

128114

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FILED FOR RECORD  
SKAMANIA CO. WASH  
BY Virgil Perry

MAY 12 1 09 PM '97

G. Lavy  
AUDITOR  
GARY M. OLSON

**AFTER RECORDING MAIL TO:**

Name Virgil Perry Marla MacLeod  
Address 111 Rockwood DR.  
City/State Stevenson, WA 98648

**Quit Claim Deed**

THE GRANTOR Virgil Perry



First American Title  
Insurance Company

for and in consideration of

Love and Affection

conveys and quit claims to

Virgil Perry  
Husband/Wife, Marla MacLeod

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:

Property lot's {3} w/ Dwelling {Home}  
3 outside Buildings  
Lots 2, 3, & 4 IN Block 2 of Maple Hill  
Tract #2

Assessor's Property Tax Parcel/Account Number(s): 03 07 25 2 0 0900 00

Dated May 12, 19 97

Virgil Perry  
(Individual)

By \_\_\_\_\_

(President)

By \_\_\_\_\_

(Secretary)

**REAL ESTATE EXCISE TAX**  
**18793**

LPB-12 (11/96)

PAID ☒  
Taxes, Dir ☒  
Direct ☒  
Ind ☐  
Total ☐

MAY 13 1997  
PAID exempt  
W. B. M. Dept.  
SKAMANIA COUNTY TREASURER

Gary M. Martin, Skamania County Auditor  
Date 5/12/97 Parcel # 3-7-25-2-900  
Lots 2, 3 & 4 Tract

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WASHINGTON SHORT-FORM INDIVIDUAL ACKNOWLEDGMENT (RCW 42.44.100)

State of Washington  
County of Washington

PEGGY B. LOWRY  
STATE OF WASHINGTON  
NOTARY --- PUBLIC  
MY COMMISSION EXPIRES 2-23-99

(SEAL OR STAMP)

I certify that I know or have satisfactory evidence that  
Virgil Perry (name of signer) is the  
person who appeared before me, and said person acknowledged that  
he (he/she) signed this instrument and acknowledged it to be  
his (his/her) free and voluntary act for the uses and purposes  
mentioned in the instrument.

Dated: 5/12/97

Peggy B. Lowry  
(Signature)

Notary Public  
Title (such as "Notary Public")

My appointment expires \_\_\_\_\_

OPTIONAL SECTION

THIS CERTIFICATE MUST BE ATTACHED TO  
DOCUMENT DESCRIBED AT RIGHT:

Though the date requested here is not required by law,  
it could prevent fraudulent reattachment of this form.

TITLE OR TYPE OF DOCUMENT Quit Claim Deed

NUMBER OF PAGES 1

DATE OF DOCUMENT 5/12/97

SIGNER(S) OTHER THAN NAMED ABOVE \_\_\_\_\_