

When recorded return to:  
Eric W McGrew and Lisa Lauren McGrew  
4705 Jewel St  
Capitola, CA 95010

POOR ORIGINAL

Filed for record at the request of:



CHICAGO TITLE  
COMPANY OF WASHINGTON

425 Commercial St  
Mount Vernon, WA 98273

Escrow No.: 620044434

ACCOMMODATION RECORDING

CHICAGO TITLE  
620044434

**QUIT CLAIM DEED**

**THE GRANTOR(S)**

Eric W McGrew and Lisa Lauren McGrew, a married couple  
for and in consideration of in hand paid, conveys and quit claims to  
Eric W McGrew and/or Lisa L McGrew, Trustees of McGrew Family Trust dated October 7, 2019

the following described real estate, situated in the County of Skagit, State of Washington, together with  
all after acquired title of the grantor(s) herein:

LOT 45, PLAT OF PARKSIDE, AS PER PLAT RECORDED IN VOLUME 14 OF PLATS, PAGES  
170 THROUGH 174, INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

Abbreviated Legal: (Required if full legal not inserted above.)

Tax Parcel Number(s): P99174 / 4552-000-045-0004

Real Estate Excise Tax  
Exempt  
Skagit County Treasurer  
By Heather Beauvais  
Affidavit No. 2021-213  
Date 01/15/2021

Dated: January 12, 2021

Eric W McGrew

Lisa Lauren McGrew

**QUIT CLAIM DEED**  
(continued)

State of \_\_\_\_\_  
\_\_\_\_\_ of \_\_\_\_\_

I certify that I know or have satisfactory evidence that

\_\_\_\_\_ is/are the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Name: \_\_\_\_\_  
Notary Public in and for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_,  
My appointment expires: \_\_\_\_\_

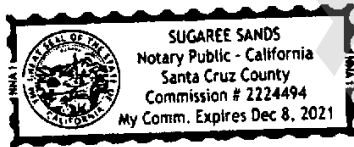
**CALIFORNIA ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California  
County of SANTA CRUZ  
On January 13, 2021 before me, Sugaree Sands, Notary Public  
Date Here Insert Name and Title of the Officer  
personally appeared Eric W. McGrew AND Lisa Lauren McGrew  
Name(s) of Signer(s)

who 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.



I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature \_\_\_\_\_  
Signature of Notary Public

Place Notary Seal and/or Stamp Above

**OPTIONAL**

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_ Signer's Name: \_\_\_\_\_

Corporate Officer - Title(s): \_\_\_\_\_  Corporate Officer - Title(s): \_\_\_\_\_

Partner -  Limited  General  Partner -  Limited  General

Individual  Attorney in Fact  Individual  Attorney in Fact

Trustee  Guardian or Conservator  Trustee  Guardian or Conservator

Other: \_\_\_\_\_  Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_ Signer is Representing: \_\_\_\_\_