

1/9/2006 Page

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211:35AM

AFTER RECORDING MAIL TO:

Name

Gary F. Linden P O. Box 21846

Address City/State

Seattle, WA 98111-3846

Personal Representative's Deed

THE GRANTOR JUDITH S. SCHWENK, as the duly appointed, qualified, and acting personal representative of the Estate of WALTER G. SCHWENK, Deceased ("Decedent"), in Probate Cause Number 03-4-00327-1 in SKAGIT County Superior Court of Washington, and not in her individual capacity, and as authorized by order entered in the above entitled Court to settle the Estate of WALTER G. SCHWENK without intervention of any court for and in consideration of compliance with the terms of the Will of Decedent, does convey, grant and confirm to JUDITH S. SCHWENK, all of the Decedent's undivided community property interest in and to the following described real estate, situated in the County of SKAGIT State of Washington, together with all other interest of the decedent and the grantor therein:

Lots 22 and 23, SKYLINE NO. 1, according to the plat thereof recorded in Volume 8 of Plats, page 49, records of Skagit County, Washington

Assessor's Property Tax Parcel/Account Number(s): 3817-000-023-0000

Commonly known as 5519 Sugarloaf Street. Anacortes WA 09221

DATED this ZZ day of December

2005

SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX

JAN 0 9 2006

Antoun: Paid 3
Skapit Ct. Treasurer

JUDITH S. SCHWENK

as Personal Representative of the Estate of WALTER G. SCHWENK, Deceased and not in an individual capacity

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County of Skagit

SS.

On this 22 day of Determine, 2005, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared JUDITH S. SCHWENK, to me known to be the personal representative of the Estate of WALTER G. SCHWENK, deceased, ("Estate") and who executed the within and foregoing instrument and acknowledged said instrument to be her free and voluntary act and deed for the uses and purposes therein mentioned; and on oath stated that she was authorized to execute the said instrument as Personal Representative of said Estate.

IN WITNESS WHEREOF I have hereunto set my hand and official seal the day and year first above written.

NOTAA-

Name (typed or printed): OLIVIA M. (ISHEK)
NOTARY PUBLIC in and for the State of WASHINGTON
Residing at TMACOVAS

My appointment expires: 12/31/06



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