

Real Estate Excise Tax  
Exempt  
Skagit County Treasurer  
By Lena Thompson  
Affidavit No. 20238655  
Date 11/03/2023

AFTER RECORDING RETURN TO:  
Townsgate Closing Services  
420 Rouser Road, Bldg. 3, Fl 5  
Moon Township, PA 15108  
File No. 134800

**QUITCLAIM DEED**

This deed is exempt from taxation by virtue of WAC sec. 458-61A-203(2). - divorce.

THIS DEED made and entered into on this 26 day of October, 2023, by and between **ERIC GRAHAM, an unmarried man** and **ALYSSA MARIE GRAHAM, an unmarried woman, who acquired title as husband and wife**, residing at 1606 Willett St, Mount Vernon, WA 98274, hereinafter referred to as Grantor(s) and **ALYSSA MARIE GRAHAM, an unmarried woman**, residing at 1606 Willett St, Mount Vernon, WA 98274, hereinafter referred to as Grantee(s).

WITNESSETH: That the said Grantor(s), for and in consideration of *divorce*, conveys and quitclaims to the said Grantee(s) the following described real estate located in Skagit County, State of Washington:

**Lot 23, "SKAGIT VIEW ESTATES," as recorded November 15, 2002 under Auditor's File No. 200211150098, records of Skagit County, Washington.**

**Situate in the City of Mount Vernon, County of Skagit, State of Washington.**

Property Tax ID No.: 4805-000-023-0000 PID #P119836

Also known as: 1606 Willett St, Mount Vernon, WA 98274

This conveyance is subject to easements, covenants, conditions, restrictions, reservations, and limitations of record, if any.


Dated: 10/26/2023

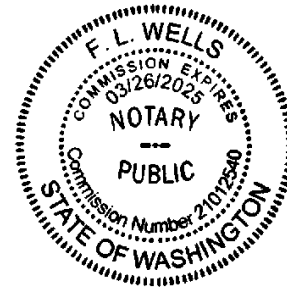
  
ERIC GRAHAM

STATE OF WA  
COUNTY OF Skyrim

I certify that I know or have satisfactory evidence that **ERIC GRAHAM** (~~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: 10/26/2023

  
Notary Public in and for the State of WA  
Print Name: F.L. Wells  
Residing at: Mt. Vernon  
My appointment expires: 03/26/2025



Alyssa Marie Graham  
ALYSSA MARIE GRAHAM

STATE OF WA  
COUNTY OF Snohomish

I certify that I know or have satisfactory evidence that ALYSSA MARIE GRAHAM (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: 10/26/2023

[Signature]  
Notary Public in and for the State of WA  
Print Name: F.L. Wells  
Residing at: Mt. Vernon  
My appointment expires: 03/26/2025

