



202101120108

01/12/2021 02:13 PM Pages: 1 of 8 Fees: \$110.50
Skagit County Auditor

After recording return document to:

ADAPTIVE LAW FIRM PS
107 State Street
Sedro-Woolley, WA 98284

DOCUMENT TITLE:	Special Warranty Deed
GRANTOR(S):	Katrina Pierson, P.R. of Estate of Harold Lyle Pierson
GRANTEE(S):	Katrina Pierson, an unmarried woman
ABBREVIATED LEGALS:	All in N 1/2, Section 19, T35N, R4E, W.M.
PARCEL NUMBER(S):	P36904, P36893, P112820, P36916

Return to:
ADAPTIVE LAW FIRM PS
107 State Street
Sedro Woolley, WA 98284

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

2021-1310
JAN 12 2021

Amount Paid \$ 0
Skagit Co. Treasurer
By *CS* Deputy

SPECIAL WARRANTY DEED

THIS DEED is made by KATRINA PIERSON, as PERSONAL REPRESENTATIVE OF THE ESTATE OF HAROLD LYLE PIERSON, *(also known as Lyle H.)* for and in fulfillment of the conditions set forth in the Last Will and Testament of HAROLD LYLE PIERSON, Skagit County Probate No.

17-4-00163-5, (Grantor), grants, bargains, sells, conveys and confirms to KATRINA PIERSON, a single woman, as her separate property, all of decedent's interest in the following-described real estate situate in the County of Skagit, State of Washington:

Parcel No. P36904/PARCEL "A:"

Commencing at the West ¼ corner of said Section 19; thence South 89°28'54" East along the East-West centerline of said Section 19, a distance of 3,005.79 feet to the Southeasterly corner (including road right-of-way) of that certain tract of land described on Quit Claim Deed to Harold Pierson and Sons, Inc., a Washing corporation, recorded under Skagit County Auditor's File No. 8003050026 and being the TRUE POINT OF BEGINNING; thence North 0°31'06" East 338.00 feet along the East line of said Harold Pierson and Sons, Inc. tract to the Northeast corner thereof; thence South 89°28'54" East 200.00 feet, parallel with said East-West centerline of Section 19; thence South 0°31'06" West 338.00 feet to the intersection with said East-West centerline of Section 19; thence North 89°28'54" West 200.00 feet along said East-West centerline of Section 19 to the TRUE POINT OF BEGINNING. EXCEPT road right-of-way.

SUBJECT TO AND TOGETHER WITH easements, reservations, restrictions covenants and other instruments of record.

Situate in the County of Skagit, State of Washington.

Parcel No. 36893/PARCEL "B"

Beginning at a point on the North line of County Road 795 feet East of the West line of the Southeast Quarter (SE ¼) of the Northwest Quarter (NW ¼), Section 19, Township 35 North, Range Four East of the Willamette Meridian, thence North parallel with said West line 208 feet; thence East at right angles 416 feet; thence South at right angles to North line of County Road; thence Westerly along said North line of County Road to the point of beginning.

Parcel No. P112820/PARCEL "C"

see full legal on Exhibit "A"

That portion of the Southwest quarter of the Northeast quarter of Section 19, Township 35 North, Range 4 East, W.M., being more particularly described as follows:

Commencing at the West quarter corner of said Section 19; thence South 89°28'54" East along the East-West centerline of said Section 19 a distance of 2620.79 feet to the TRUE POINT OF BEGINNING; thence North 0°31'06" East a distance of 338.00 feet; thence South 89°28'54" East a distance of 385.00 feet; thence South 0°31'06" West a distance of 338.00 feet to the intersection of said East-West centerline of said Section 19; thence North 89°28'54" West a distance of 385.00 feet to the TRUE POINT OF BEGINNING.

LESS County Road right-of-way.

Parcel No. P36916/PARCEL "D"

The Southeast ¼ of the Northwest ¼ of Section 19, Township 35 North, Range 4 East W.M., EXCEPT the West 495 feet thereof and EXCEPT County road along the South line thereof.

