AFTER RECORDING MAIL TO:

Doc # 2005158377
Page 1 of 1
Date: 08/17/2005 11:40A
Filed by: SKAMANIA COUNTY TITLE
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. NICHAEL GARVISON
AUDITOR
For: \$22.00

	156: #35.NA
Name Thomas Gallant	
Address 1551 Wind Mt. Road	DEAT FOTATE EVOICE TAV
	REAL ESTATE EXCISE TAX  25182
City, State, Zip Stevenson, WA 98648	AUG 1 7 2005
Filed for Record at Request of:	• · · · · · · · · · · · · · · · · · · ·
	PAID EXEMPT
5ctc 28020	SKALL SOUNTY TREASURER
QUIT CLAIM DEED	
THE GRANTOR(S) THOMAS S. GALLANT, AS	HIS SOLE & SEPARATE PROPERTY
for and in consideration of COMMUNITY PROP	PERTY
conveys and quit claims to THOMAS S. GALLAN	NT & BARBARA J. SELSTAD HUSBAND AND WIFE
the following described real estate, situated in the C	County of SKAMANIA, state of Washington, together with
all after acquired title of the grantor(s) therein:	
A tract of land in the Northeast Quarter of Section 26, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington described as follows:	
Beginning at the center of Section 26, thence East along the South line of the Northeast Quarter, a distance of 1,130 feet to the true point of beginning; thence North 00°04' East a distance of 191.5 feet; thence North 00°03' West 379.9 feet; thence North 50°03' West 116.3 feet; thence North parallel with the West line of the Northeast Quarter to a point on the South line of the Northwest Quarter of the Northeast Quarter; thence East along said South line to the Southeast corner of the Northwest Quarter of the Northeast Quarter a distance of 150 feet; thence East parallel with the South line of the Northeast Quarter, a distance of 590 feet; thence South parallel with the East line of said Northeast Quarter, to the South line of said Northeast Quarter; thence West along said South line to the point of beginning.	
Assessor's Property Tax Parcel/Account Number: 0	
Dated: 8/9/05 Thomas J. Halles	Gary H. Martin, Skamania County Assessor  6.5. Parcel # 3-8-26-10
Thomas S. Gallant	
STATE OF Washington	•
COUNTY OF SKAMPIA )-S	5

(is/a)e) the person(s) who appeared before me, and said person(s) acknowledged that (ne/3)he/they) signed this instrument and acknowledged

My appointment expires:

Notary Public in and for the state of U

I certify that I know or have satisfactory evidence that Thomas S.

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it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in this instrument