BOOK 175 PAGE 274

131077

FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TIT.
APR 6 12 37 PM '98
AUDITOR
GARY H. OLSON

AFTER RECORDING MAIL TO:

Name AMERITITLE

Address P.O. BOX 660

City/State HOOD RIVER, OR 97031

Sale 2/63

Quit Claim Deed

First American Title Insurance Company

(this space for title company use only)

THE GRANTOR

CINDY HODGES, a single person

for and in consideration of

half of debt currently owed

conveys and quit claims to

ARNOLD B. WHITLEY, a single person

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 10, and the South 44 feet of even width of Lot 9, ORINGTON HEIGHTS, according to the recorded plat thereof, recorded in Book A of Plats, Page 146, in the County of Skamania, State of Washington.

REAL ESTATE EXCISE TAX

19424 APR - 6 1998

PAID 762.94

SKAMANIA COUNTY TREASURER

Gary H. Martin, Skamania County Assessor

Date 4/6/98 Parcel # 3-10-21-3-2-106

Assessor's Property Tax Parcel/Account Number(s): 03-01-21-2-0106-00

S/b 3-10-21-3-2-106

Dated APRIL 2, 19 98

Cindy Hodges

CINDY HODGES (Individual)

(Individual)

By (President)

By (Secretary)

LPB-12 (11/96)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Fresno

On April 2, 1998 (Date) before me, Rose M. Lewis, Notary Public (Name and Title of Officer e.g., Jane Doe, Notary Public)

personally appeared Cynthia Cecelia Hodges (Name(s) of Signer(s))

☐ personally known to me – OR – X 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.

ROSE M. LEWIS
COMM. #1158576
NOTARY PUBLIC - CALIFORNIA
FRESNO COUNTY
My Comm. Expires Oct. 13, 2001

WITNESS my hand and official seal.

Rose M. Lewis
Signature of Notary Public

OPTIONAL

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

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name:	Signer's Name:
☐ Individual	☐ Individual
☐ Corporate Officer Title(s):	☐ Corporate Officer Title(s):
☐ Partner — ☐ Limited ☐ General	☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact	☐ Attorney-in-Fact
☐ Trustee	☐ Trustee
☐ Guardian or Conservator	☐ Guardian or Conservator
☐ Other:	☐ Other:
Signer Is Representing:	Signer Is Representing:
Top of thumb here	Top of thumb here