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02/28/2022 12:56 PM Pages: 1 of 4 Fees: \$206.50 Skagit County Auditor

Return Address:
Document Title: Transfer on death deed
Reference Number (if applicable):
Grantor(s): [_] additional grantor names on page
1) Ivene E Prokuski
2)
Grantee(s): [_] additional grantor names on page
1) Alexis A Brandow
2) <u>Dennis James Brandow</u>
Abbreviated Legal Description: [_] full legal on page(s)
Unit 38-B - Fifth Amendment to survey
Map and plans for North Hill Townnomes,
A condominium.
Assessor Parcel /Tax ID Number: [_] additional parcel numbers on page
P RUQUT

Return document to: Irene Prokuski 2521 River Vista Ct., Unit B Mount Vernon, WA 98273

Transfer-on-Death Deed

(RCW 64.80.010 to 64.80.904)

NOTICE TO OWNER

You should carefully read all information on this form. You may want to consult a lawyer before using this form.

This form must be recorded before your death or it will not be effective.

IDENTIFYING INFORMATION

Owner Making This Deed:

Printed name: Irene E Prokuski

Mailing address: 2521 River Vista Ct., Unit B, Mount Vernon, WA 98273

Legal Description of the Property: Unit 38-B "FIFTH AMENDMENT TO SURVEY MAP AND PLANS FOR NORTH HILL TOWNHOMES, A CONDOMINIUM" recorded as Auditor's File No. 201908280030, and according to Sixth Amendment to Condominium Declaration recorded August 8, 2019 as Auditor's File No. 201908280031 and any amendment thereto; TOGETHER WITH any rights appurtenant thereto; Said Condominium being a portion of Tract "A" and Lots 26, 27 and 28, "PLAT OF NORTH HILL PUD" as per plat recorded May 5, 2005 as Auditor's File No. 200505050094.

Tax Parcel ID Number: P134947

PRIMARY BENEFICIARY

I designate the following beneficiary if the beneficiary survives me:

Printed name: Alexis A Brandow

Mailing address, if available: 4144 State Rd, La Crosse, WI 54601

Printed name: Dennis James Brandow

Mailing address, if available: 325 Oak View Lane, Santa Barbara, CA 93111

TRANSFER ON DEATH

At my death, I transfer my interest in the described property to the beneficiaries as designated above.

Before my death, I have the right to revoke this deed.

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SIGNATURE OF OWNER MAKING THIS DEED

Irene E Prokuski

Signature:

Date:

02/28/22

Notary Public State of Washington EXILDAH SMITH LICENSE # 21010657 MY COMMISSION EXPIRES JANUARY 7, 2025

Certificate of Acknowledgment of Notary Public

State of Washington	
County of Skag1+	
I certify that I know or have satisfactory evidence that I certify that I know or have satisfactory evidence that is/s before me, and said person(s) acknowledged that (he/she/they) acknowledged it to be (his/her/their) free and voluntary act for in the instrument.	signed this instrument and
Dated: 2 - 28 - 2022	
(Signature of officer and seal or stamp) Notary (Title)	Notary Public State of Washington EXILDAH SMITH LICENSE # 21010657 MY COMMISSION EXPIRES JANUARY 7, 2025
My appointment expires: $01-07-2025$	•