

PLEASE TYPE OR PRINT

REV 84 0001a (6/5/13)

CHAPTER 82.45 RCW - CHAPTER 458-61A WAC

This form is your receipt when stamped by cashier.

THIS AFFIDAVIT WILL NOT BE ACCEPTE (See	ED UNLE back of la	ESS A ast pag	LL ARE ge for inst	ructions)		
Name Kenneth G. Callahan and Dolores Callahan			2	·		ge of ownership next to name.
				Name Kimberly A. Stone and	Lee F.	inkbonner
Mailing Address P.O. Box 122 City/State/Zip Hornbrook, CA 96044						
City/State/Zip Hornbrook, CA 96044			BUYER GRANTEE	Mailing Address P.O. Box 20		
Phone No. (including area code)			- [윤종]	City/State/Zip Pomeroy, WA		
		Tī	iet all rea	Phone No. (including area code and personal property tax parce		
Solid an property and correspondence to. Same as Buyer/Gran	ntee	٦	numb	ers – check box if personal prop	erty	List assessed value(s)
Name Kenneth G. Callahan and Dolores Callahan		. -	<u>1-052-05</u>	-008-1460		
Mailing Address P.O. Box 122	<u></u>	. -				
City/State/Zip Hornbrook, CA 96044		· -		<u></u>		
Phone No. (including area code)		<u> </u>				
Street address of property: 1047 Columbia Street						
This property is located in Pomeroy						
Check box if any of the listed parcels are being segregated from	om anothe	г раго	el, are pa	rt of a boundary line adjustment	or parcels	s being merged.
Legal description of property (if more space is needed, you	may atta	ich a s	separate	sheet to each page of the affic	lavit)	
The West 41 feet of Lot 8, Block 5, Pomeroy's Addition to	the City	of Po	meroy.			
5 Select Land Use Code(s):			7 т:	et all manage of manage (to		
11 - Household, single family units		┑╏	prio		noie and	intangible) included in selling
enter any additional codes:			,	•		
(See back of last page for instructions)						
771 d w		40				
chapters 84.36, 84.37, or 84.38 RCW (nonprofit organization, senior		7				
citizen, or disabled person, homeowner with limited income)?						
_6	YES N	10	If clain	ing an exemption, list WA	C numb	per and reason for exemption:
		⊿	WAC N	lo. (Section/Subsection) _4	58-61A-	208(3)(c)
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34 RCW?		☑	Reason	for exemption		_
Is this property receiving special valuation as historical property		_		e of Contract		
per chapter 84.26 RCW?		∠				
If any answers are yes, complete as instructed below.			Tuno	Document Declaration of t	- - Orfeiture	1
(1) NOTICE OF CONTINUANCE (FOREST LAND OR CURREN	NT USE)		_		Orioitale	
NEW OWNER(S): To continue the current designation as forest la classification as current use (open space, farm and agriculture, or tir	nd or		Date of	Document <u>9/27/13</u>	-	
you must sign on (3) below. The county assessor must then determ	ine if the			Gross Selling Price	\$	
land transferred continues to qualify and will indicate by signing be	low. If th	ne	* [ersonal Property (deduct)	\$	
land no longer qualifies or you do not wish to continue the designat classification, it will be removed and the compensating or additional	ion or I taxes w	dill	Ex	emption Claimed (deduct)	\$	
be due and payable by the seller or transferor at the time of sale. (Re	CW			Taxable Selling Price	\$	0.00
84.33.140 or RCW 84.34.108). Prior to signing (3) below, you may your local county assessor for more information.	contact					0.00
This land does does not qualify for continuance.						0.00
and does not quarry for communice.			*			
DEPUTY ASSESSOR DA	TE	-				
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERT	(Y)					
NEW OWNER(S): To continue special valuation as historic pro sign (3) below. If the new owner(s) does not wish to continue, a	ii 🐪					0.00
additional tax calculated pursuant to chapter 84.26 RCW, shall be payable by the seller or transferor at the time of sale.	oe due ar	nd		*State Technology Fee		
(3) OWNER(S) SIGNATURE			•	*Affidavit Processing Fee		
(5) OWNER(S) SIGNATURE				Total Due	\$	10.00
PRINT NAME		-		A MINIMUM OF \$10.00 IS *SEE INS	DUE IN	FEE(S) AND/OR TAX
	,	_		SEE INS	IKUUII	ONS
8 I CERTIFY INDER PENALTY OF I	PERJUR	Y TH	AT THE	FOREGOING IS TRUE AND	CORRE	CCT.
Signature of			Signatur		11-	+W · M
Grantor or Grantor's Agent / Mesentle				or Grantee's Agent	1/2/X	1 / lamelle
Name (print) G. Scott Marinella		,	Name (p	rint) G. Scott Marinella	<u>, </u>	
Date & city of signing: 907/3				ity of signing; TLF	\mathcal{O}_{\subset}	Ryson, US
Perjury: Perjury is a class C felony which is punishable by imprison a fine in an amount fixed by the court of not more than five thousand	nne it h	the st	07.00	ctional insulution for a maxim by both imprisonment and fir	um term ne (RCW	of not more than five years, or by 9A.20.020 (1C)).

