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## **Quitclaim Deed**

Date of this Document: July 5,2010 Reference

Number of Any Related Documents:

Grantor.

Name Anne Sola for the Estate of Olav Sola and

Anne Sola

Street Address 18500 High St.

City/State/Zip Edmonds, WA 98020

Grantee:

Name Cascade River Community Club

Street Address P.O. Box 141

City/State/Zip Marblemount, WA 98267

2903 SKAGIT COUNTY WASHINGTON BEAL ESTATE EXCISE TAX

SEP 242010

Amount Paid \$
Skagit Cp: Treasurer
By Deputy

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, build :ondo name): Lots 10 & 11 Division III Cascade River Park

Assessor's Property Tax Parcel/Account Number(s): P 63884 •

THIS QUITCLAIM DEED, executed this 5 th. Day of July 2010 \_, by first party, Grantor, Anne Sola, for the estate of Olav Sola and Anne Sola mailing address is 18500 High St. Edmonds, WA 98020 second party, Grantee, Cascade River Community Club whose mailing address is P.O. Box 141 Marblemount, WA 98267

vVITNESSETH that the said first party, for good consideration and for the sum of No Dollars (0) paid by the said second party, the receipt whereof is hereby acknowledged does hereby remise, release and Quitdaim unto the said second party forever all the rightinterest and daim

which the said first party has in and to the following described pare thereto in the County of Skagit	cel of land, and improvements and appurtenances , State of Washington
:o.wit; Lots 10 & 11 Division III Cascade River Park Parcel # 6388	
IN WI tness whereof, the said first party has signed and sealed these presand delivered in the presence of:	sents the day and year first written above. Signed sealed
Signature of Witness	
Print Name of Witness	
Signature of Witness Print	
Name of Witness	
Signature of Grantors Onne AccomprintNames of Grantors ANNE SOLA, INDIVIDUAL OF THE ESTATE OF OLD	MY AND AS PERSONAL REPRESENTATIVE
	TO 3000, 00000000000000000000000000000000
State of WASHINGTON County of SNOTTONN H	
On AUGUST 19, 2010, before me, appeared ANNE SOLA;	
appeared ANNE SOLA;	, personally known to me (or provec
to me on the basis of satisfactory evidence) to be the person(s) wh instrument and acknowledged to me that he/she/they executed the s by his/her/their signature(s) on the instrument the person(s), or th	same in his/her/their authorized capacity(ies), and that
executed the instrument,	SAMMINININI
WITNESS my hand and official seal.	
Signature of Notary Clarkan C. Xal	Alexander of the second
Affiant Known <a> Produced ID</a> fypeofID	WY WASHINGTON



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