AFN #2016001049 Recorded Jun 01, 2016 03:00 PM DocType: TOD Filed by: Jeffrey L Hull Page: 1 of 2 File Fee: \$74.00 Auditor Robert J. Waymire Skamania County, WA

Jeffrey L Hull PO BOX 473

NORTH BONNEVILLE, WA 98639

REVOCABLE TRANSFER ON DEATH DEED

Under Chapter 64.80 RCW
Washington Uniform Real Property Transfer on Death Act

NOTICE TO TRANSFEROR:

- You may want to consult a lawyer before using this form.
- You should carefully read all information the end of this form.
- This form must be recorded before your death, or it will not be effective.

IDENTIFYING INFORMATION:

Transferor, being of competent mind and having the legal capacity to make this deed:

JEFFREY LYLE HULL

Legal description of the property, situated in Skamania County, Washington:

Assessor's property tax parcel or account number: 02071630030400 Property address: 1222 E. Cascade Drive, North Bonneville, WA Legal Description: Lot 2, Hull SP BkT/Pg 97

PRIMARY BENEFICIARIES:

I designate the following grantee beneficiaries if the beneficiaries survives me.

CODY LEE GARDNER LOGAN RAY GARDNER



CONTINGENT BENEFICIARY:

ALAN LYLE HULL

TRANSFER ON DEATH:

- At my death, I transfer my interest in the described property to the grantee beneficiaries as designated above.
- Before my death, I have the right to revoke this deed.
- This deed revokes all prior beneficiary designations by this owner for this interest in real estate.

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REAL ESTATE EXCISE TAX EXEMPTION:

The recording of this revocable transfer on death deed is not a "sale" as defined in RCW 82.45.010(1) and is therefore not subject to real estate excise tax. The transfer that will occur under this revocable transfer on death deed at the time of the owner's death is exempt from the Washington Real Estate Excise Tax by reason of RCW 82.45.010(3)(b) and WAC 458-61A-202(7).

Washington Real Estate Excise Tax by reason of RCW 8 and WAC 458-61A-202(7).	
SIGNATURE OF TRANSFEROR MAKING THIS I	DEED:
Construe all terms with the appropriate gender and quan the sense of this deed.	tity required by
ACKNOWLEDGMENT: STATE OF WASHINGTON COUNTY OF SKAMANIA I certify that I know or have satisfactory evidence that is the person who appeared before me, and said person that (he/she) signed this instrument and acknowledged it free and voluntary act for the uses and purposes mention instrument.	to be (his/her)
Dated: 6-1-2016. Signature Dated: 71/6-016	LESLIE L. MOORE NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES JANUARY 9, 2020
Notary Public in and for the State of Washington, residing at:	(amananananananananana
My appointment expires: <u>/-9-202</u> 0	