

After Recording Return To:
SKAGIT LAW GROUP, PLLC
P. O. Box 336
Mount Vernon, WA 98273



201612230051

Skagit County Auditor \$83.00
12/23/2016 Page 1 of 11 11:20AM

QUIT CLAIM DEED

GRANTORS:

NORMAN W. HOFFMAN as **Personal Representative** of the Estate of **ALICE MAY HOFFMAN**, Deceased; and **NORMAN W. HOFFMAN** as **Successor Trustee** of the **Claude William Hoffman Testamentary Exemption Equivalent Trust** utd 5/21/93; and **NORMAN W. HOFFMAN** as **Successor Trustee** of the **Hoffman Living Trust** utd 5/21/93

GRANTEES:

ANNE E. KNOTT, a married woman as her separate estate, and **CLAUDIA M. DECATO**, a married woman as her separate estate

Each as to an undivided one-half fractional interest as tenants in common

Legal Description;
Abbreviated Form:

Lot 1, N ½ Lot 2, NW ¼ NE ¼ and N ½ SW ¼ NE ¼, all S18 T35N R3 EWM;
Ptn Lot 5, Ptn Lot 6, Lot 7, and SE ¼ SW 1/4, all S7, T35N R3 EWM;
Ptn S7 T35N R3 EWM

Additional on Page:

Exhibit A

Assessor's Tax Parcel Nos:

350318-0-001-0005; P34448; 350318-1-002-0002; P34458
350307-0-007-0002; P33880; 350307-0-009-0000; P33882
350307-0-010-0007; P33883; 350307-3-002-0001; P33891
350307-0-011-0006; P33884

THE GRANTORS, **NORMAN W. HOFFMAN** in his capacity as the duly appointed, qualified and acting **Personal Representative** for the **Estate of Alice May Hoffman, Deceased**, under Skagit County Superior Court Cause No. 14-4-00074-0; **NORMAN W. HOFFMAN** in his capacity as **Successor Trustee** of the **Claude William Hoffman Testamentary Exemption Equivalent Trust** utd 5/21/93; and **NORMAN W. HOFFMAN** in his capacity as **Successor Trustee** of the **Hoffman Living Trust** utd 5/21/93, in distribution of said estate and trusts following the death of Alice May Hoffman, hereby convey and quitclaim to **ANNE E. KNOTT**, a married woman as her separate estate, and **CLAUDIA M. DECATO**, a married woman as her separate estate, each as to an undivided one-half fractional interest as tenants in common, as **GRANTEES** (with the retained right to divide the real property equally pursuant to rights granted in the above-referenced testamentary documents to each Grantee as her respective property), all of the Grantors' right, title and interest in and to that certain real property, together with all after-acquired title of the Grantors therein, situated in the County of Skagit, State of Washington, and legally described as follows:


See **Exhibit A** attached hereto and incorporated herein by this reference.

In particular, this deed is in distribution and satisfaction of the specific devise of real property pursuant to the terms of the Hoffman Living Trust utd 5/21/93 as augmented by that certain Agreement Among Interested Parties in the Estate of Claude William Hoffman dated May 22, 2002, and as ordered under that certain Arbitrator's Order filed in the Estate of Alice May Hoffman (Skagit County Cause No. 14-4-00074-0) on September 12, 2016.

The Grantor hereby conveys to the Grantees without warranty all rights, if any, to further partition and divide the property as a division made by testamentary provision under RCW 58.17.040(3) and any common law.

DATED this 16th day of December, 2016.

ESTATE OF ALICE MAY HOFFMAN,
Deceased, Grantor



NORMAN W. HOFFMAN,
Personal Representative

HOFFMAN LIVING TRUST utd 5/21/93,
Grantor



NORMAN W. HOFFMAN,
Successor Trustee

CLAUDE WILLIAM HOFFMAN
TESTAMENTARY EXEMPTION
EQUIVALENT TRUST utd 5/21/93,
Grantor



NORMAN W. HOFFMAN,
Successor Trustee

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

2016 5784

DEC 23 2016

Amount Paid \$ 0
Skagit Co. Treasurer
By  Deputy

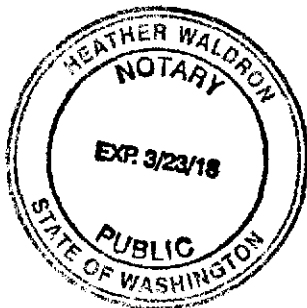
STATE OF WASHINGTON

SS.

