03/14/2019 11:39 AM Pages: 1 of 3 Fees: \$101.00 Skagit County Auditor

WHEN RECORDED RETURN TO:

Washington Federal, N.A. 425 Pike Street

Attn: Records Management

Seattle WA 98101

DOCUMENT TITLE(S):
Notice of Modification of Deed of Trust

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:
201702270144

GRANTOR:
Judy Holt, a married woman

GRANTEE:
Washington Federal, N.A.

ABBREVIATED LEGAL DESCRIPTION:
Lot 19, Rock Ridge South, Phase 1.

TAX PARCEL NUMBER(S):
4918-001-019-0000, P125841





WHEN RECORDED		•
RETURN TO:		
Washington Federal, N.A.		
425 Pike Street		
Seattle, WA 98101 Attn: Records Management		
Date: 02/27/2019 02-16/06	L	oan No. <b>62761303569</b>
ACCOMMODATION NOTICE OF MODIFICATION OF RECORDING ONLY	DEED OF TRUST	
NOTICE TO ALL PERSON is given that Washington Fed	ieral, N.A.՝	as the beneficiary (Grantee)
of the Deed of Trust dated 2/22/2017	, recorded under	AUDITOR'S FILE
No. 201702270144 in the Records of SKA	AGIT · County, S	State of WASHINGTON
has this date modified the terms of the Note secured by the De	ed of Trust ("the Loan C	Contract and Security
Instrument"), as approved by JUDY HOLT, A MARRIED WO		
Grantor (or Succesor Grantor) under the Security Instrument as fo	ollows:	
Check IMPORTANT: Any numbered paragraph, Apropriate "X" in the box opposite it and whose blank Box(es) this notice.		
X 1. The Maturity Date of the Loan Contract and Securi	ty Instrument has been ch	nanged
from <b>3/1/2019</b> to	09/01/2019	
The Loan Contract and Security Instrument has also change in Maturity Date.	been modified in a mann	ner other than
The purpose of this document is to provide a record notice, v	when required, of a modif	fication in the terms
of the loan contract and security instrument. It is not int		
any manner the actual terms of any loan modification agree		
instrument (or the successor of grantor) and		
Washington I	ederal, N.A.	
as beneficiary. Notice is given to all persons that, exce	ept for the terms of an	y loan modification
agreement, the terms of the original loan contract and sect	ırity instrument shall in	all other respects
remain in full force and effect.		
	Grantor(s)	
	$\bigcirc$ / $\nearrow$	LAH.
WASHINGTON FEDERAL, N.A.	JUDY LHOUT	y i w
	JUDITION	
By:		
Title Branch Manager		

