When recorded return to:

Mr. Jack O. Galbraith 20 Makah Way LaConner, WA 98257

Filed for Record at Request of Land Title and Escrow Escrow Number: 130941-SE

Grantor: Carol Wynn
Grantee: Jack O. Galbraith

Dated September 11, 2008

LAND TITLE OF SKAGIT COUNTY

## 200809150127 Skagit County Auditor

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3:33PM

## **Statutory Warranty Deed**

THE GRANTOR CAROL WYNN, a single woman, as her separate property for and in consideration of TEN DOLLARS AND OTHER GOOD AND VALUABLE CONSIDERATION in hand paid, conveys and warrants to JACK O. GALBRAITH, an unmarried individual the following described real estate, situated in the County of Skagit, State of Washington:

Abbreviated Legal: Lot 20, Shelter Bay Div. 1.

Lot 20, "SHELTER BAY DIV. 1," as per plat recorded in Volume 9 of Plats, pages 80 and 81, records of Skagit County, Washington.

Situate in the County of Skagit, State of Washington.

Tax Parcel Number(s): 3998-000-020-0004, P69100

Subject to all covenants, conditions, restrictions, reservations, agreements and easements of record including, but not limited to, those shown on Schedule "B-1" of Land Title Company's Preliminary Commitment No. 130941-SE.

Carol Wynn  Carol Wynn	SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX
	SEP 1 5 2008  Amount Paid \$ 44/0 . 50  Skapit Co. Treasurer  By Num Deputy
STATE OF California COUNTY OF	
I certify that I know or have satisfactory eviden- the person(s) who appeared before me, and sai signed this instrument and acknowledge it to be	id person(s) acknowledged that  e her free and voluntary act for the
uses and purposes mentioned in this instrument  Dated: September 12, 2008	t.
	Notary Public in and for the State of California
	Residing at  My appointment expires:
	SER ATTACHED

## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California	
County of SAN DOCAUIN	
On Sapt 08, 2008 before me, Richa	RDM. KINSAII-NOTARY Public,
	(Here insert name and title of the officer)
personally appeared CAROL WYNN	· · · · · · · · · · · · · · · · · · ·
the within instrument and acknowledged to me tha	ence to be the person() whose name(s) is/are subscribed to the/she they executed the same in his/her/their authorized on the instrument the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY under the is true and correct.	laws of the State of California that the foregoing paragraph  RICHARD M. KINSALL  COMM. # 1726457 10
WITNESS my hand and official seal.	NOTARY PUBLIC CALIFORNIA SAN JOAQUIN COUNTY MY COMM. EXP. FEB. 23, 2011
Kichen M. Kurill	(Notary Seal)
Signature of Notary Public	
ADDITIONAL OP	TIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT	INSTRUCTIONS FOR COMPLETING THIS FORM  Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be
STATUTORY WARRANTY DEED  (Title or description of attached document)	properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in
(Title or description of attached document continued)	California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.
Number of Pages Document Date 9/11/08	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> <li>Date of notarization must be the date that the signer(s) personally appeared which</li> </ul>
(Additional information)	must also be the same date the acknowledgment is completed.  The notary public must print his or her name as it appears within his or her
	<ul> <li>commission followed by a comma and then your title (notary public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of notarization.</li> </ul>
CAPACITY CLAIMED BY THE SIGNER Individual	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are ) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> </ul>
☐ Corporate Officer	The notary seal impression must be clear and photographically reproducible.  Impression must not cover text or lines. If seal impression smudges, re-seal if a
(Title)  Partner(s)	sufficient area permits, otherwise complete a different acknowledgment form.  • Signature of the notary public must match the signature on file with the office of
☐ Attorney-in-Fact	the county clerk.  Additional information is not required but could help to ensure this
☐ Trustee(s) ☐ Other	acknowledgment is not misused or attached to a different document.  Indicate title or type of attached document, number of page 1.
	Indicate th corporate c

· Securely attach this