



201103210221

Skagit County Auditor

3/21/2011 Page 1 of 2 4:20PM

Above Space Reserved for Recording

(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: FEBRUARY 10, 2011

Reference Number of Any Related Documents: \_\_\_\_\_

Grantor:

Name CASCADE RIVER COMMUNITY CLUB  
Street Address PO BOX 141  
City/State/Zip MARBLEMOUNT, WA 98267

Grantee:

Name DAVID BERRY  
Street Address 3425 S. 176<sup>th</sup> ST. #212  
City/State/Zip SEATAC, WA 98188

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): LOT 74 DIV 3 CASCADE RIVER PARK

Assessor's Property Tax Parcel/Account Number(s): P63947

THIS QUITCLAIM DEED, executed this 10<sup>th</sup> day of FEBRUARY 2011, by first party, Grantor, CASCADE RIVER COMMUNITY CLUB, whose mailing address is PO BOX 141 MARBLEMOUNT, WA 98267, to second party, Grantee, DAVID BERRY, whose mailing address is 3425 S. 176<sup>th</sup> ST #212 SEATAC, WA 98188

WITNESSETH that the said first party, for good consideration and for the sum of THREE THOUSAND EIGHT HUNDRED FIFTY ONE Dollars (\$ 3851.00 ) 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,

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 74 DIV 3 CASCADE RIVER PARK TAX PARCEL P63947

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:

768  
SKAGIT COUNTY WASHINGTON  
REAL ESTATE EXCISE TAX

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

MAR 21 2011

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

Amount Paid \$ 77.33  
Skagit Co. Treasurer  
By MF Deputy

Signature of Grantor Robert L. Anderson  
Print Name of Grantor Robert L. Anderson

State of Washington  
County of Skagit

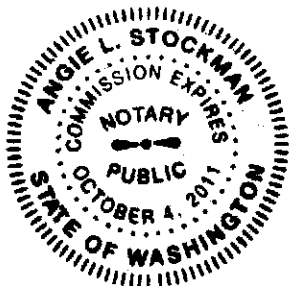
On 3-16-11, before me, Robert L. Anderson

appeared before me, 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.

Angie L. Stockman  
Signature of Notary

Affiant Known Produced ID   
Type of ID WA-Anderson 58605  
(Seal)



201103210221  
Skagit County Auditor

3/21/2011 Page 2 of 2 4:20PM