COUNTY TREASURER

THIS SPACE TREASURER'S USE ONLY SEP 2 7 2013



REAL ESTATE EXCISE TAX AFFIDAVIT

R PRINT

CHAPTER 82.45 RCW -- CHAPTER 458-61A WAC

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

(See back of last page for instructions)

	☐ Check box if partial sale of property	ADC IOI)	. If multip	le owners, list	nercenteo	e of ownership nex	t to name
1	Name Estate of Jane B. Wassard		2	Name Cose	tte M. Moore		o or ownership nex	t to marile,
. &		$^ \Gamma$			ld A. Moore			
GRANTOR	Mailing Address P.O. Box 492	—	GRANTEE		TRD 5	2 1	7. 11	115110
3	Payotta ID 93554	— 🖺	:5	Mailing Address_	—,	20	Connell	HILLS
5	City/State/Zip	≖	· 등	City/State/Zip				1 <i>9934</i> 7
	Phone No. (including area code)			Phone No. (include				1186
	Send all property tax correspondence to: A Same as Buyer/Grantee	List all	real	and personal prop	perty tax parcel	account	T ist assess	ed value(s)
Van	Cosette M. Moore Carald A. Moore			ers – check box if 100280300000	personal prope	erty	List assess	co varue(s)
								
	ling Address TBD		37031	103112400000				
_	/State/Zip						Í	
ho	ne No. (including area code)						<u> </u>	
	Street address of property: 41 Elm St Pomeroy, WA 99347						<u> </u>	
	Confold			****	· · · · · · · · · · · · · · · · · · ·			
	This property is located in unincorporated Santeld		c	County OR within	ı 🔼 city of 🔃	Pomero	<u> </u>	
	Check box if any of the listed parcels are being segregated from a larger par	rcel.		•			•	
	Legal description of property (if more space is needed, you may attach a	separ	rate s	heet to each nas	e of the affid	avit) .		
	See attached legal description.				,			
							•	
. [,.		<u> </u>
<u>.</u>	Select Land Use Code(s): 11 Household, single family units		List	all personal pro	perty (tangib	ole and in	ntangible) include	ed in selling
		. 1	price	ė,				
	enter any additional codes:	١.						
	(See back of last page for instructions)	-					····	
Ta 4	YES NO	-	—					
	his property exempt from property tax per chapter Solution Solution All Property exempt from property tax per chapter Solution Solution	١ .						
		∤ -	_					
"	YES NO	If cl	laim	ing an exempt	ion, list WA	C numb	er and reason fo	r exemption:
	his property designated as forest land per chapter 84.33 RCW?							. -
ls t	his property classified as current use (open space, farm and	WA:	C N	o. (Section/Su	bsection)		 	
_	cultural, or timber) land per chapter 84.34?	Rea	son '	for exemption				
	his property receiving special valuation as historical property			-				
r	chapter 84.26 RCW?				···			
ifa	ny answers are yes, complete as instructed below.							
	NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE)	Тур	e of	Document SI	latutory Warra	inty Dee	d (SWD)	
	W OWNER(S): To continue the current designation as forest land or	Date	5	Document0	9/11/13			
	sification as current use (open space, farm and agriculture, or timber) 1, you must sign on (3) below. The county assessor must then determine	Danc	C ()1 .	Document		·		
	is just the stage of the stage	ĺ		Gross Se	elling Price	\$	85,000.00	
ftl	ne land no longer qualifies or you do not wish to continue the designation	l	*P	ersonal Proper	ty (deduct)	\$	0.00	
	lassification, it will be removed and the compensating or additional taxes		Exe	emption Claim	ed (deduct)	\$	0.00	