COUNTY OF SKAGIT

I certify that I know or have satisfactory evidence that **NORMAN W. HOFFMAN** is the person who appeared before me, and said person acknowledged that he was authorized to execute the instrument and acknowledged it as (1) the **Personal Representative of the Estate of Alice May Hoffman, Deceased**, (2) **Successor Trustee of the Claude William Hoffman Testamentary Exemption Equivalent Trust** utd 5/21/93, and (3) **Successor Trustee of the Hoffman Living Trust** utd 5/21/93, to be the free and voluntary act of such parties for the uses and purposes mentioned in the instrument.

GIVEN UNDER MY HAND AND OFFICIAL SEAL this 16th day of December, 2016.



Heather Waldron
HEATHER WALDRON
Printed Name
NOTARY PUBLIC in and for the State of Washington
My Commission Expires 3-23-2018

EXHIBIT A
(Legal Description)

DESCRIPTION:

Lot 5, South of slough; Lot 6, East of slough; Lot 7 and the Southeast $\frac{1}{4}$ of the Southwest $\frac{1}{4}$, all in Section 7, Township 35 North, Range 3 East, W.M., less dike and drainage rights-of-way heretofore conveyed.

A parcel of land situated in Section 7, Township 35 North, Range 3 East, W.M., described as follows:

Beginning where O'Keef's Slough running Westerly touches the South line of the M.B. Richards Warehouse Lot;
thence Southeasterly along the South line of said lot to an old dike;
thence Southwesterly along said dike 60 feet;
thence Northwesterly to said slough;
thence Northeasterly along said slough to the place of beginning (also described as Skagit County Assessor's Tax No. 2).

All of Lot 1, and the North $\frac{1}{2}$ of Lot 2, the Northwest $\frac{1}{4}$ of the Northeast $\frac{1}{4}$ and the North $\frac{1}{2}$ of the Southwest $\frac{1}{4}$ of the Northeast $\frac{1}{4}$, all in Section 18, Township 35 North, Range 3 East, W.M., in Skagit County, Washington.

EXCEPT any portion thereof lying Southerly of the following described line:

Beginning at the Southeast corner of the Southeast $\frac{1}{4}$ of the Southeast $\frac{1}{4}$ of said Section 18 (Southeast Section corner);
thence North $0^{\circ}06'06''$ East, 1,332.26 feet, along the East line of said subdivision to the Northeast corner thereof, also being the centerline of D'Arcy Road;
thence South $88^{\circ}56'24''$ West along said centerline of D'Arcy Road, 1,332.44 feet, more or less, to an iron pipe at the intersection of the centerline of D'Arcy Road with the centerline of the Bayview-Edison Road;
thence North $0^{\circ}25'48''$ East along said centerline of the Bayview-Edison Road (per road alignment found on that certain Skagit County Subdivision Map for Section 18, Township 35 North, Range 3 East, W.M., by Frank Gilkey, dated June 1959, available at Skagit County Public Works), 2,692.50 feet to an angle point in the centerline;
thence North $0^{\circ}59'48''$ East, 321.56 feet along said centerline to an intersection with the Easterly extension of a gravel driveway;
thence North $89^{\circ}38'28''$ West, 20.00 feet along said centerline of the gravel driveway to the Westerly right of way margin of said Bayview-Edison Road and being the true point of beginning of said line description;
thence continue North $89^{\circ}38'28''$ West along the centerline of said gravel drive, or centerline extended, 400.00 feet;

-continued-

DESCRIPTION CONTINUED:

thence North 0°59'48" East, 260.00 feet;
thence North 89°38'28" West, 888.42 feet;
thence South 0°14'38" West, parallel with the North-South centerline of said Section 18, 132.00 feet;
thence North 89°38'28" West, 1,756.7 feet, more or less, to the centerline of the existing dike along the shore of Padilla Bay;
thence continue North 89°38'28" West to the West line of said Government Lot 1 and being the terminus of said line.

