

Skagit County Auditor 8/27/2002 Page 1 of 1 11:39AM

WHEN RECORDED RETURN TO

Name First American Title

Address P.O. Box 1667

My appointment expires:

City, State, Zip. Mount Verno	n Wa 98273						
) A						
Land Title Company							
FILED FOR RECORD AT REQU	EST OF						
LAND TITLE	COMPANY						
	10 270	con	veyance	M-	13362		
The undersigned as trusted	WITHOUT SATIS	FACT	TION OF NOTE		8 2001	,	
in which JERRY A HIGHET AND SHELLIE D EUBANKS, is granter							
and	8-2001, as County, Washingto convey, reciting that nvey, without warrar	Aucon, h t the nty, t	ditor's File No having received obligations sector the person(property describ	.2001061 from the bured by the (s) entitle	80180 eneficiary e Deed of d thereto	under said Deed Trust have been all of the right,	
	**************************************		and the second second				
Lot 6, Block	k 1 Replat of S	Sami	ish Terrace				
•	•						
As in the a	bove referred	to T	leed of True	4. L.			
Dated August 27 2002			LAND TITI	E COMPA	NY OF SK	AGIT COUNTY	
			By Pau BILL F	RONHA ARM	Dag	MANAGER	
STATE OF WASHINGTON COUNTY OF	ss.		TE OF WASHING JNTY OFSk		SS:		
On this day personally appeared before me			On this 27th day of August 2002 before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared				
to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that signed the same as free and voluntary act and deed, for the uses and purposes therein mentioned.			the authorized signatory of LAND TITLE COMPANY the corporation that executed the foregoing instrument, and acknowledged said instrument to be the free and voluntary act and deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that he is authorized to execute the said instrument.				
GIVEN under my hand and and and and and and and and and	SHARON R! ANTHO TATE OF WASHING	ΝΫ́ ^{itt}	ess my hand and officent	cial seal hereto	affixed the da	A how	
	NOTARY PUBL	_		Motory Public	ARON R A in and for the OUNT VER	State of Washington	

Form No. LT-16 Full (4/99)

My appointment expires: 9./.6./.200.5....