



200105180131
Skagit County Auditor
5/18/2001 Page 1 of 2 2:35:18PM

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 15 day of MAY, 2001 (year),

by first party, Grantor, ANTONY Sharipoff

whose post office address is P.O. Box 293 Woodburn, OR 97071

to second party, Grantee, Sharipoff Family Trust

whose post office address is P.O. Box 962 Mulino OR 97042

WITNESSETH, That the said first party, for good consideration and for the sum of
One Dollars (\$ 1.00) 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 there-
to in the County of Skagit, State of WASHINGTON to wit:

40929
Property Description:
SKAGIT COUNTY WASHINGTON
Real Estate Excise Tax
PAID

MAY 18 2001

Amount Paid \$0
Skagit County Treasurer
By: *Man* Deputy

TAX ACCT. # 350617-2-002-0008
P41551

(5.87 AC) LOT 1 SHORT PIAT #96-007 RE
Corded Under AF#9707020001; Being a
Portion of the NW1/4 NW1/4 Lying
Northerly of STATE HWY 20

AKHH
(1)

Rev. 6/98

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

Signature of First Party

Print name of First Party

Signature of First Party

Print name of First Party

State of Oregon
County of Clackamas

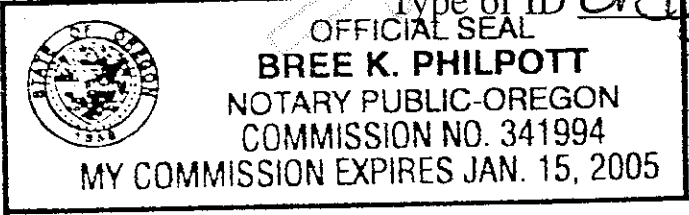
On May 17, 2001 before me, Bree Philpott
appeared Antony Sharipott

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

Bree K Philpott
Signature of Notary

State of
County of
On
appeared

before me,



Affiant Known Produced ID
Type of ID Oregon Driver's License.
(Seal)

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