

136643

PIERCE COUNTY, WA
9909130720
9-13-1999 02:24 PM
Fee Amt: \$9.00

BOOK 194 PAGE 457

FILED
SKAMANIA
BY Nationwide Recording Svc.

OCT 25 2 55 PM '99

AMOSAR

GARY H. OLSON

When Recorded Mail to:
Nationwide Recording Service
17352 Daimler Street, Ste 200
Irvine, CA 92614
Code: WFD

DATA

State of Washington

Space Above This Line For Recording Data

SHORT FORM DEED OF TRUST

6020126 2001
19992030600020

1. **DATE AND PARTIES.** The date of this Short Form Deed of Trust ("Security Instrument") is
08-13-1999 and the parties are as follows:

TRUSTOR ("Grantor"):
SIMON MARTIN SASSE AND CAROL J SASSE, HUSBAND AND WIFE

whose address is:
201 ABERDEEN DRIVE WASHOUGAL, WA 98671

TRUSTEE: WELLS FARGO BANK (ARIZONA), N.A., 4832 East McDowell Rd., Phoenix, AZ 85008

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 SKAMANIA, State of Washington, described as follows:
LOT 29, SKAMANIA HIGHLANDS, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE AND OF RECORD, PAGE 140, BOOK "A" OF PLATS, IN THE COUNTY OF SKAMANIA AND STATE OF WASHINGTON.

RE-RECORDING IN CORRECT COUNTY

with the address of 201 ABERDEEN DRIVE WASHOUGAL, WA 98671
and parcel number of 02-05-19-2-0-0129-00, 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 \$ 40,000.00 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 08-15-2014.

W298A (10/97)

1

WASHINGTON - DEED OF TRUST
9909130720

BOOK 194 PAGE 458

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 07, 1997 as Auditor's File Number 127303 in Book 162 at Page 486 of the Official Records in the Office of the Auditor of SKAMANIA 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>Simon Martin Sasse</u>	Grantor	<u>8/14/99</u>
SIMON MARTIN SASSE		Date
<u>Carol J Sasse</u>	Grantor	<u>8/14/99</u>
CAROL J SASSE		Date
_____	Grantor	_____
		Date
_____	Grantor	_____
		Date

ACKNOWLEDGMENT:
(Individual)

STATE OF Washington, COUNTY OF Clark ss.

I hereby certify that I know or have satisfactory evidence that Simon Martin Sasse and Carol J Sasse

_____ 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: 8-14-99

[Signature]
(Signature)
Claudia Rossman Notary
(Print name and include title)

My appointment expires: 6-29-00



(Affix Seal or Stamp)

9909130720