MII M 3	be due and payable by the seller or transferor at the time of sale. (RCW 13.140 or RCW 84.34.108). Prior to signing (3) below, you may contact			-	elling Price		85,000.00	
/OU	r local county assessor for more information.	ĺ			Tax : State			
	s land does X does not qualify for continuance.			Excise		• \$	-10-00	
	stanti Cocs Mossinor quanty for continuance.	1	-1	D. 12		-	0.00	
	DEPUTY ASSESSOR DATE	1	,*1	Delinquent Inte				
		l				\$	0.00	
JEV	(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) W OWNER(S): To continue special valuation as historic property,			*Delinque	ent Penalty			
igu	(3) below. If the new owner(s) does not wish to continue, all				Subtotal	s _	1,300.50	
ddi	itional tax calculated pursuant to chapter 84.26 RCW, shall be due payable by the seller or transferor at the time of sale.			*State Tech	nology Fee	\$	5.00	5.00
***	• • •		•	Affidavit Proc	= -		0.00	
	(3) OWNER(S) SIGNATURE				Total Due		1,305.50	CK
				-		Ψ		
	PRINT NAME	į		A MINIMUM	OF \$10.00 IS	DUE IN	FEE(S) AND/O	R TAX
					*SEE INS			
	I CERTIFY UNDER PENALTY OF PERJUBY T	HAT'	THE	POPECOING	C TOUR AND	COPPI	PCT \	
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ig	nature of unter or Grantor's Agent Sull Manual Representative		ature		///	,0	The Yh.	11/1
		GTRI	atee	-		and the		MIN OT
	ne (print) Estate of Jane B. Wassard	Nam	ле (рі	rișt)	Cosette M. Mo	oore		
)at	e & city of signing: * 9/04 Payette Id	Date	& c	ity of signing: _	9/23/2	015-	(lasksta	n.W.
					-/-/- -			
	tury: Perjury is a class C felony which is punishable by imprisonment in the							
	e in an amount fixed by the court of not more than five thousand dollars (\$5					me (KCV	v ya.zu.uzu (IC)	<u> </u>
3 V 8	84 0001a (02/13/07) THIS SPACE TREA	FLIR	LER'	2 nee obe	7			
		<u></u>	7	<u> </u>				
						COUN	NTY TREASL	IRER
	나 SF	P 3	0 7	2013	,			2428
	-	_						6 T 4 O

KAREN ROOSEVELT

SCHEDULE C

The land referred to herein is situated in the State of Washington, County of Garfield and described as follows:

Lots 1 and 2 in Block 1 of Highland Addition to the City of Pomeroy, and Tax No. 31, Section 31, Township 12 North, Range 42 E.W.M. (sometimes referred to as Lot A in said Block 1, said Addition), more particularly described as follows: Beginning at the Southeast corner of said Lot 1, Block 1 of Highland Addition; thence South 30 feet; thence West 120 feet; thence North 30 feet; thence East 120 feet to place of beginning. Together with all of vacated Maple Street lying West of the above described property.

FILED
THIRD JUDICIAL DISTRICT COURT
PAYETTE COUNTY, IDAHO

MAY 1 7 2013

BETTY JORBSSEN, CLERK

BERT L. OSBORN BERT L. OSBORN, CHTD. Attorney at Law P.O. Box 158 Payette, Idaho 83661

Telephone: (208) 642-4458 Facsimile: (208) 642-4981

ISB #1739

IN THE DISTRICT COURT OF THE THIRD JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR PAYETTE COUNTY

MAGISTRATE DIVISION

In the Matter of the Estate) Case No. CV-2013-464
of)
JANE B. WASSARD, (dob 05/01/1920)) LETTERS TESTAMENTARY))
Deceased.	;)

The Will of JANE B. WASSARD, deceased, having been admitted to informal probate, JACK B. WASSARD is hereby appointed Personal Representative of the estate.

