	The state of the s
114162	BOOK /30 PAGE /3/
Commonwealth.	SKARABIA COLLYASTAS SPACE PROVIDED FOR INCOMPRES UR.
Land Title Insurance Companion OF PHILADELPHIA	BY CLARK COUNTY TITLE
	Aug 1 32 30, 111 '92
Filed for Record at Request of	9. Lowny
Victor O Erich	GARY H. OLSON
New LICTOR O Crica	(80)(_)
Address	Registered
City and State	Indexed, Dir o
10- 11/10/77	Filmed 8/4/97
CCT ALLYDIS	Mailed
Ouit	Claim Deed
. Quit	Cidilli Dood
	and the second s
THE GRANTOR TAMMY ERICKSON, WHO	SE SPOUSE IS VICTOR O. ERICKSON
and in consideration of TO ESTABLISH SE	PARATE ESTATE
	7 (/)
weys and quit claims to VICTOR O. ERICK	SON, A MARRIED PERSON, AS HIS SEPARATE ESTATE
following described real estate, situated in the	
ther with all after acquired title of the grant	or(a) therein:
Lat 2 of CHORT BLATC to book 121 of	ness 01 records of Character County Deablaston
	page 91, records of Skamania County, Washington, 16, lying within the North Half of Section 28,
Township 2 North, Range 5 East of t	
0	
(a)	
	0.5153
	015153
	REAL ESTATE EXCISE TAX
	4490 137 1907
	Alba or 1300
	PAID - Exempt
ип у 30 1902	
JULY 30,1992	9 SKAMANIA COUNTY TREASURES
Immu Erickson	9 SKAMANIA COUNTY TREASURES
IDMINU EVICKSON (Individual) TAMMY ERICKSON	9 SKAMANIA COUNTY TREASURES
TAMMY EXICESON (Individual) TAMMY EXICKSON	9 SKAMANIA COUNTY TREASURES
Jammy Erickson	9SKAMANIA COMMITY TREASURES

STATE OF WASHINGTON STATE OF WASHINGTON Clark COUNTY OF . COUNTY OF. I certify that I know or have satisfactory evidence that I certify that I know or have satisfactory evidence that TAMMY ERICKSON is the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument, on eath stated that (be/she/they) was (were) authorized to exoctor inc. and acknowledged it as the acknowledged that (he/she/they) signed this instrument and acknowledged it to be this/her/their) free and voluntary act for the uses and purposes mentioned in the instrument such party for the uses and purposes mentioned in the instrument. CORDAN AI

O STATE OF MANAGEMENT STATE OF MANA August 5

Escrow Officer Take

> 6-9-94 My appointment expires

ISFAÜ ÖR STAMPI

Signature

Tak

My appointment expires