



199910270093

Kathy Hill, Skagit County Auditor
10/27/1999 Page 1 of 1 3:48:26PM

AFTER RECORDING MAIL TO:
Jerry A. Hayes Sr.
1671 Coal Bunker Rd.
Sedro Woolley, WA 98284

Filed for Record at Request of
Land Title Company of Skagit County
Escrow Number: P-89616-E

LAND TITLE COMPANY OF SKAGIT COUNTY **Statutory Warranty Deed**

Grantor(s): IMC Mortgage Company, fka Industry Mortgage Company, L.P.
Grantee(s): Jerry A. Hayes Sr., Shirley M. Hayes
Abbreviated Legal: Lot 3, Block 2, Mill Add. to Concrete No. 2
Additional legal(s) on page:
Assessor's Tax Parcel Number(s): 4054-002-003-0000/R70696

THE GRANTOR IMC MORTGAGE COMPANY, fka Industry Mortgage Company, L.P.
for and in consideration of TEN DOLLARS AND OTHER GOOD AND VALUABLE CONSIDERATION
in hand paid, conveys and warrants to JERRY A. HAYES, SR. and SHIRLEY M. HAYES, husband
and wife
the following described real estate, situated in the County of Skagit, State of Washington:
Lot 3, Block 2, "MILL ADDITION, AN ADDITION TO THE TOWN OF CONCRETE,
DIVISION NUMBER TWO", as per plat recorded in Volume 4 of Plats, page 4,
records of Skagit County, Washington.

Situate in the Town of Concrete, County of Skagit, State of Washington.

32148
SKAGIT COUNTY WASHINGTON
Real Estate Excise Tax

OCT 27 1999

Dated this 4th day of October, 1999

By IMC Mortgage Company, fka Industry Mortgage Company, L.P.

Amount Paid \$ 883.58
Skagit Co. Treasurer
By Deputy

By _____ By _____

STATE OF WASHINGTON }
County of SKAGIT Hillsborough } SS:

I certify that I know or have satisfactory evidence that Tim Griffin
is the person who appeared before
me, and said person acknowledged that he signed this instrument, on oath stated that he is
authorized to execute the instrument and acknowledge it as the Vice President
of IMC MORTGAGE COMPANY

to be the free and voluntary act of such party for the uses and purposes mentioned in this instrument.
Dated: October 9th, 1999 Tracy Guthrie

TRACY GUTHRIE
Notary Public, State of Florida
My comm. exp. June 8, 2003
Comm. No. CC844328

Notary Public in and for the State of FLORIDA
Residing at _____
My appointment expires: _____