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02/07/2019 12:18 PM Pages: 1 of 2 Fees: \$100.00
Skagit County Auditor

After recording, return to (Name, Address, Zip):

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

FEB 07 2019

TRANSFER ON DEATH DEED

Amount Paid \$
By MA Skagit Co. Treasurer
DeputyGrantor(s): ALLAN J WGrantee(s) (Beneficiary): DISA M. ALLANAbbreviated Legal Description: 1307 Cleveland Street Mount Vernon WA 98273 / Fair toAssessor's Property Tax Parcel or Account No: 52790-3720-003-004-0003 Mt. Vernon

Reference No(s) of Documents Assigned or Released:

Lts 3 and 4Bk 3 Dk 3Grantor: ALLAN J WGrantor's Address: 219 5th Street Anacortes WA 98221Designated Beneficiary: DISA M. ALLANDesignated Beneficiary's Address: 219 5th Street Anacortes WA 98221

Alternate Designated Beneficiary (optional):

Alternate Designated Beneficiary's Address:

Subject to the limitations contained herein, Grantor transfers to the beneficiaries designated above, all of Grantor's interest, together with any interest therein which Grantor may hereafter acquire, in the real property, situated in _____ County, State of Washington, legally described (check one):

- ☐ as set forth on the attached Exhibit A, and incorporated by this reference.
☐ as follows:

The transfer to Designated Beneficiary is to occur at Grantor's death and is contingent on Designated Beneficiary surviving Grantor. The interest of a Designated Beneficiary that fails to survive Grantor lapses.

The transfer to Alternate Designated Beneficiary is to occur at Grantor's death and is contingent on Designated Beneficiary not surviving Grantor and on Alternate Designated Beneficiary surviving Grantor. The interest of an Alternate Designated Beneficiary that fails to survive Grantor lapses.

(OVER)

PUBLISHER'S NOTE: RCW 64.80.050(3) states that a Transfer on Death Deed "must be recorded before the transferor's death in the public records in the office of the auditor of the county where the property is located."



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Grantor has the right to revoke this deed.

In construing this instrument, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that this instrument shall apply equally to entities and to individuals.

DATED 2-4-19

[Signature]

STATE OF WASHINGTON,

County of Skagit } ss.

I certify that I know or have satisfactory evidence that James W. Allan is/are the individual(s) who appeared before me, and who acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in the instrument.

DATED 2/4/19



[Signature]
Notary Public for Washington
My appointment expires 10/28/20

STATE OF WASHINGTON,

County of _____ } ss.

I certify that I know or have satisfactory evidence that _____ is the individual who appeared before me, and who acknowledged that he/she signed this instrument, on oath stated that he/she was authorized to execute the instrument and acknowledged it as the _____ of _____ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

DATED _____

Notary Public for Washington
My appointment expires _____

