Return to:

Community Healthcare F.C.U.
1001 N. Broadway Ste. B-5
Everett, WA 98201

	SHORT I DEED OF	TRIICT	1142 O TITLE OF SKAGIT CO	43-PS UNTY
	PACIFIC NO	RTHWES	ST TITLE	
THIS DIED OF TRUST, made BETWEEN Hendrik L				, <u>2004</u> , vife
whose address is 1518 E	Hazel St.	Mount Ve	ernon, WA 98	, as Grantor, 3274
Pacific Northwe		THO GITTE TO	2110117 111 30	, as Trustee,
whose address is				;
and Community Heal's whose address is 1001 N			on, Cverett, WA	as Beneficiary, 98201
Grantor hereby irrevocably gr				
the following described property	/ inSKAGIT		County, Wash	ungton:
Lot 3, Block 1, Vernon," as per page 3, records	plat recorded	in Volume	7 of Plats,	
Additional on page	254097			
Assessor's Tax Parcel ID#	234097		<u>Comment and a second a second and a second </u>	
TOGETHER WITH all the tend or in anywise appertaining, and or nature whatsoever further HOWEVER, to the rights, pow and apply such rents, issues and THIS DEED IS FOR THE P incorporated by reference or con	the rents, issues, and pro set forth in the Master er and authority hereinaft profits.  URPOSE OF SECURING	fits thereof and all Deed of Trust ter given to and co G PERFORMAN at of the sum of	other property or righter referred onferred upon Benef	ghts of any kind to, SUBJECT, iciary to collect ent of Grantor
with interest thereon according or order and made by Grantor; may be advanced or loaned by I thereon at such rate as shall be a	all renewals, modification Beneficiary to Grantor, or	ory note of even d	late herewith, payable hereof, and also such	further sums as
By executing and delivering to provisions of Paragraphs I throexcept such paragraphs as are reference and made an integral Grantor hereby makes said cove of Trust above referred to was a the offices of the County Aud designated after the name of each	ough 35 inclusive of the specifically excluded or part hereof for all purpo nants and agrees to fully pecorded on the twenty-fif itors of the following co	Master Form De modified herein, sees the same as it perform all of said th (25th) day of h	ed of Trust hereinal are hereby incorpor f set forth herein at a provisions. The Ma ally, 1968, in the Offi	fter referred to, rated herein by length, and the ster Form Deed icial Records of

* A							
COUNTY	BOOK OR VOL	PAGE NO.	<u>AUD.</u> FILE NO.	COUNTY	BOOK OR VOL.	PAGE NO.	AUD. FILE NO.
Adams	2 of Record. Inst.	513-16	122987	Lewis	7 of Official Rec.	839-842	725562
Asotin	Microfilmed Under	Aud. No.	101896	Lincoln	107 of Mortgages	776-779	316596
Benton	241 of Official Rec.	659A-C	592931	Mason	Reel 48	Frm 835-838	236038
Chelan	688 of Official Rec.	1682-1685	681844	Okanogan	121 of Mortgages	517-519A	560658
Clailam	315 of Official Rec.	195-198	383176	Pacific	213 of Official Rec.	649-652	55707
Clark	Aud. Microfilm No.	702859-702862	G-519253	Pend Oreille	27 of Mtgs.	8-11	
Columbia	49 of Deeds	198-201	F 3115	Pierce	1254 of Mtgs.	707-710	126854 2250799
Cowlitz	747 of Official Rec.	234-237	675475	San Juan	28 of Mtgs.	459-462	69282
Douglas	125 of Mortgages	120-123	151893	Skagit	19 of Official Rec.	80-83	716277
Ferry	28 of Deeds	413-416	153150	Skamania	47 of Mtgs.	41-44	70197
Franklin		138-141	309636	Snohomish	233 of Official Rec.	540-543	2043549
Garfield	Microfilmed Under	Aud. No.	13044	Spokane	14 of Official Rec.	1048-1051	376267C
Grant	44 of Rec. Doc.	373-376	538241	Stevens	109 of Mtgs.	394-397	390635
Grays Harbor	21 of General	31-34	207544	Thruston	454 of Official Rec.	731-734	785350
Island	181 of Official Rec.	710-713	211628	Wahkiakum	17 of Mortgages	89-92	24732
Jefferson	4 of Official Rec.	316-319	196853	Walla Walla	308 of Mtgs.	711- <b>7</b> 14	495721
King	5690 of Mtgs.	436-439	6382309	Whatcom	82 of Official Rec.	855-858	1047522
Kitsap	929 of Official Rec.	480-483	934770	Whitman	1 of Misc.	291-294	382282
Kittitas	111 of Mortgages	361-364	348693	Yakama	712 of Official Rec.	147-150	2170555
Klickitat	101 of Mortgages	107-110	131095				

A copy of such Master Form Deed of Trust is hereby furnished to the person executing this Deed of Trust and by executing this Deed of Trust the Grantor acknowledges receipt of such Master Form Deed of Trust.

The property which is the subject of this Deed of Trust is not used principally or primarily for agriculture or farming purposes.

The undersigned Grantor requests that a copy of any Notice of Default and of any Notice of Sale hereunder be mailed to him the address hereinbefore set forth.

WITNESS the hand(s) and seal(s) of the Grantor(s) on the day and year first above written.

1/23/04 Mandy 8 July				
1.23 of lighthia Salling				
	Michaely (See My 1111)			
	AND CONTRACTOR			
STATE OF WASHINGTON,	PUBLIC SUPERIOR SERVICE SERVIC			
County of Staget ss.	THE TOP WASHINGTON			
I hereby certify that I know or have satisfactory evidence	lynthia sullenga			
is 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 this instrument.  Dated 2 2 2 2 2	Clarka Daroll			
residing a March 100 vtc 5	Notary Public in and for the State of Washington			
My appointment expires 13.200	Mariathataria			
BEOMEST FOR FILLT	Printed Name  PECONVEYANCE			
REQUEST FOR FULL RECONVEYANCE				

be used only when all obligations have been paid under the note and this Deed of Trust TO: TRUSTEE.

The undersigned is the legal owner and holder of the note and all other indebtedness secured by the within Deed of Trust. Said note, together with all other indebtedness secured by said Deed of Trust, has been fully paid and satisfied; and you are hereby requested and directed, on payment to you of any sums owning to you under the terms of said Deed of Trust, to cancel said note above mentioned, and all other evidences of indebtedness secured by said Deed of Trust delivered to you herewith, together with the said Deed of Trust, and to reconvey, without warranty, to the parties designated by the terms of said Deed of Trust, all the estate now held by you thereunder.

Dated

Mail reconveyance to \_

Do not lose or destroy this Deed of Trust OR THE NOTE which in

Trustee before cancellation will be made.



**Skagit County Auditor**