

Return Address:

James Beattie  
9468 Prospect Street  
Sedro Woolley, Wa. 98284



200005310101

Kathy Hill, Skagit County Auditor  
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FIRST AMERICAN TITLE CO.

**STATUTORY WARRANTY DEED** 62237-1

**THE GRANTOR(S), John L. Peters, as his separate estate**

**for and in consideration of Ten Dollars (\$10.00) and other good and valuable consideration**

**in hand paid, conveys and warrants to James Beattie and Tanna Beattie, Husband and wife**

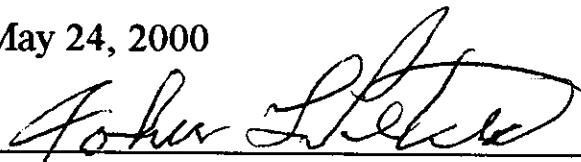
**the following described real estate, situated in the County of Skagit , State of Washington.**

Lot 1, and the South 85 feet of Lot 2, "MOUNTAIN VISTA ADDITION, SKAGIT COUNTY, WASHINGTON", according to the plat thereof recorded in volume 7 of Plats, pages 65, records of Skagit County, Washington.

**SUBJECT TO:** All easements, restrictions, reservations and agreements of record, if any.

**Tax Account # 3960-000-001-0001 (R67631) & 3960-000-002-0109(R67633)**

May 24, 2000

  
\_\_\_\_\_  
John L. Peters

STATE OF WASHINGTON  
COUNTY OF Skagit

On this day personally appeared before me John L. Peters

to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that he signed the same as his free and voluntary act and deed, for uses and purposes therein mentioned.

GIVEN under my hand and official seal this 29<sup>th</sup> day of May, 2000.

Notary Public in and for the State of Washington, residing at Everett  
My appointment expires 11/19/2000

NOTARY SEAL

STATE OF WASHINGTON  
COUNTY OF \_\_\_\_\_

I certify that I know or have satisfactory evidence that \_\_\_\_\_

is the person(s) acknowledged that \_\_\_\_\_ signed this instrument on oath stated that \_\_\_\_\_ authorized to execute the instrument and acknowledged it as the \_\_\_\_\_ of \_\_\_\_\_ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

NOTARY SEAL

35554  
SKAGIT COUNTY WASHINGTON  
Real Estate Excise Tax

MAY 31 2000

Amount Paid \$ 2005.83  
By AKW Skagit Co. Treasurer Deputy

Dated \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_  
My appointment expires \_\_\_\_\_