WHEN RECORDED RETURN TO:

Name: _____
Address: _____
City, State, Zip _____

Chicago Title Insurance Company

701 5th Avenue, Suite 1700, Seattle, Washington 98104

LPB No. 12

QUIT CLAIM DEED

THE GRANTOR

for and in consideration of

conveys and quit claims to

the following described real estate, situated in the County of , State of Washington,
together with all after acquired title of the grantor(s) herein:

Tax Account Number: _____ DATED: _____

_____ _____

_____ _____

_____ _____

STATE OF WASHINGTON)
ss.
COUNTY OF _____)

On this _____ day of _____, _____ before me, the undersigned, a notary public in and for the State of Washington, duly commissioned and sworn, personally appeared _____ known to me to be the individual(s) described in and who executed the within instrument and acknowledged that _____ signed and sealed the same as _____ free and voluntary act and deed, for the uses and purposes herein mentioned.

_____

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

STATE OF WASHINGTON)
ss.
COUNTY OF _____)

I certify that I know or have satisfactory evidence that _____ is the person who appeared before me, and said person acknowledged that _____ signed this instrument, on oath stated that _____ was authorized to execute the instrument and acknowledged it as _____ of _____ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.
Dated: _____

_____

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