## 201910160018

10/16/2019 09:37 AM Pages: 1 of 2 Fees: \$104.50 Skapit County Auditor

After recording, return to (Name, Address, Zip):	Real Estate Excise Tax Exempt Skagit County Treasurer By 3
TRANSFER ON DEATH DEED	Date Tot Total
	Saleman  Saleman  Saleman  Saleman  Saleman  Saleman  Saleman  Saleman  Saleman  Saleman
- Mount Vernor Wa	
Alternate Designated Beneficiary (optional):  Alternate Designated Beneficiary's Address:	
Grantor's interest, together with any interest therein which Gated in County, State	of Washington, legally described (check one): rated by this reference.
Lot 33, "Plat of Cedar Rid as Per Plat recorded in Vol	ge Estates, Division No. 1, Tume 15 of Plats, Pages
147 through 152. Inclusion	re records of Skagit
Count, Washington.	

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.

PUBLISHER'S NOTE: RCW 64.80.060(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.	
	equires, the singular includes the plural, and all grammat-
ical changes shall be made so that this instrument shall appl	y equally to endues and to individuals.
DATED October 9, 2019	1/200 Accepted Solo
	Harry Augustus Salan
STATE OF WASHINGTON,	
County of Skaget ss.	
County of	$\sim$
I certify that I know or have satisfactory evidence the	nat Harry Augustus Sodeman III Vare the individual(s) who appeared before me, and who
	and the transfer of the same o
acknowledged that he/she/they signed this instrument and a	cknowledged it to be his/her/their free and voluntary act
for the uses and purposes mentioned in the instrument.	
DATED October 9,2009	
CRYSTAL M. ED	
	Notary Public for Washington My appointment expires 03-01-2020
O NOTARY &	My appointment expires
ON PUBLIC >	
OF WASHING	
OF MASHING	
STATE OF WASHINGTON,	
ss.	
County of	
I certify that I know or have satisfactory evidence tha	
	is the individual who appeared before me, and who
acknowledged that he/she signed this instrument, on oath sta	
and acknowledged it as the	to be the free and voluntary act of
such party for the uses and purposes mentioned in the instru	
DATED	
	Notary Public for Washington
	My appointment expires