



200005090090
 Kathy Hill, Skagit County Auditor
 5/9/2000 Page 1 of 2 1:25:24PM

A298-10
 R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 9th day of MAY, 2000 (year),
 by first party, Grantor, KENNETH MARSHALL BREBNER, JR.
 whose post office address is 19724 MONTPILIAR PL., MOUNT VERNON, WA. 98274
 to second party, Grantee, KENNETH MARSHALL BREBNER, JR.
SHARON LOUISE BREBNER
 whose post office address is 19724 MONTPILIAR PL., MOUNT VERNON, WA. 98274

WITNESSETH, That the said first party, for good consideration and for the sum of
 Dollars (\$) 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 there-
 to in the County of SKAGIT, State of WASHINGTON to wit:

LEGAL DESCRIPTION: LOT 13, SKYRIDGE DIVISION #7

ADDRESS: 19724 MONTPILIAR PL.
MOUNT VERNON, WA. 98274

35197
 SKAGIT COUNTY WASHINGTON
 Real Estate Excise Tax

P10 26 77

MAY 09 2000

Amount Paid \$
 Skagit Co. Treasurer
 By [Signature] Deputy

AQHH (1)

Rev. 4/99

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



0 53926 20040 5

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Print name of Witness

Signature of Witness

Print name of Witness

Kenneth M. Brebner
Signature of First Party

KENNETH M. BREBNER
Print name of First Party

Signature of First Party

Print name of First Party

State of Washington }
County of Skagit

On May 9, 2000 before me, Katie Kroon, notary
appeared Kenneth M. Brebner

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name 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.

Katie Kroon
Signature of Notary

Affiant Known Produced ID
Type of ID AZ DL

018 267082 (Seal)

State of _____ }
County of _____
On _____ before me,
appeared _____

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(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 of Notary

Affiant Known Produced ID
Type of ID _____ (Seal)

Signature of Preparer

Print Name of Preparer

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.



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