

AFTER RECORDING MAIL TO:

Name ROBERTO CARRILLO,
Address 1900 OLIVE ST
City, State, Zip MOUNT VERNON, WA 98273
B75530

Filed for Record at Request of First American Title of Skagit County



200310100307
Skagit County Auditor

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FIRST AMERICAN TITLE CO.

Statutory Warranty Deed

675970E-1

THE GRANTOR JOSE LUIS RODRIGUEZ and CLAUDIA J. CADENA EACH AS THEIR SEPARATE ESTATES for and in consideration of Ten Dollars and other valuable consideration in hand paid, conveys and warrants to ROBERT CARRILO, AN MARRIED MAN AS HIS SEPARATE ESTATE the following described real estate, situated in the County of SKAGIT, State of Washington:

Lot 11 "LAXDAL ADDITION TO MOUNT VERNON", as per plat recorded in Volume 7 of Plats, page 7, records of Skagit County, Washington.

ABREVIATED LEGAL: Lot(s) 11, of LAXDAL ADDN TO MT. VERNON, Map Book 7, Map Page 7

"This conveyance is subject to covenants, conditions, restrictions and easements, if any, affecting title, which may appear in the public record, including those shown on any recorded plat or survey."

Assessor's Property Tax Parcel Account Number(s): 3943-000-011-0001 P67174

Dated SEP. 25, 2003.

JOSE LUIS RODRIGUEZ

CLAUDIA J. CADENA

**See Attachment
for Notary**

5282
SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

OCT 10 2003

Amount Paid \$ 2785.70
Skagit Co. Treasurer
By Deputy

JURAT

State/Commonwealth of CALIFORNIA

County of SAN LUIS OBISPO

} ss.

Subscribed and sworn to (or affirmed) before me

this 25TH day of SEP., 2003, by

Date

Month

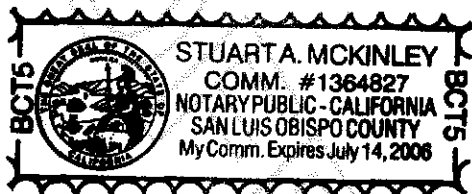
Year

(1) JOSE LUIS RODRIGUEZ

Name of Signer #1

(2) CLAUDIA J. CADENA

Name of Signer #2



Stuart A. McKinley
Signature of Notary Public

Place Notary Seal and/or Any Stamp Above

Other Required Information (Printed Name of Notary, Residence, etc.)

OPTIONAL

Though the information in this section is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

**RIGHT THUMBPRINT
OF SIGNER #1**

Top of thumb here

**RIGHT THUMBPRINT
OF SIGNER #2**

Top of thumb here



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