WITNESS: Magistrate of the District Court, County of Payette, State of Idaho, with the seal of the Court affixed this day of May, 2013.

A. LYNNE KROGH
Magistrate

LETTERS TESTAMENTARY sko 10113 letters

-1-

ACCEPTANCE OF APPOINTMENT

STATE OF IDAHO) : ss.
County of Payette)

I, JACK B. WASSARD, hereby accept the duties of Personal Representative of the Estate of Jane B. Wassard, deceased, and I do solemnly swear that I will perform according to law, the duties of Personal Representative of the estate of JANE B. WASSARD, deceased.

JACK B. WASSARD

SUBSCRIBED AND SWORN to before me this // day of May, 2013.



Notary Public for Idaho Residing in: Ontario, Oregon Comm. Expires: 1/13/2015

State of Idaho
County of Payette ss

I hereby certify that the foregoing instrument is a true and correct copy of the original on file in this office.

Dated 5-21-13 BETTY J. DRESSEN

Clerk of the District Court and Ex-Officio Auditorand Recorder

Ex-Officio Auditor and Recorder

By Deputy

Deputy

LETTERS TESTAMENTARY sko 10113 letters

-2-

STATE OF IDAHO CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
State of Idaho

CERTIFICATE OF DEATH

DEN!	*1.DECEDENT'S LEGAL NAME (I		EURED, 44 (PRIMA PACIE EVICENCE OF THER (C Bt., Migigli), Lamet, Skuffix)		2 SEX	BOCIAL SECURITY NUMBER	=
MENT O		R 1 YEAR 4C, UNDER	1 DAY 5. DATE OF BIRTH (M	lo/Dáy/Yri)	36 L FOREST TERMS	and State, Territory, or Foreign Country)	
, 6	74. RESIDENCE - STATE OR FOR		05/01/1920 COUNTY	170.00	PORTLAND, O	REGON	-
15 De	IDAHO	Annual Control of the	PAYETTE		AYETTE		· · ·
Ē	74. STREET AND NUMBER 1481 7TH AVENUE NO	RTH		7a. Al	PT. NO. 77. ZIP 000	E 7g. INSIDE CITY	
8.	MARITAL STATUS AT TIME OF	**********		9 SURYDA	83661 (3 SPOUSE'S NAME (Myes ∏ No	-
į	Married Married, but separ			(nown	A TOTAL OF THE STATE OF THE STA		
3	ARMED	NAME (Fine, Middle, Le I. H. GOULD	est, Suffic)	S. Service		AGE (State, Territory, or Foreign Country)	ř
	The state of the s	B WAIDEN HAME (FIRE	Middle, Last, Syffix)	10. 10. 10. 10. 10. 10. 10. 10. 10. 10.	ALABA 125; BIRTHPL	AGE/State, Territory, or Foreign Country)	_
		RUTH MCLYNN		1	OREGO	ON CONTRACTOR	1
	13a. INFORMANT'S NAME (Type o COSETTE MOORE	r print)	DAUGHTER			d Number, City, State, Zip Code) AD POMEROY, WA 88347	-
	14C METHOD OF DISPOSITION ☐ Cremation	cremetory, of				ADDRESS OF FUNERAL FACILITY	
	Donation	MI POMERO HIGHWAY	Y CITY CEMETERY 112		RICHARDSON-BI 750 COLUMBIA S	ROWN FUNERAL HOME	
í	*174 SIGNATURE OF FUNERAL S		Y, WASHINGTON 98347		POMEROY, WAS		
	> ELECTRONICALLY FIL		Annual Control of the Con-	M0771	MOENTA COMME	DUE TO GAUSE OF DEATH?	
	* 19a. IF DEATH OCCURRED IN A	HOSPITAL: * 195. IF D	PLACE OF D	EATH (18-22) IE OTHER THAN A HOS	PITAL:		-
-	1☐ Inpetient 2 ☐ ER/Outpetient 20.FACILITY NAME (If ma facility	3 ☐DOA ☐ ☐H680	ice feality 5 🔀 Nursing home/Lo	ng term cere facility 6	Decedent's home	7 Other (Specify)	Ť
