136372 BOOK 193" PAGE 516 FILCE / FILCORD SKAMALIA CO, TITLE SEP 23 4 23 PH 193 20439 Ged Extate Excese Tax SEP 23 1999 AFTER RECORDING MAIL TO: Bryan Lawson & Nicole Holsclaw land 1,536,00 4405 McCallister Place Statutory Warranty Deed First American Title JAMES C. KAISER & JEAN M. KAISER, THE GRANTOR husband and wife, FELIX R. Insurance Company SZYMANSKI & PATRICIA A. SZYMANSKI, husband and wife, ROSALYN M. MALONEY all as tenants in common. for and in consideration of TEN DOLLARS AND OTHER VALUABLE CONSIDERATIONS in hand paid, conveys and warrants to BRYAN J. LAWSON, an unmarried individual & NICOLE Y. HOLSCLAW, an (this space for title company use only) unmarried individual the following described real estate, situated in the County of Skamania , State of Washington: PARCEL I A portion of the Southwest Quarter of the Northwest Quarter of Section 19, Township 2 North, Range 5 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 3 of the Corrected KMS Short Plat, recorded in Book 3 of Short Plats, Page 352 Skamania County Records. PARCEL II That protion of the Southwest Quarter of the Southwest Quarter of the Northeast Quarter of Section 19, Township 2 North, Range 5 East of the Willamette Meridian lying North of the South line of Nagel road, and lying between the Westerly line of Skye Road and the West line of said Northeast Quarter, situated in Skamania County, Washington. ledezed, Uindirect. Figure 4 Assessor's Property Tax Parcel/Account Number(s): 02-05-19-2-0-0300-00 Gary H. Martin, Skamania County Assessor pared September 14 Patricia A. Szymanski

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BOOK 193 PAGE 5/7



STATE OF CALIFORNIA COUNTY OF ALL	
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}ss.

On September 14,1999, before me. Boba Wright Notary Public.

personally appeared Felix R. Szymanski Patricia A. Szymanski

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 the 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.

Signature Robb Wright



(This area for official notarial seal)

Title of Document Statutory Warranty Deed

Date of Document Sept. 14, 1999 No. of Pages 1

Other signatures not acknowledged None

3008 (1/94) (General) First American Tide Insurance Company

BOOK 193 PAGE 518

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

TATE OF CALIFORNIA	
OUNTY OF SANTA CLARA	
September 16 1999 more	me, the undersigned, a Notary Public in and for said State personally
D. I M m I'	me, the undersigned, a rectary reconcern and for said state personally
ppeared Rosalyn M. Malovey	Name(a) of County
NANCY DELINIT COMM. # 1226666 NUTRY PUBL CALFORM SANTA CLANA COLUMN My Commission Enters All 1	ne on the basis of satisfactory evidence to be the person(s) whose name(s) islane subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(has), 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. Signature of Notary
This area for official notarial seal)	Name (Typed or Printed)
Capacity Claimed by Signer	Description of Attached Document This contificate must be attached to the document
Capacity Claimed by Signer Individual(s) Corporate Officer(s) - Title(s)	This certificate must be attached to the document described below: Title or type of document for the comment of the comment o
(Individual(s)	This certificate must be attached to the document described below: Title or type of document statutory WARRANTY Deed
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(Individual(s)	This certificate must be attached to the document described below: Title or type of document learning
Individual(s) Corporate Officer(s) - Title(s) Partner(s)	This certificate must be attached to the document described below: Title or type of document described below: Number of Pages
Individual(s) Corporate Officer(s) - Title(s) Partner(s) Attorney-In-Fact	This certificate must be attached to the document described below: Title or type of document learning
Individual(s) Corporate Officer(s) - Title(s) Partner(s) Attorney-In-Fact Trustee(s)	This certificate must be attached to the document described below: Title or type of document learning
Individual(s) Corporate Officer(s) - Title(s) Partner(s) Attorney-In-Fact Trustee(s) Guardian/Conservator	This certificate must be attached to the document described below: Title or type of document described below: WARRANTU Deed Number of Pages Date of Document 9-14-99
Individual(s) Corporate Officer(s) - Title(s) Partner(s) Attorney-In-Fact Trustee(s)	This certificate must be attached to the document described below: Title or type of document learning
Individual(s) Corporate Officer(s) - Title(s) Partner(s) Attorney-In-Fact Trustee(s) Guardian/Conservator	This certificate must be attached to the document described below: Title or type of document learning
Individual(s) Corporate Officer(s) - Title(s) Partner(s) Attorney-In-Fact Trustee(s) Guardian/Conservator Other:	This certificate must be attached to the document described below: Title or type of document Statutory WARRANTY Ceed Number of Pages Date of Document 9-14-99
Individual(s) Corporate Officer(s) - Title(s) Partner(s) Attorney-In-Fact Trustee(s) Guardian/Conservator Other: Signer is Representing:	This certificate must be attached to the document described below: Title or type of document described below: Number of Pages Date of Document 9-14-99 Signer(s) Other than Named Above ATTENTION NOTARY Although the information requested above is optional,
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BOOK 193 PAGE 519

County of	.,,			MENT - Individual
On this d	ay personally appeared befo	reme TAMES C	KAISER an	d to me known
signed the sam	c as TVEIL	free and voluntary act and	ing instrument, and acknowledged the	. +10.0
GIVEN	nder my hand and official se	al this 2/5 ⁷ day of	Septem der	19 <u>99</u>
	GARY M. REINHAI STATE OF WASHING NUTERY — PUR My Commission Empires Face	STON BLIC 1.2003	M South State of We	t Sheeka
		, , , , , , , , ,	at Camos The expires S-1-2003	
County of : On this	ASHINGTON, ss. day of ally commissioned and swo	. 19 . before me	ACKNOWLEDGN	
	President and	andSecretary, respectively, o	to	4 1
act and deed of s	wation that executed the for aid corporation, for the uses	and purposes therein mentioned	eledged the said instrument to be the	Th. 1
authorized to ex	ecute the said instrument as	nd that the seal affixed (if any)	is the comprete seal of said a	etina .
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nuthorized to ex	ecute the said instrument ar	cto affixed the day and year fu	st above written. Public in and for the State of Washi	
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