skagit County Auditor

5/21/2009 Page 1 of 3 9:06AM

LAND TITLE OF SKAGIT COUNTY

127354-PP

Date MAY 6, 2009

Loan No. 016 207 335676-3

NOTICE OF MODIFICATION OF DEED OF TRUST

PROPERTY TAX PARCEL NO.: 4780-000-006-0000/P 118299

ABBR LEGAL DECIPTION: LOT 6, DECEPTION SHORES, PUD.

NOTICE TO ALL PERSONS is given that Washington Federal Savings,  
as the Beneficiary/(Grantee) of that Deed of Trust dated 09/27/07,  
recorded under AUDITOR'S FILE No. 200709270155,  
in the Records of SKAGIT County, State of WASHINGTON  
has, this date, modified the terms of the Note secured by the Deed of Trust ("the Loan Contract and  
Security Instrument"), as approved by MICHAEL B WIENER AND SHEREE M  
GOODMAN-WIENER, HUSBAND AND WIFE

\_\_\_\_\_, Grantor (or Successor  
Grantor)

Check  
Appropriate  
Box(es)

IMPORTANT: Any numbered paragraph, which is highlighted by the mark of an  
"X" in the box opposite it and whose blank lines or spaces are filled in, is part of  
this notice. Any other numbered paragraph not so highlighted, is not part of this  
notice.

- ☒ 1. The Maturity Date of the Loan Contract and Security Instrument has been changed  
from 09/21/09 to 09/21/10
- ☒ 2. The Loan Contract and Security Instrument has also been modified in a manner other than  
change in the Maturity Date.

The purpose of this document is to provide record notice, when required, of a modification in the terms  
of the loan contract and security instrument. It is not intended to nor shall it be deemed to alter in any  
manner the actual terms of any loan modification agreement between the grantor of the security  
instrument (or the successor of grantor) and

WASHINGTON FEDERAL SAVINGS

as beneficiary. Notice is given to all persons that, except for the terms of any loan modification  
agreement, the terms of the original loan contract and security instrument shall in all other respects  
remain in full force and effect.

Grantor(s)

WASHINGTON FEDERAL SAVINGS

by: LEROY A RIEPMA

Title: VICE PRESIDENT/BRANCH MANAGER

MICHAEL B WIENER  
SHEREE M GOODMAN-WIENER

(Next page for notary acknowledgments)

STATE OF )

) ss.

COUNTY OF )

I certify that I know or have satisfactory evidence that

MICHAEL B WIENER AND SHEREE M GOODMAN-WIENER

[Name(s) of person(s)]

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: \_\_\_\_\_

(Seal or Stamp)

(Signature)

Notary Public in and for the State of \_\_\_\_\_,

residing at \_\_\_\_\_

My commission expires \_\_\_\_\_

*PLEASE SEE ATTACHED*



STATE OF

WASHINGTON )

) ss.

COUNTY OF

ISLAND )

I certify that I know or have satisfactory evidence that

LEROY A RIEPMA

[Name(s) of person(s)]

is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument, on oath stated that (he/she/they) was/were authorized to execute the instrument and acknowledged it as the VICE PRESIDENT

(Type of Authority, e.g., Officer, Trustee)

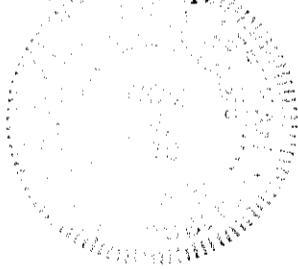
of WASHINGTON FEDERAL SAVINGS

(Name of the Party on Behalf of Whom the Instrument was Executed)

to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: May 19, 2009

(Seal or Stamp)



(Signature)

*Jacqueline M. Leetham*

Notary Public in and for the State of WASHINGTON,

residing at OAK HARBOR

My commission expires 11-13-10



# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of ORANGE

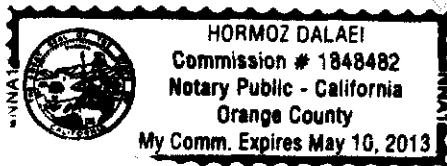
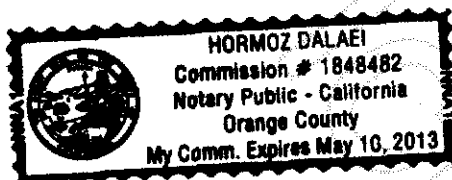
On MAY 15, 2009 before me, HORMOZ DALAEI

Date

Here Insert Name and Title of the Officer

personally appeared MICHAEL BARRY WIENER AND SHEREE M. GOODMAN WIENER

Name(s) of Signer(s)



Place Notary Seal Above

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Signature of Notary Public

## OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

### Description of Attached Document

Title or Type of Document: NOTICE OF MODIFICATION OF DEED OF TRUST

Document Date: MAY 6th 2009

Number of Pages: three

Signer(s) Other Than Named Above: N/A

### Capacity(ies) Claimed by Signer(s)

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here



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