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A298-10 R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 20th day of October 19 99 ,
by first party, Grantor, Robert J. and Joanne F. Albrecht Husband & Wife whose post office address is 18627 Corliss N. Seattle Washington 98133 to second party, Grantee, Deborah A. Henson

whose post office address is 8012 238th S.W. Edmonds Washington 98026

WITNESSETH, That the said first party, for good consideration and for the sum of Love and Affection Dollars (\$ 0) 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:

IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON

Lot one hundred sixty-two (162), block one (1), "Lake Cavanaugh Subdivision, Division 2", according to the plat recorded in volume 5 of plats, pages 49 to 54 inclusive, records of Skagit County, Washington.

P 1de639

SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX 2013 21

JAN 0 4 2013

Amount Paid \$ 20 9kagit Co. Treasurer By Deputy

(1)

(Revised 3/97)

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



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: Signature of Witness POBERT J ALBRECH)
Print name of First Party

Signature of First Party

Joanne F. Albrecht Print name of Witness Signature of Witness Print name of Witness State of WAShington ROBERT J ALBRECHT AND JOANNE ALBRECHT County of Shokers 1-12. 2001 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. Produced ID Æffiant_ _Known__ Signature of Notary Prope of ID Wol. (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. Known Produced ID Affiant Signature of Notary Type of ID (Seal) Signature of Preparer Print Name of Preparer

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

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Address of Preparer

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