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Skagit County Auditor
4/12/2013 Page 1 of 2 12:20PM

Above Space Reserved for Recording required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.

Quitclaim Deed

Date of this Document: April 2,2013

Reference Number of Any Related Documents:

Grantor:

Name	Cascade River Community Club
Street Address	P.O. Box 141
City/State/Zip	Marblemount, WA 98267

20131275
SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

APR 12 2013

Amount Paid $ 58.40
Skagit Co. Treasurer
By MF Deputy

Grantee:

Name	Jesse Farrens and Richard / Ruth Farrens
Street Address	22128 Highway 9 Lot 89
City/State/Zip	Mount Vernon, WA 98274

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Lot 161 Division 1 Cascade River Park

Assessor's Property Tax Parcel/Account Number(s): P 63711

THIS QUITCLAIM DEED, executed this 2nd. day of April 20 13 , by first party, Grantor, Cascade River Community Club , whose mailing address is P.O. Box 141 Marblemount, WA 98267 , tc second party, Grantee, Jesse, Richard & Ruth Farrens whose mailing address is 22128 Highway 9 Lot 89 Mount Vernon, WA 98274

WITNESSETH that the said first party, for good consideration and for the sum of Three Thousand Dollars ($ 3000.00) 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,

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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: Lot 161 division 1 Cascade River Park 6402 Acorn Lane Marblemount, WA Tax Parcel P 63711

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first written above. Signec sealed and delivered in the presence of:

Signature of Witness _____

Print Name of Witness _____

Signature of Witness _____

Print Name of Witness _____

Signature of Grantor _____

Print Name of Grantor EARL G. SPRADLING

State of WASHINGTON)
County of King)

On April 2, 2013, before me, David L. Stucky,
appeared EARL G SPRADLING, 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.

Signature of Notary _____ EXPIRE 9-13-13

Affiant ____ Known X Produced ID
Type of ID _____
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Skagit County Auditor
4/12/2013 Page 2 of 2 12:20PM

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