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Recording requested by:	
When recorded, mail to:	·
Name: Susan A. Sketer	Space above reserved for use by Recorder's Office
Address: 9508 16+ Dew	Document prepared by:
City: Everet	Name Susan A Slater
State/Zip: UPA 96204	Address (150% 167 020)
	City/State/Zip Evert WA GFZOY
Property Tax Parcel/Account Number: P633	33-3869-011-008-0003
QUITCL	AIM DEED
Lauby _ ~	وساران
This Quitclaim Deed is made on Jone E Lauby, Dennis Gene 3r.	, between
and Dean's Lead & Grantor,	of 4206 S 3RD Ave,
City of Evereti Lauby	, State of WAShing ton, and
Grantes Susce Find Grantes of	usan Ann f CISOS (6+2 OR W)
City of Colorect	, State of wal.
For valuable consideration, the Grantor hereby quitclain	ns and transfers all right, title, and interest held by the
	ovements to the Grantee, and his or her heirs and assigns, to
	loth shore lane.
City of Sedro Woover	, State of USA STORY :
LOT 8, Block K,	Plat of Cope Hornorth
Skagit Grown Disisi	
474 41747 r	north Shore Lane
Sedro W	North Shore Lane Doolley Lua 98284
Subject to all easements, rights of way, protective cover	nants, and mineral reservations of record, if any. Taxes for
the tax year of Soci 7 shall be prorated between the	ne Grantor and Grantee as of the date of recording of this are also

deed.

Dated: JUNE 08- DOOR			
Dated.		_	
	e.	_	
(Ilm mill)		21.40 - 21.00 TON	
Signature of Grantor		SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX	
DENNIS LALBY TR.		JUN 08 2007	
Name of Grantor		Amount Paid \$6	
		Skagit Co. Treasprei	
		7.001	
Signature of Witness #1		Printed Name of Witness #1	
and the second of the second o			
Signature of Witness #2	77	Printed Name of Witness #2	
2.			
some 11)ach in al.	3	Skaait	
State of Washington (On 68-2507,	the Grantor	Danie Lauber Tr	
personally came before me and, being duly swo	orn, did state an	d prove that he she is the person described in the above	
document and that he/she signed the above document in my presence.			
allera timeto			
Notary Signature Alana Pizzuto	<u> </u>		
		The state of the s	
Notary Public,		W. 1. 1. 1.	
Notary Public, In and for the County of Skagit	State of _	Washington	
My commission expires: 4-10-200		Seal	
Send all tax statements to Grantee.			



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