



201110040070
Skagit County Auditor

10/4/2011 Page 1 of 2 3:47PM

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[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Quitclaim Deed

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

Date of this Document: SEPTEMBER 26, 2011 ²⁰¹¹²⁹⁹¹
OCT 04 2011

Reference Number of Any Related Documents: _____
Amount Paid \$85.⁰⁰
Skagit Co. Treasurer
By CHAM Deputy

Grantor:

Name CASCADE RIVER COMMUNITY CLUB
Street Address 63887 E. CASCADE DR.
City/State/Zip MARBLEMOUNT, WA, 98267

Grantee:

Name CLEO PARKER / TERESA ERICKSON
Street Address 24443 WICKER ROAD, #32
City/State/Zip SEDRD WOOLLEY, WA, 98284

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range quarter/quarter or unit, building and condo name): LOT 22 DIV 1 CASCADE RIVER PARK

Assessor's Property Tax Parcel/Account Number(s): P63621

THIS QUITCLAIM DEED, executed this 27th day of SEPTEMBER
20 11, by first party, Grantor, CASCADE RIVER COMMUNITY CLUB, whose
mailing address is P.O. BOX 141 MARBLEMOUNT, WA 98267, to
second party, Grantee, CLEO PARKER / TERESA ERICKSON,
whose mailing address is 24443 WICKER RD, #32 SEDRD WOOLLEY, WA 98284

WITNESSETH that the said first party, for good consideration and for the sum of FOUR THOUSAND FIVE HUNDRED
Dollars (\$ 4500.00) 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 thereto in the County of Skagit _____ State of Washington _____

to wit: LOT 72 DIVISION 1 CASCADE RIVER PARK
63875 CASCADE PARK PLACE
PARCEL # P63621

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first written above. Sign« sealed and delivered in the presence of:

Signature of Witness _____

Print Name of Witness _____

Signature of Witness Print _____

Name of Witness _____

Signature of Grantor Robert L Anderson Pres.

Print Name of Grantor _____

Robert L. Anderson , for Cascade River Community Club

State of WA

County of SKAGIT

On 9/26/2011 , before me,

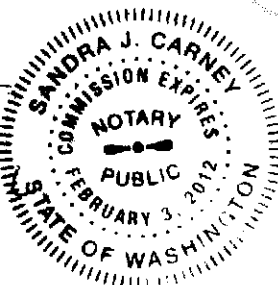
Appeared Robert L Anderson , personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to within the instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

Witness my hand and official seal.

Signature of Notary Sandra J Carney

Affiant Known _____ Produced ID WA. D.

Type of ID _____



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