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Return Address: Wells Fargo Bank N.A. DOCUMENT MANAGEMENT P. O. BOX 31557 BILLINGS, MT 59107

State of Washington

Space Above This Line For Recording Data

REFERENCE # 2006/1587100132 ACCOUNT #: 0651-651-0358804~1998

## SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is 06/26/2006 and the parties are as follows:

TRUSTOR ("Grantor"):
JIM L. FRISK, A SINGLE MAN

whose address is: 14920 HOXIE LN ANACORTES, WA, 98221

TRUSTEE: Wells Fargo Financial National Bank

2324 Overland Ave., BILLINGS, MT 59102

BENEFICIARY ("Lender"): Wells Fargo Bank, N.A.

P. O. BOX 31557

BILLINGS, MT 59107

For good and valuable consideration, the receipt and sufficiency of which is CONVEYANCE. 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 6 AND 7. BLOCK 141, 'FIDAIGO CITY WASHINGTON', AS PER PLAT RECORDED IN
VOLUME 2 OF PLATS, PAGE 113, RECORDS OF SKAGIT COUNTY, WASHINGTON. TITLE TO
SAID PREMISES IS VESTED IN JIM L. FRISK A SINGLE MAN BY DEED FROM RICK J TWIGGS AND RHONDA R. TWIGGS, HUSBAND AND WIFE DATED 12/27/1993 AND RECORDED 12/301993 AS INSTRUMENT NO. 9312300182.

with the address of 14920 HOXIE LN ANACORTES, WA 98221 and parcel number of P73180 together easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, WASHINGTON - DEED OF TRUST EQ249A (11/2005)

- 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.
- MAXIMUM OBLIGATION LIMIT AND SECURED DEBT. The total amount which this Security Instrument will secure shall not exceed \$64,000.00 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 06/26/2046
- 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 of the Official Records 9702060051 in Book 1626 at Page 0614 in the Office of the Auditor of SKAGIT County, State of Washington, are hereby incorporated into, and shall govern, this Security Instrument.
- USE OF PROPERTY. The property subject to this Security Instrument is not used principally for agricultural or farming purposes.

RIDERS. If checked, the following are applicable to this Security Instrument. The covenants and agreements of each of the riders checked below are incorporated into and supplement and amend the terms of this Security Instrument.

M/A Third Party Rider

NZA Leasehold Rider

N/A Other N/A

Skagit County Auditor

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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).

TWI FRISK JIM I PRICK	Grantor	GLOSTOC PORTO
JIM L FRISK	Grantor	Date
	Grantor	Date
	Grantor	Date
	Grantor	Date
	Grantor	Date
ACKNOWLEDGMENT: (Individual) STATE OF WASHING TOW, COUNTY OF	Grantor SKAC VT	Date
I hereby certify that I know or have satisfactory evidence that	JIM LEE	Ss. FRISK is/are the
person(s) who appeared before me and said person(s) acknowledged it to be his/her/their free and voluntary act for		signed this instrument and
O-28-06  Signature) ELLY M. WILLIS  (Print name and include title)	Sarah Marini	SINITIAN STANDARD STA
My Appointment expires: 1-19-10	Affix Se OT PARTIES OF WAR	af or Stamp A

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