	COTTAGES OF PAYE	erak arawa kasar	Yes I have all	VIN, OR LOCATION OF I	DEATH, AND ZIP COD	E *22. COUNTY OF DEATH	
į	* 23. DATE OF DEATH (MO/DAY/Y)	17 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		S. DATE PRONOUNCE	DEAD (Ne/Day/Y/) (S	Address Comment of the Comment of th	D.
Į	April 18, 2013	14 2004 11,00040	11:48	ApdF18, 2013	And the second	11:48 (246	a)
	resuling in destri) Sequentially list conditions b if any, leading to the cause stated on line s. Enter the UNDERLYING CAUSE LAST (deepse of injury that initiated the avenue.	DUE TO (or a	ARUERS s a consequence of s a consequence of s a consequence of s a consequence of			1YEAR	
•	resulting in deeth)		Ex .			**************************************	
i	PART H. Enter <u>giber elgrifficent oon</u> 29. DID TOBAÇCO USE			ring causis gives in Rad I	PERFORM	THE GAUSE OF BEATH?	
ľ	CONTRIBUTE TO DEATH?	30. IF FEMALE (Aged	in past year Not pregnant, b	ut pregnent 43 days	31, MANRIER O		
	Yes Probably	☐ Pregnant et time	of death	gnent within the past	Natural Accident	Florifolds Pending investigation	
Ĺ	☑ No Unknown	within 42 days o	of death year	INJURY (Decedent's ho	☐ Sulcide	Could not be determined	
	(Spell-month)			restaurant, forest, etc.)			
-	36. LOCATION OF INJURY:	State \	Chy	/ Town or County	10 10 MT 4 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ŽIp Code	-
į	Street and Number or Locati	***************************************	7,4,0,0	The second secon		Apartment Number	
100	37. DESCRIBE HOW INJURY OCCU	IRRED. IF TRANSPORT EDENT OCCUPIED, If a	TATION INJURY, STATE THE TY applicable	PES(S) OF VEHICLE(S	INVOLVED (Automobil	e, pickup, motorcycle, ATV, bicycle, etc.)	-
1	THANSPORTATION SO. WAS I	ECEDENY: FI Daily	Operator Pensanos 1266	WHAT SAFETY DEVI	CES(S) DID DECEDEN	TUSE/EMPLOY?	E LINGED DEAD (24th) 3 SY FINDINGS SY FIND
	INJURY ONLY Pedeate	en 🗋 Other (Speci	M3	Contract Contract	M. 2000	(Arrhag DiName Dinknown	
•••	36a, CERTIFIER (Check only one, b ☑ PHYSICIAN [sed on official capacity (PHYSICIAN ASSISTA	The second secon	ED PRACTICE PROFE	SMONAL MURSE	396 LICENSE NUMBER	Š
ſ	To the best of my knowledge, de CORONER					Q-00372	
ľ		or investigation, in my o	pinion, death occurred at the time	, date, and place, and du	e to the cause(s)	394, DATE SIGNED 4 / 23 / 2013	1
	Signature and Title of Certifier			444		MM DD YYYY	
7	2.118 111 81 1	107 NW 11TH ST	FRUITLAND, ID 83619	A A A A A A A A A A A A A A A A A A A			
:	MA: REGISTRAR'S SIGNATURE	. // //	mas Gull	ti,	The second secon	40b. DATE BIGNED 4 / 23 / 2013	
		<u> </u>	<u> </u>	- 1 mg -	tana tana t	MM DO YYYY	ា

is is a true and correct reproduction of the document officially registered and placed file with the IDAHO BUREAU OF VITAL BECORDS AND HEALTH STATISTICS.

JAMES B. AYDELOTTE STATE REGISTRAR





R PRINT CHAPTER 82.45 RCW – CHAPTER 458-61A WAC when stamped by cashier.

