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Recording Requested by: Wells Fargo Bank When Recorded Return to: Fidelity National LPS P. O. BOX 19523 Irvine, CA 92623-9523 Code: WFD

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REFERENCE#: 20022707400249ACCOUNT#: 0654-654-4390997-1998

## SHORT FORM LINE OF CREDIT DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Form Line of Credit Deed of Trust ("Security Instrument") is and the parties are as follows:

TRUSTOR ("Grantor"):

MICHELLE OCAMPO, A MARRIED WOMAN, WHO ACQUIRED TITLE AS MICHELLE R. LANGMACHER

whose address is:

5131 BRISTOL AVE KLAMATH FALLS, OR, 97603

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.

P. O. BOX 31557 BILLINGS, MT 59107

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 KLAMATH ,State of Oregon, described as follows:

THE FOLLOWING DESCRIBED REAL PROPERTY LOCATED IN THE CITY OF KLAMATH FALLS, COUNTY OF KLAMATH, STATE OF OREGON, DESCRIBED AS FOLLOWS: PARCEL 3 OF LAND PARTITION 68.95 SITUATED N THE SOUTH ONE HALF NORTHWEST ONE QUARTER OF THE SOUTHEAST ONE QUARTER OF SECTION 11, TOWNSHIP 35 SOUTH, RANGE 9 EAST OF THE WILLAMETTE MERIDIAN.

with the address of 5131 BRISTOL AVE KLAMATH FALLS, OR 97603 and parcel number of R879998 , 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 \$ 12,000.00 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 10/08/2027.

1

Instrument, Grantor agrees that all provisions and sections of ("Master Form"), inclusive, dated February 1, 1997 and recorde Number 32645 in Book M 97 of the Official Records in the Office of the Recorder of KLAMATH Oregon, are hereby incorporated into, and shall govern, this Secur of each of the riders checked below are incorporated into and su Instrument.  NA Third Party Rider  NA Leasehold Rider  NA Other  SIGNATURES: By signing below, Grantor agrees to perform all co	the Master Form I d on February at Pag d irity Instrument. rity Instrument and ame	Line of Credit Deed of Trust 10, 1997 as Instrument te 4115  County, State of the covenants and agreements and the terms of this Security
Instrument. Grantor also acknowledges receipt of a copy of this do	cument and a copy	
in the previously recorded Master Form (the Deed of Trust-Bank/Cus	stomer Copy).	
Michelle Campo-		10-11.02
porcours	Grantor	Date
	Grantor	Date
ACKNOWLEDGMENT: (Individual)	_	
STATE OF MAGON, COUNTY OF	anack	}} ss.
This instrument was acknowledged before me on	HOS by	Makille
Deanyle 10	-	
(Signature of notarial officer)		
Title (and Rank)	(SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS	OFFICIAL SEAL
My Commission expires: Ott 2,2005		LAURA D. BERGMAN NOTARY PUBLIC-OREGON NOTARY PUBLIC-OREGON COMMISSION NO. 350468 COMMISSION NO. 350468 COMMISSION NO. 350468

## ALL-PURPOSE ACKNOWLEDGEMENT

State of Megon, Tamak County ss: On October 11, 2003 before me, Laura Bluznan
On Vetober 11, 2003 before me, Laura Blugnan
Personally appeared Muckelle Deampo
Personally known to me -OR- proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature:

4 D. Bergman

Name (typed or printed)

My Commission Expires: \_\_\_\_