The Grantor for said estate expressly limits the covenants of this deed to those expressed herein, and excludes all covenants arising or to arise by statutory or other implication, and covenants that against all persons whomsoever lawfully claiming or to claim by, through or under said Grantor and not otherwise, he will forever warrant and defend the said-described real estate.

DATED this 18 day of December, 2019

Katrina Pierson
KATRINA PIERSON, Personal Representative of the
Estate of Harold Lyle Pierson

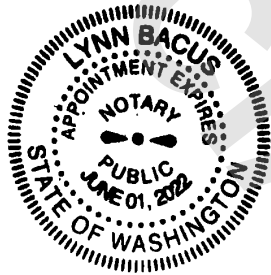
STATE OF WASHINGTON)

: ss

COUNTY OF SKAGIT)

I certify that I know or have satisfactory evidence that KATRINA PIERSON, Personal Representative of the Estate of Harold Lyle Pierson, is the person who appeared before me, and said person acknowledged that she signed this instrument, and acknowledged it as her free and voluntary act for the uses and purposes mentioned herein.

DATED: December 18, 2019.



Lynn Bacus
Notary Public for the State of Washington

My commission expires: 6/1/2022

EXHIBIT "A"**Parcel No. P36904/PARCEL "A:"**

Commencing at the West 1/4 corner of said Section 19; thence South $89^{\circ}28'54''$ East along the East-West centerline of said Section 19, a distance of 3,005.79 feet to the Southeasterly corner (including road right-of-way) of that certain tract of land described on Quit Claim Deed to Harold Pierson and Sons, Inc., a Washing corporation, recorded under Skagit County Auditor's File No. 8003050026 and being the TRUE POINT OF BEGINNING; thence North $0^{\circ}31'06''$ East 338.00 feet along the East line of said Harold Pierson and Sons, Inc. tract to the Northeast corner thereof; thence South $89^{\circ}28'54''$ East 200.00 feet, parallel with said East-West centerline of Section 19; thence South $0^{\circ}31'06''$ West 338.00 feet to the intersection with said East-West centerline of Section 19; thence North $89^{\circ}28'54''$ West 200.00 feet along said East-West centerline of Section 19 to the TRUE POINT OF BEGINNING. EXCEPT road right-of-way.

SUBJECT TO AND TOGETHER WITH easements, reservations, restrictions covenants and other instruments of record.

Situate in the County of Skagit, State of Washington.

Parcel No. 36893/PARCEL "B"

Beginning at a point on the North line of County Road 795 feet East of the West line of the Southeast Quarter (SE 1/4) of the Northwest Quarter (NW 1/4), Section 19, Township 35 North, Range Four East of the Willamette Meridian, thence North parallel with said West line 208 feet; thence East at right angles 416 feet; thence South at right angles to North line of County Road; thence Westerly along said North line of County Road to the point of beginning.

Situate in the County of Skagit, State of Washington.

Parcel No. P112820/PARCEL "C"

That Portion of the Southwest Quarter of the Northeast Quarter of Section 19, Township 35 North, Range 4 East, W.M., lying Westerly of the State Highway EXCEPT the following described tract: Commencing at the West quarter corner of said Section 19; thence South $89^{\circ}28'59''$ East along the East-West centerline of said Section 19 a distance of 2620.79 feet to the TRUE POINT OF BEGINNING; thence North $0^{\circ}31'06''$ East a distance of 338.00 feet; thence South $89^{\circ}28'54''$ East a distance of 585.00 feet; thence South $0^{\circ}31'06''$ West a distance of 338.00 feet to the intersection of said East-West centerline of said Section 19; thence North $89^{\circ}28'54''$ West to the TRUE POINT OF BEGINNING. LESS County Road right-of-way.

Situate in the County of Skagit, State of Washington.

