04/28/2022 03:51 PM Pages: 1 of 4 Fees: \$206.50

Skagit County Auditor, WA

WHEN RECORDED MAIL TO GRANTEE: 40 Apple Ridge Road Danbury, CT 06810

203934-LT Land Title and Escrows 3292285 APN: 3772-093-009-

APN: 3772 -093-009-0006/P55572

ABBR. LGL. Lot 7 and 8, BIK 93, Map of the City of Anacortes

STATUTORY WARRANTY DEED

THE GRANTOR, Jonah M Leason and Ann D Leason, a married couple, for and in consideration of TEN AND NO/100 DOLLARS and other good and valuable Consideration, in hand paid, conveys and warrants to Cartus Financial Corporation, the following described real estate, situated in the County of Skagit, State of Washington

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

Subject to easements, restriction, reservations, conditions and provisions of record, if any.

Dated: April 5,2022

ah M Leason

Ann D Leasbn

Notary Certificate Attached

SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX Affidavit No. 20221762 Apr 28 2022

Amount Paid \$7205.00 Skagit County Treasurer By Josie Bear Deputy

Notary Certificate Attached

## CALIFORNIA ALL-PURPOSE 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 Oncom before me, Here Insert Name and Title of the Officer Date M Leison Name(y) of Signer(s) personally appeared who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) as/are subscribed to the within instrument and acknowledged to me that the same in her/their authorized capacity(ies), and that by 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. TIMOTHY J. TAYLOR WITNESS my hand and official seal. lotary Public - California Sonoma County Commission # 2384817 Comm. Expires Nov 30, 2025 Signature Notary Public Place Notary Seal Above **OPTIONAL** -Though this section is 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: Statokus Warrant 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:

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Signer is Representing:

## CALIFORNIA ALL-PURPOSE 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 before me, Here Insert Name and Title of the Officer personally appeared Leason Name(3) of Signer(9) who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) distance subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/fier/their authorized capacity(ies), and that by his/fier/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. TIMOTHY J. TAYLOR WITNESS my hand and official seal. Notary Public - California Sonoma County Commission # 2384817 wy Comm. Expires Nov 30, 2025 Signature Place Notary Seal Above OPTIONAL Though this section is 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

□ Other:

Signer is Representing:

☐ Guardian or Conservator

☐ Guardian or Conservator

□ Trustee

□ Other:

Signer Is Representing:

Cartus File Number 3292285

Property Address: 1313 14th Street, ANACORTES, WA 98221

## Exhibit A

Lots 7 and 8, Block 93, "MAP OF THE CITY OF ANACORTES, SKAGIT COUNTY, WASHINGTON," as per plat recorded in Volume 2 of Plats, page 4, records of Skagit County, Washington.

Situate in the City of Anacortes, County of Skagit, State of Washington.