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WHEN RECORDED RETURN TO:

THE YAMHILL MOONSHADOW REVOCABLE LIVING TRUST

PO BOX 257 PMB 11623

OLYMPIA, WA 98507-0257

Please print or type information **Washington State Recorder's Cover Sheet** (RCW 65.04)

DOCUMENT TITLE(S) (or transaction contained therein) (all areas applicable to your document must be filled in)

QUITCLAIM DEED

REFERENCE NUMBER(S) of Documents assigned or released:

☐ Additional numbers on page ____ of document.

GRANTOR(S):

1. SARAH KATHERINE BROWN

2. ADI ELLIOTT

3. _____

4. _____

☐ Additional names on page ____ of document.

GRANTEE(S):

SARAH BROWN, TRUSTEE, OR THIER SUCCESSORS IN INTEREST OF THE YAMHILL
MOONSHADOW REVOCABLE LIVING TRUST DATED OCTOBER 4, 2025,

1. AND ANY AMENDMENTS THERETO

2. _____

3. _____

4. _____

☐ Additional names on page ____ of document.

LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter):

LTS 2 AND 3 OF REMI SHORT PLAT, SKAMANIA COUNTY

Skamania County

Real Estate Excise Tax

380.31

NOV 13 2025

☐ Complete legal on page 1 of document.

Assessor's Property Tax Parcel #

03073634580000

PAID

Exempt

Skamania County Treasurer

☐ Additional parcel numbers on page ____ of document.

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information.

"I am signing below and paying an additional \$50.00 recording fee (as provided in RCW 36.18.010 and referred to as an emergency nonstandard document), because this document does not meet margin and formatting requirements. Furthermore, I herby understand that the recording process may cover up or otherwise obscure some part of the text of the original document as a result of this request."

Signature of Requesting Party

Note to Submitter: Do NOT sign above nor pay additional \$50 fee if the document meets margin/formatting requirements.

When recorded return to:

THE YAMHILL MOONSHADOW
REVOCABLE LIVING TRUST
PO BOX 257 PMB 11623
OLYMPIA, WA 98507-0257

QUITCLAIM DEED

Grantors: SARAH KATHERINE BROWN AND ADI ELLIOTT
Grantee: SARAH BROWN, TRUSTEE, OR THEIR SUCCESSORS IN INTEREST OF THE
YAMHILL MOONSHADOW REVOCABLE LIVING TRUST DATED OCTOBER 4, 2025,
AND ANY AMENDMENTS THERETO
Abbreviated Legal: LTS 2 AND 3 OF REMI SHORT PLAT, SKAMANIA COUNTY
Assessor's Tax Parcel Number: 03073634580000

The Grantors, SARAH KATHERINE BROWN AND ADI ELLIOTT for and in consideration of mere change in identity, conveys and quits claims to SARAH BROWN, TRUSTEE, OR THEIR SUCCESSORS IN INTEREST OF THE YAMHILL MOONSHADOW REVOCABLE LIVING TRUST DATED OCTOBER 4, 2025, AND ANY AMENDMENTS THERETO, Grantee, the following described real estate, situated in the County of Skamania, State of Washington, together with all after acquired title of the Grantors herein:

Legal description: Real property in the County of Skamania, State of Washington, described as follows:

A TRACT OF LAND IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON,
DESCRIBED AS FOLLOWS:

LOT 2 AND 3 OF REMI SHORT PLAT, RECORDED IN AUDITOR FILE NUMBER
2020001197, SKAMANIA COUNTY RECORDS, HEREINAFTER IRREVOCABLY BOUND
AS ONE LEGAL PARCEL OF RECORD.

Commonly known as: 43 Northwest Lasher Street, Stevenson, WA 98648

Skamania County Assessor *om*

Date 11/13/25 Parcel# 03073634580000

Dated: 10-15-25

Sarah Brown
SARAH KATHERINE BROWN

STATE OF Illinois
COUNTY OF COOK

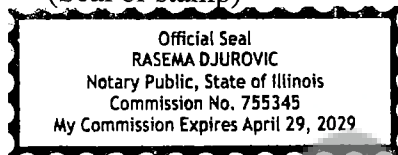
SS.

I certify that I know or have satisfactory evidence that SARAH KATHERINE BROWN is the individual who appeared before me, and said individual acknowledged that she signed this instrument (Quitclaim deed) and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: 10/15/2025

Rasema Djurovic

(Seal or stamp)

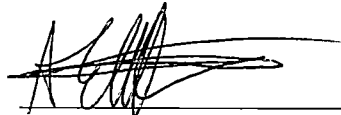


Notary name printed: Rasema Djurovic
Notary Public in and for the State of Illinois

Residing at: Skokie IL

My appointment expires: 04-29-2029

Dated: 10/15/25


ADI ELLIOTT

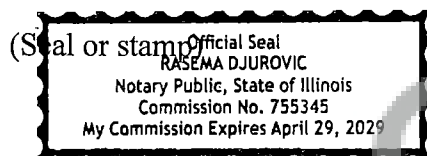
STATE OF Illinois

COUNTY OF COOK

SS.

I certify that I know or have satisfactory evidence that ADI ELLIOTT is the individual who appeared before me, and said individual acknowledged that he signed this instrument (Quitclaim deed) and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: 10/15/2025





Notary name printed: RASEMA DJUROVIC

Notary Public in and for the State of Illinois

Residing at: SKOKIE IL

My appointment expires: 04.29.2029