## WHEN RECORDED, RETURN TO:

Fed	era1	Savings
Wa	982	21
		Federal Wa 982

200205130168
Skagit County Auditor

5/13/2002 Page 1 of 2 11:35AM

Date	May 2	4, 2001			Loan No	014 20	1 234406-7
		NOTI	CE OF MODIF	ICATION O	FIF	ST AMERI	CAN TITLE CO.
		Services Services	ge <sup>ther</sup>				
NC	OTICE T	O ALL PERS	ONS is given tha	t <u>Wa</u>	shington Feder	al Savings	,
			of that Deed of				· · · · · · · · · · · · · · · · · · ·
		Auditor's			To. 2000080		,
		of <u>Skagit</u>			State of Was		
							Loan Contract and
	-		proved by <u>Dav</u>	vid G Gold	and Lori	L Gold, H	usband
an	<u>nd Wife</u>		The state of the s			Frantor (or 9	Successor Grantor)
under	the Secur	rity Instrumen	t as follows:		, \	Ji antor (or s	successor Grantor)
				/ a			
	eck propriate x(es)	"X" in the l	NT: Any numb box opposite it as Any other numb	nd whose blar	k lines or space	es are filled in	n, is part of
X	1. The		e of the Loan Co l, 2031		June 1,		hanged .
		Loan Contrac	et and Security Intuity Date.	strument has	also been mod	lified in a ma	nner other than
of the manne instrun	loan con or the ac ment (or t	tract and secuetual terms of	rity instrument. f any loan mod of grantor) and	it is not inte	nded to nor sha	all it be deen	cation in the terms ned to alter in any or of the security
agreem	nent, the		original loan c				loan modification all other respects
Granto Instrun		Successor Gra	ntor(s)] of Securi	ityDav	id G Gold		
				Lor	T L Gold		

(Over for notary acknowledgments)

and the second of the second o		
and the state of t		
My commission expires		
residing at		
Notary Public in and for the State of	(Seal or Stamp)	)
(Signature)		
		Dated:
rty for the uses and purposes mentioned in the instrument.	nd voluntary act of such pa	s serif ed of
he Party on Behalf of Whom the Instrument was Executed)	t to əmsN)	
(2) To other (1) (2) (2) (2) (2) (2)		ło
(Type of Authority, e.g., Officer, Trustee)		
she/they) was/were authorized to execute the instrument an	t, on oath stated that (he)	
[Name(s) of person(s)] me, and said person(s) acknowledged that (he/she/they) signershe/they) was/were authorized to execute the instrument an	on(s) who appeared before t, on oath stated that (he/	this instrumen
[Name(s) of person(s)] me, and said person(s) acknowledged that (he/she/they) signe	on(s) who appeared before	is/are the person
[Name(s) of person(s)] me, and said person(s) acknowledged that (he/she/they) signe	on(s) who appeared before t, on oath stated that (he/	I certify the
[Name(s) of person(s)] me, and said person(s) acknowledged that (he/she/they) signe	on(s) who appeared before	is/are the person
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residing at Anacortes  My commission expires 7-15-01  ry evidence that  [Name(s) of person(s)]  me, and said person(s) acknowledged that (he/she/they) signs  me, and said person(s) acknowledged that (he/she/they) signs	OTARION OT have satisfactor and a perfect of the control of the co	STATE OF COUNTY OF Is/are the perso
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