EXCEPT Bayview-Edison Road;

AND EXCEPT that portion of Lots 1 and 2 conveyed to Dike District No. 5 by deed recorded December 30, 1953, under Auditor's File No. 496732, records of Skagit County, Washington.

ALL BEING SUBJECT TO AND TOGETHER WITH easements, reservations, restrictions, covenants, liens, leases, court causes and other instruments of record, including but not limited to the following agreements executed by the Grantors/Grantees contemporaneously herewith:

- 1) That certain Deed of Driveway Easement and Driveway Maintenance Agreement dated December 19, 2016, and recorded on December 21, 2016, under Skagit County Auditor's File No. 201612210049;
- 2) That certain Septic System Agreement dated December 19, 2016, and recorded on December 21, 2016, under Skagit County Auditor's File No. 201612210050; and
- 3) That certain Agreement Regarding Subsurface Drainage and Maintenance dated December 19, 2016, and recorded on December 21, 2016, under Skagit County Auditor's File No. 201612210051.

**SUPERIOR COURT OF THE STATE OF WASHINGTON
FOR SKAGIT COUNTY**

ESTATE OF: ALICE MAY HOFFMAN Deceased	CASE NO. 14-4-00074-0 LETTERS TESTAMENTARY
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1.1 The last will of ALICE MAY HOFFMAN late of Skagit County was duly exhibited proven and recorded in this court on MARCH 7, 2014.

SKAGIT COUNTY, WASH
FILED

1.2 In that will NORMAN W. HOFFMAN named personal representative.

MAR 07 2014

1.3 The personal representative has qualified.

NANCY K. SCOTT, CO. CLERK,
Deputy

II. CERTIFICATION

THIS IS TO CERTIFY THAT NORMAN W. HOFFMAN is authorized by this court to execute the will of the above decedent according to law.

DATED MARCH 7, 2014

NANCY SCOTT
COUNTY CLERK AND CLERK OF THE SUPERIOR COURT

BY KRISTEN DENTON, Deputy Clerk

III. CERTIFICATE OF COPY

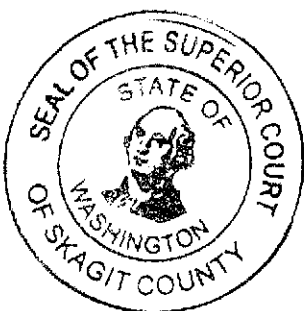
STATE OF WASHINGTON)) ss
COUNTY OF SKAGIT)

I, NANCY SCOTT, Clerk of the Superior Court of Skagit County, certify that the above is a true and correct copy of the Letters Testamentary in the above-named case which was entered of record on MARCH 7, 2014.

I further certify that these letters are now in full force and effect.

DATED 10/17/16 NANCY SCOTT
COUNTY CLERK AND CLERK OF THE SUPERIOR COURT

BY Kristen Denton Deputy Clerk



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2014-003488

DATE ISSUED: 02/19/2014

FEE NUMBER: 0000000029

GIVEN NAMES: ALICE MAY
LAST NAME: HOFFMAN

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: FEBRUARY 14, 2014
HOUR OF DEATH: 03:45 P.M.
SEX: FEMALE
AGE: 89 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: [REDACTED]
BIRTHPLACE: BELLINGHAM, WASHINGTON

MARITAL STATUS: WIDOWED
SPOUSE:

OCCUPATION: NURSE
INDUSTRY: HEALTH CARE
EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE
US ARMED FORCES? NO

INFORMANT: NORM HOFFMAN
RELATIONSHIP: SON
ADDRESS: 8174 BAYVIEW EDISON BOW WA 98232

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 8136 BAYVIEW EDISON RD.
CITY, STATE, ZIP: BOW, WASHINGTON 98232

RESIDENCE STREET: 8136 BAYVIEW EDISON RD.
CITY, STATE, ZIP: BOW, WASHINGTON 98232
INSIDE CITY LIMITS? NO
COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 64 YEARS

FATHER: GILBERT BONNER
MOTHER: ALICE [REDACTED]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: HAWTHORNE MEMORIAL PARK CREMAT
CITY, STATE: MOUNT VERNON, WA
DISPOSITION DATE: FEBRUARY 19, 2014

