

WHEN RECORDED RETURN TO:

Danny Crosby
4466 Karli Street
Mount Vernon, WA 98274

DOCUMENT TITLE(S):

Quit Claim Deed

CHICAGO TITLE

020039978

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR:

Esidalia Reyes Crosby, spouse of Danny Crosby

GRANTEE:

Danny Crosby, married man as his separate property

ABBREVIATED LEGAL DESCRIPTION:

LOT 200, PLAT OF CEDAR HEIGHTS PUD 1, PHASE 2, Skagit County, Washington.

TAX PARCEL NUMBER(S):

P126255/49290002000000

When recorded return to:

Danny Crosby
4466 Karli Street
Mount Vernon, WA 98274

Filed for Record at Request of
Curtis, Casteel & Palmer, PLLC
Escrow Number: C1901202M

Real Estate Excise Tax
Exempt
Skagit County Treasurer
By Marissa Guerrero
Affidavit No. 2019-4458
Date 10/11/2019

QUIT CLAIM DEED

THE GRANTOR ESIDALIA REYES CROSBY, SPOUSE OF DANNY CROSBY for and in consideration of separate community property in hand, conveys and quit claims to DANNY CROSBY, A MARRIED MAN AS HIS SEPARATE PROPERTY the following described real estate, situated in the County of Skagit State of Washington, together with all after acquired title of the grantor(s) therein:

Abbreviated Legal:
LOT 200, PLAT OF CEDAR HEIGHTS PUD 1, PHASE 2, Skagit County, Washington.

LOT 200, PLAT OF CEDAR HEIGHTS PUD 1, PHASE 2, ACCORDING TO THE PLAT THEREOF RECORDED MAY 31, 2007 UNDER AUDITOR'S FILE NO. 200705310138, RECORDS OF SKAGIT COUNTY, WASHINGTON.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

Tax Parcel Number(s): P126255/49290002000000

Dated: OCTOBER 8, 2019


Esidalia Reyes Crosby

STATE OF _____)
COUNTY OF _____) SS:

I certify that I know or have satisfactory evidence that Esidalia Reyes Crosby the person(s) who appeared before me, and said person(s) acknowledged that signed this instrument and acknowledge it to be he/she/they his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: _____

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

See attached - 10/10/19

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }

County of Madera }

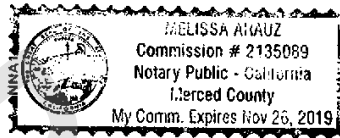
On October 10, 2019 before me, Melissa Aranz Notary Public
(Here insert name and title of the officer)

personally appeared Esidalia Reyes Crosby
who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Melissa Aranz
Notary Public Signature (Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Quitclaim Deed
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date 10/15/19

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
 - Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
 - The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
 - Print the name(s) of document signer(s) who personally appear at the time of notarization.
 - Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/~~they~~, is /~~are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
 - The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
 - Signature of the notary public must match the signature on file with the office of the county clerk.
- ❖ Additional information is not required but could help to ensure this

CAPACITY CLAIMED BY THE SIGNER

Individual (s)

Corporate Officer

(Title)

Partner(s)

Attorney-in-Fact