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

ESTATE OF:	CASE NO. 17-4-00163-5
HAROLD LYLE PIERSON	LETTERS TESTAMENTARY
Deceased	

1.1 The last will of HAROLD LYLE PIERSON late of Skagit County was duly exhibited proven and recorded in this court on APRIL 18, 2017.

1.2 In that will KATRINA PIERSON named personal representative.

1.3 The personal representative has qualified.

II. CERTIFICATION

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

DATED APRIL 18, 2017

MAVIS E. BETZ
COUNTY CLERK AND CLERK OF THE SUPERIOR COURT

BY Kristen A. Denton, Deputy Clerk

III. CERTIFICATE OF COPY

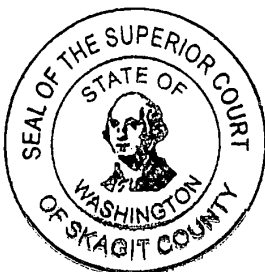
STATE OF WASHINGTON)) ss
COUNTY OF SKAGIT))

I, MAVIS E. BETZ, 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 APRIL 18, 2017.

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

DATED 4/19/17 MAVIS E. BETZ
COUNTY CLERK AND CLERK OF THE SUPERIOR COURT

BY Kristen A. Denton Deputy Clerk



STATE OF WASHINGTON

DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2016-031677

DATE ISSUED: 09/29/2020

FEE NUMBER: 114652425

FIRST AND MIDDLE NAME(S): HAROLD LYLE

LAST NAME(S): PIERSON

COUNTY OF DEATH: SKAGIT

DATE OF DEATH: JULY 31, 2016

HOUR OF DEATH: 08:45 PM

SEX: MALE

AGE: 86 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: [REDACTED]

BIRTHPLACE: BURLINGTON, WA

MARITAL STATUS: MARRIED

SURVIVING SPOUSE: KATRINA KOHNE

OCCUPATION: FARMER

INDUSTRY: AGRICULTURE

EDUCATION: BACHELOR'S DEGREE

US ARMED FORCES: YES

INFORMANT: KATRINA K. PIERSON

RELATIONSHIP: WIFE

ADDRESS: 18579 COOK ROAD, BURLINGTON, WA 98233

CAUSE OF DEATH:

A: ACUTE MYOCARDIAL INFARCTION

INTERVAL: 1 DAY

B: CORONARY ARTERY DISEASE

INTERVAL: YEARS

C:

INTERVAL:

D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: ATRIAL FIBRILLATION

DATE OF INJURY:

HOUR OF INJURY:

INJURY AT WORK:

PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:

COUNTY:

DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOSPITAL

FACILITY OR ADDRESS: SKAGIT VALLEY HOSPITAL

CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98274

RESIDENCE STREET: 18579 COOK RD

CITY, STATE, ZIP: BURLINGTON, WA 98233

INSIDE CITY LIMITS: NO

COUNTY: SKAGIT

TRIBAL RESERVATION: NOT APPLICABLE

LENGTH OF TIME AT RESIDENCE: 60 YEARS

FATHER: HAROLD SYLVESTER PIERSON

MOTHER: CORINNE [REDACTED]

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: MOUNT VERNON CREMATORY

CITY, STATE: MOUNT VERNON, WASHINGTON

DISPOSITION DATE: AUGUST 05, 2016

FUNERAL FACILITY: HULBUSH FUNERAL HOME AND CREMATION SERVICES

ADDRESS: 281 SOUTH BURLINGTON BLVD

CITY, STATE, ZIP: BURLINGTON, WASHINGTON 98233

FUNERAL DIRECTOR: PAUL L. GIBSON

MANNER OF DEATH: NATURAL

AUTOPSY: NO

WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE

CAUSE OF DEATH: NOT APPLICABLE

DID TOBACCO USE CONTRIBUTE TO DEATH: NO

PREGNANCY STATUS IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: SANJEEV VADERAH