FUNERAL FACILITY: HAWTHORNE FUNERAL HOME
ADDRESS: PO BOX 398
CITY, STATE, ZIP: MOUNT VERNON WA 98273
FUNERAL DIRECTOR: KIRK S. DUFFY

CAUSE OF DEATH:
A. CHRONIC OBSTRUCTIVE PULMONARY DISEASE
INTERVAL: YEARS
B. TOBACCO USE
INTERVAL: YEARS
C.
INTERVAL:
D.
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:
ABDOMINAL AORTIC ANEURYSM, ANOREXIA

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK?
PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

MANNER OF DEATH: NATURAL
AUTOPSY: NO
AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH? YES
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: ANITA M. MEYER, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 227 FREEMAN DRIVE, SUITE A
CITY, STATE, ZIP: MOUNT VERNON WA 98273
DATE SIGNED: FEBRUARY 17, 2014

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

ITEM(S) AMENDED: NONE

NUMBER(S): NONE
DATE(S): NONE



CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: 108
ATTENDING PHYSICIAN:
NOT APPLICABLE

LOCAL DEPUTY REGISTRAR:
MARIA VIVANCO
DATE RECEIVED: FEBRUARY 18, 2014

Affidavit for Correction

Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
(360) 236-4300

This is a legal document. Complete in ink and do not alter.

STATE OFFICE USE ONLY

State Health Officer: _____ Fee Number: _____ Initials: _____ Date: _____ Affidavit Number: _____

Use the section below for requests for any changes on the record

Record Type: ☐ Birth ☐ Death ☐ Marriage ☐ Divorce ☐ Dissolution

1. Name of record: _____ 2. Date of Event: _____ 3. Place of Event: _____

4. Father/Parent Full Birth Name: _____ 5. Mother/Parent Full Birth Name: _____

This record is incorrect or incomplete as follows:

6. The record shows: _____ 7. The true fact is: _____

8. _____ 9. _____

10. _____ 11. _____

12. _____ 13. _____

14. I represent the person as: ☐ Son ☐ Parent ☐ Guardian ☐ Informant Telephone Number: _____

15. Signature: _____ 16. Date: _____ 17. Address: _____

(Printed Name) _____

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Examples of acceptable documentary proof:

Birth Record, Funeral Home Record, Social Security Card, Military Record (DD-214), Life Insurance Policy, Hospital Medical Record, School Records (Official), Alien Registration Card (if it bears an effective date), Alien Registration (front and back)

Birth Certificate

1. Only a birth certificate (if the child is under 18), or the name provided (if 18 or older) may change the birth certificate.

2. The name must be exactly the same as the original (no initials). For example, if the original name is Mary Ann Doe, then the proof must show the name Mary Ann Doe.

3. Only a birth certificate or the name provided may change the birth certificate.

4. Only a birth certificate or the name provided may change the birth certificate.

5. Only a birth certificate or the name provided may change the birth certificate.

6. Only a birth certificate or the name provided may change the birth certificate.

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27. Only a birth certificate or the name provided may change the birth certificate.

28. Only a birth certificate or the name provided may change the birth certificate.

29. Only a birth certificate or the name provided may change the birth certificate.

30. Only a birth certificate or the name provided may change the birth certificate.

CERTIFIED

FEB 19 2014

Skagit County Public Health Department
Howard Leibrand M.D., Health Officer

ZZ00024751

Declaration of Norman W. Hoffman

I declare under penalty of perjury under the laws of the State of Washington that the following statements are true and correct.

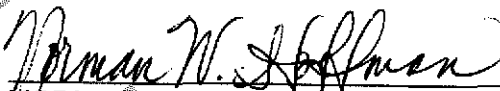
The Hoffman Living Trust was adopted by my parents, Claude William Hoffman and Alice May Hoffman, by instrument dated May 21, 1993.

The Claude William Hoffman Testamentary Exemption Equivalent Trust utd 5/21/93 was established for the benefit of Alice May Hoffman following the death of Claude William Hoffman on April 4, 1995.

Article XI (Successor Trustees) governs the designation of trustees and successor trustees of both the Hoffman Living Trust utd 5/21/93 and the Claude William Hoffman Testamentary Exemption Equivalent Trust utd 5/21/93. As both Claude William Hoffman and Alice May Hoffman are now deceased, I am serving as successor trustee of both trusts.