(Next page for notary acknowledgements)
Page 1 of 2 pages

LO122 05/08/16



I certify that I know or have satisfactory evidence that  (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  (Type Authority, e.g., Officer, Trustee)	) ss.	
(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: 2/3/2019  Collyn Joy Malloy.  (Signature)  Notary Public in and for the State of residing at Mondree.  My commission expires 12 Juy 2019  (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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  Of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed) to be free and voluntary act of such party for the uses and purposes mentioned in the instrument.		
(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:  Dated:  Dated:  Dated:  Dated:  PUBLIC STATE OF  I certify that I know or have satisfactory evidence that  (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  (Type Authority, e.g., Officer, Trustee)  Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated:  Dated:	COUNTY OF )	
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: 227 2019	I certify that I know or have satisfactory evidence	that JUDY L HOLT
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: 227 2019		
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: 227 2019		
this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.  Dated: 2/27/3019    Colyn Joy Mallow (Signature)		-
Dated: 2/27/2019    Colyn Joy Mallor   Signature   Notary Public in and for the State of residing at More.   My commission expires   12 /14 /2019   My commission expires   12 /14 /2019   My commission expires   12 /14 /2019      STATE OF	, <del></del>	
Dated: 2/27/3019    Calyn Joy Mallay     (Signature)     Notary Public in and for the State of   Jachungton residing at   Marxe     My commission expires   12 / 12 / 12 / 19     STATE OF     I certify that I know or have satisfactory evidence that     (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   BRANCH MANAGER     (Type Authority, e.g., Officer, Trustee)     (Type Authority, e.g., Officer, Trustee)     (Name of the Party on Behalf of Whom the Instrument was Executed)     to be free and voluntary act of such party for the uses and purposes mentioned in the instrument.		eir) free and voluntary act for the uses and purposes
My commission expires    A	mentioned in the instrument.	
My commission expires    A	2/27/2019	Ral T. M. H.
My commission expires    A	Dated:	Loeign Joy Mallay.
My commission expires    A	Carry N JOY MAN	(Signature)
My commission expires    A	(Seaf of Seafully)	Notary Public in and for the State of Washington
My commission expires    A	NOTARY	residing at
STATE OF  (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  (Type Authority, e.g., Officer, Trustee)  of  (Name of the Party on Behalf of Whom the Instrument was Executed) to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated:  Dated:		My commission expires $\frac{12}{14}$ 2019
(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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed) to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: Dated: Date of the Party of the uses and purposes mentioned in the instrument.	PUBLIC S. Z	•
(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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed) to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: Dated: Date of the Party of the uses and purposes mentioned in the instrument.	MBER 14 CO	
(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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed) to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: Dated: Date of the Party of the uses and purposes mentioned in the instrument.	THE OK WASHINGTON	
I certify that I know or have satisfactory evidence that  (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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed) to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	STATE OF	
I certify that I know or have satisfactory evidence that  (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   (Type Authority, e.g., Officer, Trustee)  of   Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2-2-1-1-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2	) ss.	
(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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	COUNTY OF )	
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 BRANCH MANAGER   (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	I certify that I know or have satisfactory evidence	that LORRI CAREY
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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		· · · · · · · · · · · · · · · · · · ·
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 BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
this instrument, on oath stated that (he/she/they) was/were authorized to execute the instrument and acknowledged it as the BRANCH MANAGER  (Type Authority, e.g., Officer, Trustee)  of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(NI (-)	£/>
of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
(Type Authority, e.g., Officer, Trustee)  of   Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such party for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	is/are the person(s) who appeared before me, and s	aid person(s) acknowledged that (he/she/they) signed
of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	is/are the person(s) who appeared before me, and s this instrument, on oath stated that (he/she/they)	aid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and
of Washington Federal, N.A.  (Name of the Party on Behalf of Whom the Instrument was Executed)  to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	is/are the person(s) who appeared before me, and s this instrument, on oath stated that (he/she/they)	aid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and
(Name of the Party on Behalf of Whom the Instrument was Executed) to be free and voluntary act of such part y for the uses and purposes mentioned in the instrument.  Dated: 2-2-1-1-2019  Dated: 10-2-1-1-2019	is/are the person(s) who appeared before me, and s this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH	aid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER
Dated: 2-2-1-2019  Dated: 2-2-1-2019  Rocky Joy Mallory	is/are the person(s) who appeared before me, and s this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g.,	aid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee)
Dated: 2-2mln2819 Rozlyn Jay Mallory	is/are the person(s) who appeared before me, and s this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing	aid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee) ton Federal, N.A.
m < 100 V	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on	aid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee) ton Federal, N.A.  Behalf of Whom the Instrument was Executed)
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Notary Public in and for the State of Wesh modern  NOTARY  PUBLIC  PUBLIC  NOTARY  My commission expires  Notary Public in and for the State of Wesh modern  residing at	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the	aid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee) ton Federal, N.A. Behalf of Whom the Instrument was Executed) ses and purposes mentioned in the instrument.
Notary Public in and for the State of Walk Moffey residing at	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on to be free and voluntary act of such part y for the use Dated:	orid person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee)  ton Federal, N.A.  Behalf of Whom the Instrument was Executed)  ses and purposes mentioned in the instrument.
NOTARY TO PUBLIC ON THE PUBLIC	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on to be free and voluntary act of such part y for the use Dated:	oridic person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee)  ton Federal, N.A.  Behalf of Whom the Instrument was Executed)  ses and purposes mentioned in the instrument.  Column Joy Mallory  (Signature)
My commission expires 12/14/2019	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on to be free and voluntary act of such part y for the use Dated:	oridic person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee) ton Federal, N.A.  Behalf of Whom the Instrument was Executed) sees and purposes mentioned in the instrument.  (Signature)  Notary Public in and for the State of Washwayten
THE COLUMN THE PARTY OF THE PAR	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on to be free and voluntary act of such part y for the use Dated:	oridic person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee) ton Federal, N.A.  Behalf of Whom the Instrument was Executed) sees and purposes mentioned in the instrument.  (Signature)  Notary Public in and for the State of Washwayten
THE AMERICAN CHINAIRE	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on to be free and voluntary act of such part y for the use Dated:	oridic person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee)  ton Federal, N.A.  Behalf of Whom the Instrument was Executed)  ses and purposes mentioned in the instrument.  (Signature)  Notary Public in and for the State of Washwayten residing at Monage and Manage and
Mary CHILLIAN	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on to be free and voluntary act of such part y for the use Dated:	oridic person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee)  ton Federal, N.A.  Behalf of Whom the Instrument was Executed)  ses and purposes mentioned in the instrument.  (Signature)  Notary Public in and for the State of Washwayten residing at Monage and Manage and
"Management" Programment	is/are the person(s) who appeared before me, and so this instrument, on oath stated that (he/she/they) acknowledged it as the BRANCH  (Type Authority, e.g., of Washing (Name of the Party on to be free and voluntary act of such part y for the use Dated:	oridic person(s) acknowledged that (he/she/they) signed was/were authorized to execute the instrument and MANAGER  Officer, Trustee)  ton Federal, N.A.  Behalf of Whom the Instrument was Executed)  ses and purposes mentioned in the instrument.  (Signature)  Notary Public in and for the State of Washwayten residing at Monage and Manage and