

WHEN RECORDED RETURN TO

Name Peoples Bank

Address P.O. Box 233

City, State, Zip Lynden Wa 98264

LAND TITLE

My appointment expires: .....

LAND TITLE COMPANY	
FILED FOR RECORD AT REQUEST OF  Land Title Company	1 AND TITLE COMPANY OF DAY AND ADDRESS.
Partial F	Reconveyance P-92961
	Deed of Trust dated October 10 1997
in which MICHAEL S JONES AND KATHI	RYN L JONES is grantor
of Official Records, page, records of received from the beneficiary under said Deed of Tru described in said deed, does hereby reconvey, without	is beneficiary, No. 9710140049  Skagit  County, Washington, having ast a written request to reconvey a portion of the real property out warranty, to the person(s) entitled thereto, the right, to the portion of the real property described in said Deed of County, Washington, as follows:
Quarter of Section Twenty-Three, Tow	of the Southwest Quarter of the Southwest wnship Thirty-Four North, Range Four East County road along the East line thereof, less.
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Dated	340423-3-011-0000
	LAND TITLE COMPANY OF SKAGIT COUNTY
	(Trustee)
	By Falle London
	BILL RONHAAR MANAGER
STATE OF WASHINGTON COUNTY OF  On this day personally appeared before me	STATE OF WASHINGTON Stagit ss.
On this day personally appeared before me NOTAR	On this 2nd day of May 2000 before e, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared.  BILL RONHAAR to me known to be the authorized signatory of Land Titale. Company the
to me known to be the individual described in anthwho	BILL RONHAAR ,, to me known to be the authorized signatory of Land Title Company , the corporation that executed the foregoing instrument, and acknowledged said
knowledged that free and voluntary account deed	corporation that executed the foregoing instrument, and acknowledged said in the instrument to be the free and voluntary act and deed of said corporation, for the ses and purposes therein mentioned, and on oath stated that he is
for the uses and purposes therein mentioned.	authorized to execute the said instrument.
GIVEN under my hand and official seal this day of	Witness my hand and official seal hereto affixed the day and year first above written.
Notary Public in and for the State of Washington,	SHARON R. ANTHONY  Notary Public in and for the State of Washington,  MOUNT VERNON

Form No. LT-16A Part (11/96)

My appointment expires: 9-6-2001