A true and correct copy of Article XI is attached hereto and incorporated herein by this reference.

Dated this 16th day of DECEMBER, 2016, at Mount Vernon, Washington.



NORMAN W. HOFFMAN,
Successor Trustee

ARTICLE X
Trusts for Beneficiaries Under Age 25

Any property passing under this agreement to a child or descendant under the age of ~~thirty (30)~~ ^{thirty (30)} ~~twenty-five (25)~~ shall be held by Trustee for the benefit of such child or descendant (the beneficiary), to be held and administered as follows. Trustee shall make such distributions of income and principal as Trustee, in Trustee's sole discretion, deems appropriate to provide for the beneficiary's needs for health, education and reasonable support. In making such distributions, Trustee shall have regard for the beneficiary's best interests and development, and consider the reasonable use of all other resources and support available to the beneficiary and known to Trustee (including but not limited to other trusts held for the beneficiary). Upon the beneficiary attaining age twenty-one (21), Trustee shall distribute one-half (1/2) of the beneficiary's trust. Upon the beneficiary attaining the age of ~~thirty (30)~~ ^{thirty (30)} ~~twenty-five (25)~~, Trustee shall distribute the balance of the beneficiary's trust in termination thereof. If the beneficiary dies before receiving complete distribution of his trust, Trustee shall distribute the balance to or for the benefit of such one or more persons, including the beneficiary's estate, as the beneficiary may appoint by specific reference in his Last Will. That portion of such trust not so appointed shall be distributed by right of representation to the living descendants of the beneficiary, if any, and if none, to the living descendants of Trustors by right of representation; provided, that any share for a descendant under age ~~thirty (30)~~ ^{thirty (30)} ~~twenty-five (25)~~ shall be administered and distributed as a separate trust under this Article.

ARTICLE XI
Successor Trustees

CLAUDE WILLIAM HOFFMAN and ALICE M. HOFFMAN shall serve as Trustee under this agreement. If either of them shall resign, become unable to serve, or be removed, the other shall serve as sole Trustee under this agreement. If both of them shall resign, become unable to serve, or be removed, NORMAN W. HOFFMAN shall serve as Trustee. If he is unable or unwilling to serve or, having accepted, later resigns, becomes unable to serve

C.H.
If she is unable or unwilling to serve or, having accepted, later resigns, becomes unable to serve, or is removed, ANNE E. HOFFMAN-KNUTZEN shall serve as Trustee
or is removed, CLAUDIA M. HOFFMAN-DECATO shall serve as Trustee. *A* No bond shall be required of any Trustee.

ARTICLE XII

Rule Against Perpetuities

Any trust created under this agreement which has not terminated at some earlier date shall, in any event, terminate one day earlier than twenty-one (21) years after the death of the last to die of the beneficiaries of the trusts provided for in this agreement who are living or conceived on the date of death of the second Trustor to die, and Trustee shall thereupon distribute the assets of any such trust to the beneficiary thereof.

ARTICLE XIII

Disclaimers

13.1 As soon as possible after the death of the first Trustor, it is both Trustors' desire that the surviving Trustor consult with tax counsel as to his or her right to disclaim all or any part of his or her rights as beneficiary hereunder, or to any interest in property passing to him or her by reason of the death of a Trustor outside of this agreement, and the tax consequences and benefits to him or her and his or her estate, if any, of such a disclaimer. It is both Trustors' desire that the surviving Trustor exercise his or her right of disclaimer to minimize, to the extent possible, any estate, inheritance, and succession taxes payable by reason of his or her death, to the extent such disclaimer is consistent with the overall objectives of providing both Trustors with lifetime security.

13.2 If the surviving Trustor exercises his or her right to disclaim all or any part of his or her rights as a beneficiary hereunder or to any interest in property passing to him or her by reason of a Trustor's death outside of this agreement, said property and interest therein shall be added to the Exemption Equivalent Trust in accordance with Article VI unless the surviving Trustor disclaims all interest in said property, in which event it shall be distributed as if he or she had not survived the first Trustor to die.

C.H.