

When recorded return to:

Keith R. Eddy
702 Wauna Lake Club Road
Stevenson WA 98648

WASHINGTON PERSONAL PROPERTY BILL OF SALE

I, **Dr. Keith R. Eddy (seller)** in consideration of **Zero** dollars (**\$-0-**), do hereby sell, transfer and convey to **Keith Eddy Trustee of Keith Eddy revocable living trust** (buyer), the following:

Assessor's Parcel No. 32071500152100
Cabin site #21 Wauna Lake Club, Section 15, TN²; R7E Willamette Meridian Skamania County, Washington

I, the undersigned seller, do sell the above-described property to the buyer for the amount shown and certify that all of the information provided in this Bill of Sale is true and accurate to the best of my knowledge.

I, the undersigned buyer, acknowledge receipt of this Bill of Sale and understand there is no guarantee or warranty, expressed or implied with respect to the above-described property. It is also understood that the above-stated item is sold in "as is" condition.

Dated this 27th day of September, 2022

Seller Name: Dr. Keith R Eddy Buyer Name: Keith Eddy Trustee

Seller Signature: Dr Keith R Eddy Buyer Signature: _____

Notary Public

On this 27th day of September, 2022, before me, Leticia L Moore a notary public, personally appeared Dr Keith R Eddy, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity and that his signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument, I certify under Penalty of Perjury under the laws of the state of WA that the foregoing is true and correct.

SKAMANIA COUNTY
REAL ESTATE EXCISE TAX
Witness my hand and Official Seal
36344
SEP 27 2022
PAID Exempt
Keith Eddy
SKAMANIA COUNTY TREASURER

Skamania County Assessor
Date 9/27/22 Parcel# 32-7-15-1521

Dated:

K R Eddy

Keith R Eddy

STATE OF *Washington*
COUNTY OF *Stamanta*

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I certify that I know or have satisfactory evidence that *Dr Keith R Eddy*

(is/are) the person(s) who appeared before me, and said person(s) acknowledged that *he* signed this instrument, on oath stated that *he* authorized to execute the instrument and acknowledge it as the of to be the free and voluntary act of such party(ies) for the uses and purposes mentioned in this instrument.

Dated: *9/27/22*

Leslie L Moore

Notary name printed or typed: *Leslie L Moore*
Notary Public in and for the State of *Washington*
Residing at *Carson*
My appointment expires: *2/24/2024*

