



STEWART TITLE COMPANY

"A Tradition of Excellence"

FILED FOR RECORD AT REQUEST OF

FILED FOR RECORD
SKAMANIA CO. WASH
BY Thomas J. Foley

THIS SPACE PROVIDED FOR RECORDER'S USE

SEP 13 2 25 PM '95

P. J. Foley
AUDITOR
GARY M. OLSON

WHEN RECORDED RETURN TO

Name Chris Kellogg

Address P.O. Box 44

City, State, Zip Washougal, WA 98671

123306

THE GRANTOR

DARLA KELLOGG

Quit Claim Deed

BOOK 152 PAGE 386

LPS No. 12

AKA DARLA KELLOGG LEE

for and in consideration of Love & Affection

conveys and quit claims to Christopher & Suzanne Kellogg

the following described real estate, situated in the County of

SKAMANIA

State of Washington:

Lot 190 Northwode, A Part of Gov. Lts 448
Sec. 26, Twn 7 North, Range 6 East of
Williamette Meridian, Skamania County, Wash

17626
REAL ESTATE EXCISE TAX

SEP 13 1995
PAID Exempt

SKAMANIA COUNTY TREASURER

061000-96
9/13/95
Page 8
96-000190

August 23rd 1995
Darla Rose Kellogg
[Signature]

By

President

By

Secretary

Indorsed, Or

Indorsed

Indorsed

Indorsed

Indorsed

Indorsed

STATE OF WASHINGTON, Oregon:

Clatsop

I certify that I know or have satisfactory evidence that
Darla Rose Kellogg & Christopher Kellogg
are the persons who appeared before me,
and said persons acknowledged that (he, she, they) signed this instrument, and
each stated that _____ authorized to execute
the instrument and acknowledged it as the _____
of _____, to be the free and voluntary act
of each party for the uses and purposes mentioned in this instrument.

August 23, 1995

Debra Walter

Notary Public in and for the State of Washington, Oregon

Warrenton DE

FT-98

STATE OF WASHINGTON

County of _____

I certify that I know or have satisfactory evidence that _____

is the person(s) who appeared before me, and said person(s) acknowledged that (he, she, they) signed this instrument, and each stated that _____ authorized to execute the instrument and acknowledged it as the _____ of _____, to be the free and voluntary act of each party for the uses and purposes mentioned in this instrument.

Given: _____

Notary Public in and for the State of Washington,

meeting at _____

My appointment expires _____