## 2008-004636 Klamath County, Oregon



03/31/2008 09:01:45 AM

Fee: \$36.00

## ALL TRANSACTIONS, ORS: 205.234

This cover sheet has been prepared by the person Presenting the attached instrument for recording. Any errors in this cover sheet DO NOT affect the Transaction(s) contained in the instrument itself.

## AFTER RECORDING RETURN TO:

Wells Fargo Bank, N.A. P.O. Box 31557 MAC B6955-013 Billings, MT 59107-9900 THIS SPACE RESERVED FOR
COUNTY RECORDING USE ONLY

PRINT or TYPE ALL INFORMATION

2) DIRECT PARTY / GRANTOR, required by ORS 2	
RONALD F RASMUSSEN	LOUISE M RASMUSSEN
3) INDIRECT PARTY / GRANTEE, required by ORS Wells Fargo Bank, N.A.	S 205.125(1)(b) and ORS 205.160
4) TRUSTEE NAME and ADDRESS Wells Fargo Financial National Bank, c/o Spe	cialized Services, PO Box 31557 Billings, MT 59107
그렇게 하다 하다 살게 살아 있다. 그 말이 되는 것이 모양되었다.	O THE FOLLOWING ADDRESS:
5) All TAX STATEMENTS SHALL BE SENT I RONALD F RASMUSSEN , 42945 OLD KORR	AL RD, CHILOQUIN, OREGON 97624
5) All TAX STATEMENTS SHALL BE SENT T RONALD F RASMUSSEN, 42945 OLD KORR. 6) TRUE and ACTUAL CONSIDERATION (if any), \$ 20,000.00	AL RD, CHILOQUIN, OREGON 97624 ORS 93.030
RONALD F RASMUSSEN , 42945 OLD KORR. 6) TRUE and ACTUAL CONSIDERATION (if any), \$ 20,000.00	AL RD, CHILOQUIN, OREGON 97624 ORS 93.030

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Previously recorded as

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Until a change is requested, all tax statements shall be sent to the following address:
RONALD F RASMUSSEN
42945 OLD KORRAL RD
CHILOQUIN, OREGON 97624

Prepared by: Wells Fargo Bank, N.A. NICHOLAS DRESSEN DOCUMENT PREPARATION ONE HOME CAMPUS, MAC X2303-01W DES MOINES, IOWA 50328-0001 866-537-8489

Return Address: Wells Fargo Bank, N.A. P.O. Box 31557 MAC B6955-013 Billings, MT 59107-9900

TAX ACCOUNT NUMBER R189030

\_\_\_\_\_State of Oregon \_\_\_\_\_\_ REFERENCE #: 20080457300071 -Space Above This Line For Recording Data
Account number: 651-651-2394344-0XXX

## SHORT FORM LINE OF CREDIT DEED OF TRUST

(With Future Advance Clause)

 DATE AND PARTIES. The date of this Short Form Line of Credit Deed of Trust ("Security Instrument") is MARCH 03, 2008 and the parties are as follows:

TRUSTOR ("Grantor"): RONALD F. RASMUSSEN AND LOUISE M. RASMUSSEN, HUSBAND AND WIFE

whose address is: 42945 OLD KORRAL RD, CHILOQUIN, OREGON 97624

TRUSTEE: Wells Fargo Financial National Bank, c/o Specialized Services, PO Box 31557 Billings, MT 59107

BENEFICIARY ("Lender"): Wells Fargo Bank, N.A., 101 North Phillips Avenue, Sioux Falls, SD 57104

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 <u>KLAMATH</u>, State of Oregon, described as follows: ALL THAT REAL PROPERTY SITUATED IN THE COUNTY OF KLAMATH, STATE OF OREGON, DESCRIBED AS: PARCEL 1 OF LAND PARTITION 32-93, SITUATED IN THE E1/2 NW1/4 NW1/4 OF SECTION 23, TOWNSHIP 34 SOUTH, RANGE 7 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON.

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- with the address of 42945 OLD KORRAL ROAD, CHILOQUIN, OREGON 97624 and parcel number of R189030, 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 \$ 20,000.00 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 not later than seven (7) calendar days after MARCH 05, 2023.
- 4. MASTER FORM LINE OF CREDIT DEED OF TRUST. By the delivery and execution of this Security Instrument, Grantor agrees that all provisions and sections of the Master Form Line of Credit Deed of Trust ("Master Form"), inclusive, dated February 1, 1997 and recorded on 2/10/1997 as Instrument Number 32645 in Book M 97 at Page 4115 of the Official Records in the Office of the Recorder of KLAMATH County, State of Oregon, are hereby incorporated into, and shall govern, this Security Instrument.
- 5. 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.

N/A	Third Party Rider			
N/A	Leasehold Rider			
N/A	Other: N/A			

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).

Grantor RONALD F RASMUSSEN

Date

Acruse M. Rusmussen

3-3-8

Date

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	LEDGMENT: ridual Acting In His/Her Own Right:	
State of Oreg	gon /	
County of _	Thanathe,	
	This instrument was acknowledged before Ronald F RASMUSSEN	me on $\frac{3/3/08}{}$ (date) by
	LOWISK M RASMUSSEN	(name(s) of person(s))
	(Seal, if any)	(Signature of notarial officer)

My commission expires: 10/5/09



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