



200104130120  
Skagit County Auditor

4/13/2001 Page 1 of 2 1:37:34PM

Return Address:

Wells Fargo Bank, N.A.  
Attn: Lien Perfection  
P.O. Box 5140  
Portland, OR 97208-5140

State of Washington Space Above This Line For Recording Data  
**SHORT FORM DEED OF TRUST** 0038636 0001  
(With Future Advance Clause) 20010261242460

1. **DATE AND PARTIES.** The date of this Short Form Deed of Trust ("Security Instrument") is  
03/01/2001 and the parties are as follows:  
TRUSTOR ("Grantor"): **FIRST AMERICAN TITLE CO.**  
GORDON J. NORDLUND AND SALLY A. NORDLUND, TRUSTEES OF THE **ELS#2280228**  
REVOCABLE TRUST AGREEMENT

whose address is:  
6 EAGLES NEST DRIVE LA CONNER, WA 98257

TRUSTEE: **WELLS FARGO FINANCIAL NATIONAL BANK, c/o Specialize Service**  
401 West 24th Street, National City, CA 91950

BENEFICIARY ("Lender"): **WELLS FARGO BANK, N.A. 18700 NW Walker Rd., Bldg. 92**  
Beaverton, OR 97006

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:

LOT 6A, SHORT PLAT NO. SP 91-057 FOR GORDON NORDLUND, AS RECORDED DECEMBER 5, 1991, IN VOLUME 10 OF SHORT PLATS ON PAGES 33 AND 34, OF THE RECORDS OF THE SKAGIT COUNTY AUDITOR.  
SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

with the address of 6 EAGLES NEST DRIVE LA CONNER, WA 98257  
and parcel number of 330202-0-000-2102, 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 AND SECURED DEBT.** The total amount which this Security Instrument will secure shall not exceed \$1,000,000.00 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 03/01/2003

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.

**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>X Gordon Nordlund</u>		<u>3/20/01</u>
GORDON J NORDLUND, TRUSTEE	Grantor	Date
<u>X Sally A Nordlund</u>		<u>3/20/01</u>
SALLY A NORDLUND, TRUSTEE	Grantor	Date
_____	Grantor	_____
_____	Grantor	_____

**ACKNOWLEDGMENT:**  
(Individual)

STATE OF HAWAII, COUNTY OF MAUI } ss.

I hereby certify that I know or have satisfactory evidence that MR GORDON & MRS. SALLY NORDLUND

\_\_\_\_\_ 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.

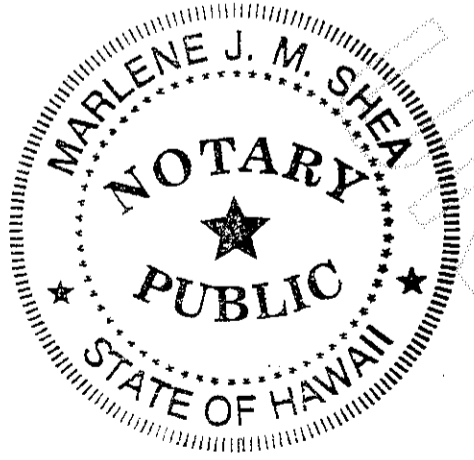
Dated: 3/20/01

Marlene J. M. Shea  
(Signature)

MARLENE J. M. SHEA  
(Print name and include title)

NOTARY PUBLIC

My Appointment expires: 2/7/03



(Affix Seal or Stamp)

