

201901070122 MBALLAR 3 PGS
01/07/2019 10:34:04 AM \$101.00
AUDITOR, Pierce County, WASHINGTON



78303

QUIT CLAIM DEED

In Witness Whereof, Dorothy [REDACTED] as living Trustee for Dorothy [REDACTED] Kevin [REDACTED] and Milda [REDACTED] as Trustees for Dorothy [REDACTED] dated July 17, 2018, for and in consideration of \$1.00, conveys, as well as Quit Claims, unto Dorothy [REDACTED] Kevin [REDACTED] and Milda [REDACTED] as trustees of the Living Trust of Dorothy [REDACTED] dated April 11, 2017 (the Grantee) as the sole tenant, the following described real estate, situated in an unincorporated area in the County of Pierce, State of Washington.

Legal Description: Lake Josephine Riviera #3 Lot 42

501 730 0420

10610 Madrona Drive

Anderson Island, Washington 98303

Grantor does hereby grant, bargain and sell all of the Grantor's rights, title and interest in and to the above described property and premises to the Grantee(s) and to the Grantee(s) heirs and assigns the good right to convey the same in the manner and forms above written.


It is a part of a Living Trust.

EXCEPTING and RESERVING unto the Grantor(s) a life estate interest in the above described real estate in the terms listed below.

Grantor shall have full power to use and dispose of the entire distributable income from said real property and shall be responsible for payment of real estate taxes thereon. The life tenant shall have the right to execute leases, geophysical exploration, easement, and right of way payments paid on account of the land during his/her lifetime,

Tax Parcel number: # 501 730-042-0


Signatures and Notarized.

Dorothy 
January 4, 2019

**Auditor's notation
to facilitate
scanning process**

WASHINGTON SHORT-FORM INDIVIDUAL ACKNOWLEDGMENT [RCW 42.44.100]

State of Washington }
County of Pierce } ss.

I certify that I know or have satisfactory evidence that Dorothy 
Name of Signer

is the person who appeared before me, and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 01/09/2019
Month/Day/Year



Signature of Notarizing Officer



Place Notary Seal Above

Notary Public
Title (Such as "Notary Public")

My appointment expires
July 18, 2020
Month/Day/Year of Appointment Expiration

OPTIONAL

Although the information in this section is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Quit Claim Deed

Document Date: 1/4/19 Number of Pages: 2

Signer(s) Other Than Named Above: _____

Right Thumbprint of Signer
Top of thumb here