

137629

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FILE
AKA
Carl Southall

MAR 17 2 18 PM '00

amode

GARY L. OLSON

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this day of March, 2000 (year),
by first party, Grantor, Debra Lee Tucksen
whose post office address is 30520-56th AVE S Roy WA 98580
to second party, Grantee, Carl Southall
whose post office address is P.O. Box 326 McKenna WA 98558-0326

WITNESSETH, That the said first party, for good consideration and for the sum of
two thousand Dollars (\$2,000.00) paid by the said second
party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim
unto the said second party forever, all the right, title, interest and claim which the said first party
has in and to the following described parcel of land, and improvements and appurtenances there-
to in the County of SKAMANIA, State of WASHINGTON to wit:
Placer claim Big Daddy ormc #147543
Niggerhead Sec. 10 Township 10N Range 8E
Also
Load claim little MAMA ormc #147542
Niggerhead Sec. 10 Township 10N Range 8E

Supervised
Ordered
Notary
Notary
Notary

AQ-H (1)

Rev. 4/00

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness _____

Signature of First Party _____

Print name of Witness _____

Print name of First Party _____

Signature of Witness _____

Signature of First Party _____

Print name of Witness _____

Print name of First Party _____

State of _____
County of _____
On _____

before me,

appeared _____
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.

Signature of Notary _____

Affiant _____ Known _____ Produced ID _____
Type of ID _____ (Seal)

State of Washington,
County of Pierce

On 3-6-00 before me,
appeared Debra Tucksen

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.

Linda H. Penner
Signature of Notary

Affiant _____ Known _____ Produced ID _____
Type of ID WDL (Seal)

Debra Tucksen
Signature of Preparer

Debra Tucksen
Print Name of Preparer

30520-56th Ave S Roy WA 98580
Address of Preparer