TITLE: PHYSICIAN

CERTIFIER ADDRESS: 307 SOUTH 13TH STREET

CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98274

DATE SIGNED: AUGUST 04, 2016

CASE REFERRED TO ME/CORONER: NO

FILE NUMBER: NJA 461

ATTENDING PHYSICIAN: SANJEEV VADERAH, MD

LOCAL DEPUTY REGISTRAR: MARIA VIVANCO

DATE RECEIVED: AUGUST 05, 2016

Affidavit for Correction

01/12/2021 02:10 PM Page 2 of 3
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 File Number	Fee Number	Initials	Date	Affidavit Number
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Required	Required information must match current information on record			
	Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution (Divorce)			
	1. Name on Record:		2. Date of Event:	3. Place of Event:
	First Middle Last	MM/DD/YYYY	(City or County)	
	4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution)		5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution)	
	First Middle Last/Maiden	First Middle Last/Maiden		
6. Name of Person Requesting Correction:		Relationship to Person on Record: <input type="checkbox"/> Self <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Hospital <input type="checkbox"/> Parent(s) <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (specify) _____		
7. Return Mailing Address:				
PO Box or Street Address		City	State	Zip
Telephone Number:		Email Address:		
()				
Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:				
The record currently shows:		The true fact is:		
8.		9.		
10.		11.		
12.		13.		
I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.				
14a. Signature:		14b. Signature of 2 nd parent (if required):		
Printed name:		Date:	Printed name:	Date:
INSTRUCTIONS – go to www.doh.wa.gov for more information				
Required proof documentation must be submitted with the affidavit and include full name and birth date. Examples of proof documentation include:				
<ul style="list-style-type: none"> Birth/Marriage/Divorce record Military record (DD-214) School transcripts Social Security Numident Report Certificate of Naturalization Hospital/medical record Copy of Passport / Enhanced ID Green/Permanent Resident card (I-551) 				
You cannot use a Driver's license, Social Security card, or hospital decorative birth certificate as proof documentation.				
Birth Certificates				
1. Only a parent(s), legal guardian (if the child is under 18), or the named individual (if 18 or older) may change the birth certificate.				
2. The proof(s) must match the asserted fact(s). For example, if the affidavit says the name should be Mary Ann Doe, the proof must show the name to be Mary Ann Doe.				
3. Proof documentation must be five or more years old or established within five years of birth.				
4. This affidavit cannot be used to add a parent to a birth certificate (use Acknowledgment of Parentage from DOH 422-159).				
Child under 18				
<ul style="list-style-type: none"> If legal guardian(s), include certified court order proving guardianship. Up to age one or up to one year following the filing of an Acknowledgment of Parentage form, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names); thereafter, a court order is required to change the last name. No proof is required to change the first or middle name.* To correct parent's information, one proof documentation is required. To correct the sex of the child, one proof documentation from a medical provider is required. 				
<ul style="list-style-type: none"> Only the adult can change their own birth certificate. If the first or middle name is missing, three pieces of proof documentation are required. If the first, middle and/or last name is misspelled, or month and/or day of birth is incorrect, two pieces of proof documentation are required. To correct parent's birth date, place of birth, or name, one proof documentation is required. 				
*To change any part of the name of a child using this form, signatures from both parents listed on the certificate are required . If one parent is deceased, submit a death certificate with request.				
Death Certificates				
1. Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family member may change the non-medical information with proof documentation. Family members are spouse or registered domestic partner, parent, sibling, or adult child or stepchild. Marital status requires a certified court order if someone other than the informant is requesting the change.				
2. The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.				
Marriage/Dissolution (Divorce) Certificates				
1. Personal facts (minor spelling changes in name, date or place of birth, or residence) may be changed by the person with one piece of proof documentation.				
2. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.				



This is a true and exact certification of the record officially registered and on file with the Washington State Department of Health, issued under the authority of Chapter 70.58 RCW, and at the direction of Jean Remsbecker, State Registrar.

Jean Remsbecker



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