, Skagit County Auditor

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Parcel No.:

3867-000-005-0001/P62278

Legal Desc.:

Ptn Tr. 5, Burlington Acreage Property

LAND TITLE COMPANY OF SKAGIT COUNTY

OUIT CLAIM DEED

THE GRANTOR, The Wiggins Trust, dated January 13, 1994, for and in consideration of NO MONETARY CONSIDERATION, in distribution of the trust, conveys and quit claims to Judy Anderson, a single woman, as her separate property, THE GRANTEE, the following described real estate, situated in the County of Skagit, State of Washington, together with all after acquired title of the Grantor therein:

An undivided % interest in the property described on Exhibit "A" attached hereto

41879

SKAGIT/COÚNTY WASHINGTON Real Estate Excise Tax

PAID

Dated this | O day of

JUL 13 2001

Amount Paid \$10 Skagit County Treasurer man Deputy

The Wiggins Trust

Linda Bobb, Co-Trustee

Judy Anderson, Co-Trustee

Exhibit "A"

AN UNDIVIDED & INTEREST IN THE FOLLOWING DESCRIBED PROPERTY:

That portion of the East 374 feet of the West ½ of Tract 5, "PLAT OF THE BURLINGTON ACREAGE PROPERTY", as per plat recorded in Volume 1 of Plats, page 49, records of Skagit County, Washington, that lies North of the County road (now State Highway) right of way, EXCEPT a portion thereof described as follows:

Beginning at the Northwest corner of the East 374 feet of the West % of said Tract 5;

thence South parallel with the East line of said West ½ of Tract 5 to intersect with the North right of way line of the County road (now State Highway);

thence Northeasterly along said right of way 106 feet; thence due North to the North line of said Tract 5; thence West to the point of beginning.

TOGETHER WITH the portion of an unnamed street adjoining the North boundary thereof, which upon vacation reverted to said premises by operation of law.

Situate in the County of Skagit, State of Washington.

200107160002 , Skagit County Auditor

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STATE OF WASHINGTON

38

County of Skagit

I hereby certify that I know or have satisfactory evidence that Linda Bobb is the person who personally appeared before me, and said person acknowledged that she signed this instrument, on oath stated that she was authorized to execute the instrument and acknowledged it as the Co-Trustee of The Wiggins Trust, dated January 13, 1994, to be the free and voluntary act of such party for the uses and purposes mentioned in this instrument.

Dated this _____day of May, 2001.

Notary Public in and for the State of Washington, residing at

My appointment expires _____

STATE OF WASHINGTON

SS

County of Skagit

I hereby certify that I know or have satisfactory evidence that Judy Anderson is the person who personally appeared before me, and said person acknowledged that she signed this instrument, on oath stated that she was authorized to execute the instrument and acknowledged it as the Co-Trustee of The Wiggins Trust, date January 13, 1994, to be the free and voluntary act of such party for the uses and purposes mentioned in this instrument.

Dated this 10 day of May, 2001.

Notary Public is and for the State of Washington, residing at

My appointment expires 7-9-04



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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

California		
State of Call Ornia	_	
county of LOS Amael	es	
V/20/1-701 0	Aladic Ballonia	
On before me, _	Name and Tiple of Officer (e.g., "Jane Doe, Notary Pulpinc")	
personally appeared LINGG	Bobh	
Name(s) of Signer(s)		
	on the basis of satisfactory evidence to be the person(s) hose name(s) is/are subscribed to the within instrument	
	nd acknowledged to me that he/she/they executed the	
se se	ame in his/her/their authorized capacity(iee), and that by	
	s/her/their signature(e) on the instrument the person(s),	
Commission # 1243293	r the entity upon behalf of which the person(a) acted, secuted the instrument.	
Los Angeles County		
My Comm. Expires Moy 11, 2004 WITNESS my hand and official seal.		
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~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Signature of Motarly Public	
	TIONAL	
	Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.	
Description of Attached Document		
Title or Type of Document:		
Decument Date	Number 15	
Document Date:	Number of Pages:	
Signer(s) Other Than Named Above:		
Canacity(ica) Claimed by Signey(a)		
Capacity(ies) Claimed by Signer(s)		
Signer's Name:	Signer's Name:	
□ Individual	□ Individual	
☐ Corporate Officer	☐ Corporate Officer	
Title(s):	Title(s): ☐ Partner — ☐ Limited ☐ General	
☐ Partner — ☐ Limited ☐ General ☐ Attorney-in-Fact	☐ Partner — ☐ Limited ☐ General	
☐ Trustee	☐ Attorney-in-Fact☐ Trustee	
☐ Guardian or Conservator ☐ Guardian or Conservator ☐ Grandian or Conservator ☐ Grandian or Conservator	☐ Guardian or Conservator RIGHT THUMBPRINT OF SIGNER	
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