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FILED FOR RECORD
SKAMANIA CO. WASH
BY William Myres Jr.

APR 23 3 29 PM '97

Olson
AUDITOR
GARY M. OLSON

AFTER RECORDING MAIL TO:

Name WILLIAM MYRES
Address P.O. BOX 477
City/State CARSON WASH 98610

Quit Claim Deed

THE GRANTOR PATSY R. MYRES



First American Title
Insurance Company

for and in consideration of

LOVE & AFFECTION

conveys and quit claims to

WILLIAM B. MYRES JR.

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

LOT 2 OF TEITZEL SHORT PLAT FILED IN
BOOK 2 AT PAGE 222 OF SHORT PLATS,
AUDITOR'S FILE NO. 92811, BEING A PORTION
OF GOVERNMENT LOT 3 AND OF THE
SE 1/4 SW 1/4 SECTION 26, T.3 N.,
R.8 E., W.M., RECORDS OF SKAMANIA
COUNTY, WASHINGTON

Assessor's Property Tax Parcel/Account Number(s): 03-08-26-0-0-1203

Dated APRIL 3, 1997

Patsy R. Myres
(Individual)

LPB-12 (11/96)

REAL ESTATE EXCISE TAX
18755

By APR 23 1997

By PAID \$243.20

W. Olson, Deputy
SKAMANIA COUNTY TREASURER

By Myres ✓
Advised Dir ✓
Index ✓
Filed ✓
Paid ✓

Gary M. Marun, Skamania County Assessor
Date 4-23-97 Parcel # 3-8-26-1203

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GENERAL ACKNOWLEDGMENT

State of California

County of Santa Barbara

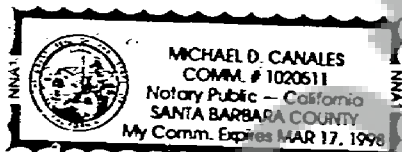
On April 3rd, 1997 before me, Michael D. Canales
personally appeared Patsy R. Myres

☐ 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

Michael D. Canales

OPTIONAL

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER

- ☒ INDIVIDUAL
☐ CORPORATE OFFICER

TITLE(S)

- ☐ PARTNER(S) ☐ LIMITED
☐ GENERAL

- ☐ ATTORNEY-IN-FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER:

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

DESCRIPTION OF ATTACHED DOCUMENT

Quitclaim Deed

TITLE OR TYPE OF DOCUMENT

1 Page

NUMBER OF PAGES

April 3rd, 1997

DATE OF DOCUMENT

NA

SIGNER(S) OTHER THAN NAMED ABOVE