



200708090126

Skagit County Auditor

8/9/2007 Page

1 of

2 4:20PM

A298-10  
R298-04**QUITCLAIM DEED**

**THIS QUITCLAIM DEED**, Executed this 7 day of JUNE, 2007 (year),  
by first party, Grantor, SHARI POFF FAMILY TRUST  
whose post office address is P.O. BOX 962 MULINO OR 97042  
to second party, Grantee, FEVRUSA SHARIPOFF  
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  
Dollars (\$Love and Affection) 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 WA to wit:

5.87 AC including MANUFACTURED HOME # ORFLY 48A27570HH13  
LOT 1 SKAGIT COUNTY SHORT PLAT # 96-007 RECORDED  
AUDITOR'S FILE # 97070 20001 A PORTION OF THE NORTH  
WEST QUARTER AC # 3506117-2-002-0008 PH1551  
BEING A PORTION OF THE NORTH WEST QUARTER LYING NORTHERLY  
OF STATE HWY 20

3785  
SKAGIT COUNTY WASHINGTON  
REAL ESTATE EXCISE TAX

AUG 09 2007

AQHH (1)

Rev. 4/99

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

By \_\_\_\_\_  
Skagit Co. Treasurer Deputy MAM

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:

Ralph Wartchow  
Signature of Witness

Ralph Wartchow  
Print name of Witness

Debbie Royd  
Signature of Witness

Debbie Royd  
Print name of Witness

SHARPOFF Family Trust  
Signature of First Party

Bradley Sharoff  
Print name of First Party

\_\_\_\_\_  
Signature of First Party

\_\_\_\_\_  
Print name of First Party

State of Naphu nation )  
County of Skagit  
On June 7, 2007 before me,  
appeared Bradley Sharoff

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.

Eileen Wartchow  
Signature of Notary

Affiant Known Produced ID  
Type of ID Driver License (Seal)

State of \_\_\_\_\_ )  
County of \_\_\_\_\_  
On \_\_\_\_\_ before me,  
appeared \_\_\_\_\_

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.

