

A298-10 R298-04

QUITCLAIM DEED

this QUITCLAIM DEED, Executed this 11th day of August, 1999 (year), by first party, Grantor, Lyle + Irene Fox whose post office address is 18049 Peterson Road, Burlington, WA 98233 to second party, Grantee, Jeffrey + Laurie Miller whose post office address is 111 Sioux Orive, Mt. Vernon, WA 98273

WITNESSETH, That the said first party, for good consideration and for the sum of NO Dollars (\$ 0.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Skagit , State of Washington to wit:

Lot #2 of

Short Plat # Burl. 1-99 AF# 1999.0730 0051

Sect. 31 Town 35 Range 4

(3.00 AC) Burlingkn AC S 208 Ft OF W1/2

Less E 33 FT TR 47

SKAGIT COUNTY WASHINGTON

Bed Fisher Excise (Fe)

Account # 3867-000-047-0209 (Porthonistes)

AUG 1 2 1999

Skagh County Toessurer By:

AZHH

Rev. 6/98

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.



IN WITNESS WHEREOF, The said first party has signed a	and sealed these presents the day and year first above
written. Signed, sealed and delivered in presence of:	0
	$\mathcal{A} \cap \mathcal{A} \mathcal{A}$
and the state of t	Aule W. fox
Signature of Witness	Signature of First Party
	14/2 R FOX
	Lyle 1.
Print name of Witness	Print name of First Party
	N 11
	Irene I top
Signature of Witness	Signature of First Party
	T. f F
	I Rene I, Fox
Print name of Witness	Print name of First Party
State of Whinten	
County of Skan 7	
On Avenut II, 1999 before me, Lyle R.	Fox and I rene I Fox .
appeared Hyberl	600 (3.Pe
personally known to me (or proved to me on the basis of sati	sfactory evidence) to be the person(s) whose name(s)
is/are subscribed to the within instrument and acknowled	
his/her/their authorized capacity(ies), and that by his/her/their	
entity upon behalf of which the person(s) acted, executed the	instrument.
WITNESS my hand and official seal.	EC+
	17/
CA ST TARY	" \ \
CO G STOTARY	A 65 and Vinceum Dradwood ID
Signature of Mosary	AffiantKnownProduced ID Type of ID
07 B-25-95	(Seal)
State of County of	HIT
County of	
On before me,	
appeared	
personally known to me (or proved to me on the basis of sati	sfactory evidence) to be the person(s) whose name(s)
is/are subscribed to the within instrument and acknowled	
his/her/their authorized capacity(ies), and that by his/her/their	
entity upon behalf of which the person(s) acted, executed the	instrument.
WITNESS my hand and official seal.	
Signature of Notary	Affiant Known Produced ID
	Type of ID
	(Seal)
•	
	Signature of Preparer
	The state of the s
	Print Name of Preparer
	and the second of the second
	All CD
	Address of Preparer
(2)	

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.