Skamania County, WA
Total:$107.50
DEED
Pgs=5
Request of: COLUMBIA GORGE TITLE

2020-000335
02/10/2020 03:06 PM

00002642202000003350050053

When recorded return to:

Cathy Weber
~~446 NW Chesser Road~~ PO Box 678
~~Stevenson, WA 98648~~ Carson WA
98610

SKAMANIA COUNTY
REAL ESTATE EXCISE TAX
34346
FEB 10 2020
PAID 2,691.50
SKAMANIA COUNTY TREASURER

Filed for Record at Request of
Columbia Gorge Title
Escrow Number: S20-0038TB

Statutory Warranty Deed

THE GRANTOR Joelle M. McGonagle, Justine M. McGonagle and Francesca R. Kennedy, Co-Trustees of the Joelle M. McGonagle Trust dated July 12, 2017 for and in consideration of **TEN DOLLARS AND OTHER GOOD AND VALUABLE CONSIDERATION** in hand paid, conveys and warrants to **THE GRANTEE** Cathy Weber, an unmarried person the following described real estate, situated in the County of Skamania, State of Washington.

A tract of land in the Southeast Quarter of the Northeast Quarter of Section 29, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:

Lot 2 of the BURKE Short Plat, recorded in Book 3 of Short Plats, Page 280, Skamania County Records.

SUBJECT TO SPECIAL EXCEPTIONS 7-14 OF THE PRELIMINARY TITLE REPORT DATED **January 23, 2020** FILE NUMBER **S20-0038KM.** A COPY OF WHICH WAS PROVIDED TO THE GRANTOR AND GRANTEE HEREIN NAMED.

Skamania County Assessor

Tax Parcel Number(s): **03-08-29-4-1-0902-00**

Date 2-10-20 Parcel# 03082941090200
JM

SIGNATURES ON PAGE 2 AND 3

Dated Feb 3 2020

The Joelle M McGonagle Trust dated July 12, 2017

Francesca Kennedy
By: Francesca R Kennedy, Co-Trustee

LE
By: Justine M McGonagle, Co-Trustee

JOELLE McGONAGLE
By: Joelle M McGonagle, Co-Trustee

STATE OF _____ }
COUNTY OF _____ } SS:

I certify that I know or have satisfactory evidence that Francesca R Kennedy AND Joelle M McGonagle is/are the person(s) who appeared before me, and said person(s) acknowledge that They signed this instrument, on oath stated They is/are authorized to execute the instrument and acknowledge that as the Co-Trustee of The Joelle M McGonagle Trust dated July 12, 2017 to be the free and voluntary act of such party(ies) for the uses and purposes mentioned in this instrument.

Dated: _____

_____
Notary Public in and for the State of _____
Residing at _____
My appointment expires: _____

see attached

Dated 2/5/20

The Joelle M McGonagle Trust dated July 12, 2017

By: Francesca R Kennedy, Co-Trustee

By: Justine M McGonagle, Co-Trustee

By: Joelle M McGonagle, Co-Trustee

STATE OF _____ }
COUNTY OF _____ } SS:

I certify that I know or have satisfactory evidence that Justine M McGonagle is/are the person(s) who appeared before me, and said person(s) acknowledge that she signed this instrument, on oath stated she is/are authorized to execute the instrument and acknowledge that as the Co-Trustee of The Joelle M McGonagle Trust dated July 12, 2017 to be the free and voluntary act of such party(ies) for the uses and purposes mentioned in this instrument.

Dated: _____

Notary Public in and for the State of _____
Residing at _____
My appointment expires: _____

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)

County of Riverside)

On Feb 3, 2020 before me, B Sepulveda, notary public,
(here insert name and title of the officer)

personally appeared Francesca R. Kennedy and Joelle M. McGonagle,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

B SEPULVEDA
Notary Public - California
Riverside County
Commission # 2311031
My Comm. Expires Nov 25, 2023

WITNESS my hand and official seal.

Signature B Sepulveda (Seal)

Optional Information

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of statutory warranty deed,

containing _____ pages, and dated 2/3/20.

The signer(s) capacity or authority is/are as:

- ☐ Individual(s)
- ☐ Attorney-in-Fact
- ☐ Corporate Officer(s) _____ Title(s)
- ☐ Guardian/Conservator
- ☐ Partner - Limited/General
- ☐ Trustee(s)
- ☐ Other: _____

representing: _____ Name(s) of Person(s) or Entity(ies) Signer is Representing

Additional Information

Method of Signer Identification

Proved to me on the basis of satisfactory evidence:
○ form(s) of identification ○ credible witness(es)

Notarial event is detailed in notary journal on:
Page # _____ Entry # _____

Notary contact: _____

Other

☐ Additional Signer(s) ☐ Signer(s) Thumbprint(s)

☐ _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT **CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of San Francisco)

On FEBRUARY 5, 2020 before me, Paul William Younadim, Notary Public,
Date *Here Insert Name and Title of the Officer*

personally appeared JUSTINE M. MCGONAGLE
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

PAUL WILLIAM YOUNADIM
Notary Public - California
San Francisco County
Commission # 2269085
My Comm. Expires Dec 1, 2022

Signature _____
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document
Title or Type of Document: _____
Document Date: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____	Signer's Name: _____
☐ Corporate Officer — Title(s): _____	☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General	☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator
☐ Other: _____	☐ Other: _____
Signer Is Representing: _____	Signer Is Representing: _____