

ROBERT M JORGENSEN  
42067 CAPE HORN DR.  
CONCRETE WA 98273



200710180077

Skagit County Auditor

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[If 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: \_\_\_\_\_

Reference Number of Any Related Documents: TX# P63403

Grantor:

Name MICHAEL J JORGENSEN  
Street Address 5314 RONEY RD  
City/State/Zip BOW WA 98232

4912  
SKAGIT COUNTY WASHINGTON  
REAL ESTATE EXCISE TAX

OCT 18 2007

Amount Paid \$   
Skagit Co. Treasurer  
By [Signature] Deputy

Grantee:

Name ROBERT M JORGENSEN  
Street Address 42067 CAPE HORN DR  
City/State/Zip CONCRETE WA 98273

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Lot 1, Block M, CAPE HORN on the SKAGIT, DIV #2 Per VOL 9 of PLATS, PG14-19, SKAGIT CO. WASHINGTON

Assessor's Property Tax Parcel/Account Number(s): P63403

THIS QUITCLAIM DEED, executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by first party, Grantor, \_\_\_\_\_, whose mailing address is \_\_\_\_\_, to second party, Grantee, \_\_\_\_\_, whose mailing address is \_\_\_\_\_.

WITNESSETH that the said first party, for good consideration and for the sum of ZERO Dollars (\$ 0) 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,

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 1, BLOCK M, "CAPE HORN ON THE SKAGIT, DIVISION NO. 2" AS PER Plat recorded IN VOLUME 9 OF PLATS, Pages 14 through 19, INCLUSIVE, records OF SKAGIT COUNTY, WASHINGTON

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

Signature of Witness \_\_\_\_\_  
Print Name of Witness \_\_\_\_\_

Signature of Witness \_\_\_\_\_  
Print Name of Witness \_\_\_\_\_

Signature of Grantor [Signature]  
Print Name of Grantor MICHAEL J JORGENSEN

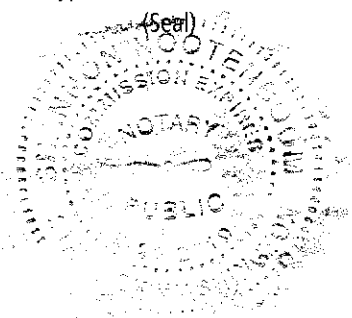
State of Washington  
County of Skagit

On October 18, 2007, before me, Shannon Nootenboom appeared Michael J. Jorgensen, 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]  
Signature of Notary

Affiant        Known        Produced ID  
Type of ID       



[Barcode]  
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