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

(See back of last page for instructions)

Check box if partial sale of property	Ouck of ta	at page 101	11130	If multiple owners, list percentage of ownership next to name.
Name LAVERNA ZIESKE			2	Name LAVERNA ZIESKE, ROBBIN LYNN NEHLS, and CORY DEAN
~ \ =			.,	ZIESKE, Trustees of the LAVERNA ZIESKE LIVING TRUST dated
Mailing Address Post Office Box 1432		딾	TEF	Mailing Address Post Office Box 1432 SEP 1 7 2013
Mailing Address Post Office Box 1432 City/State/Zip Prosser, Washington 99350			GRANTEE	City/State/Zip Prosser, Washington 99350
Phone No. (including area code) (509) 832-0608			Ū	Phone No. (including area code) (509) 832-0608
3 Send all property tax correspondence to: Same as Buyer/Gra		List all	real	1 and personal property tay percel account
oute an property and correspondence to. Enduring as Buyenon		nı		pers – check box if personal property List assessed value(s)
Name		1	420	0111013
Mailing Address		1		
City/State/Zip		1		
Phone No. (including area code)				
1 Street address of property: 204 Kessler Mill Road, Pomar	oy, Washi	ington		
This property is located in Garfield				
Check box if any of the listed parcels are being segregated f	rom anothe	r parcel, ar	ера	art of a boundary line adjustment or parcels being merged
Legal description of property (if more space is needed, yo				
The NW ¼ of the NE ¼ of Section 11, Township 6 North				
utilities; the East 30 feet of the SW ¼ of the NE ¼ of Sec Select Land Use Code(s):				et all personal property (tangible and intangible) included in selling
11 - Household, single family units			prio	
enter any additional codes:	····	_ .		
(See back of last page for instructions)	YES 1	NO ON		
Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)?		☑		
6	YES N	40 It o		
Is this property designated as forest land per chapter 84.33 RCW?		7 11 €	ıaın	ming an exemption, list WAC number and reason for exemption:
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34?		☑ WA		No. (Section/Subsection) 458-61A-210
Is this property receiving special valuation as historical property per chapter 84.26 RCW?		☑ Rea	son nsfe	n for exemptioner to Irrevocable Trust
If any answers are yes, complete as instructed below.				
(1) NOTICE OF CONTINUANCE (FOREST LAND OR CURI	RENT USF	$_{\rm E)}\mid_{\rm Typ}$	e o	of Document Warranty Deed
NEW OWNER(S): To continue the current designation as fores	t land or			f Document SEP 1 7 2013
classification as current use (open space, farm and agriculture, o land, you must sign on (3) below. The county assessor must the			e oi	
if the land transferred continues to qualify and will indicate by si	igning belo	ow.		Gross Selling Price \$
If the land no longer qualifies or you do not wish to continue the or classification, it will be removed and the compensating or add			*]	Personal Property (deduct) \$
will be due and payable by the seller or transferor at the time of			Ex	xemption Claimed (deduct) \$
84.33.140 or RCW 84.34.108). Prior to signing (3) below, you n				Taxable Selling Price \$ 0.00
your local county assessor for more information.				Excise Tax : State \$0.00
This tand does to des no qualify for continuance.	1-1			0.0025 Local \$0.00
James 10	134	[3]	*	*Delinquent Interest: State \$
O NOTICE OF COMPLIANCE GUETOPIC PROPERTY	DATE DTV			Local \$
(2) NOTICE OF COMPLIANCE (HISTORIC PROPE NEW OWNER(S): To continue special valuation as historic	property.			*Delinquent Penalty \$
sign (3) below. If the new owner(s) does not wish to continuadditional tax calculated pursuant to chapter 84.26 RCW, sha	e, all			Subtotal \$ 0.00
and payable by the seller or transferor at the time of sale.	iii be uue			*State Technology Fee \$ 5.00
(3) OWNER(S) SIGNATURE				*Affidavit Processing Fee \$
onfile				Total Due \$
PRINT NAME				A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX *SEE INSTRUCTIONS
8 I CERTIFY UNDER PENALTY O	F PERJU	RY THAT	TH	IE FOREGOING IS TRUE AND CORRECT.
Signature of	• .			
Grantor or Grantor's Agent Jallina Ju	ulae	_ Gra	nte	ee or Grantee's Agent Jalluna Zierko
Name (print) LAVERNA ZIESKE		_ Nan	ne ((print) LAVERNA ZIESKE, Trustee
Date & city of signing: Kennewick, WA SEP 1	7 2013			city of signing: Kennewick, WA SEP 1 7 2013
				• 0 0
Perjury: Perjury is a class C felony which is punishable by impr	isonment	in the state	Ç01	rrectional institution for a maximum term of not more than five years, or by

a fine in an amount fixed by the court of not more than five thousand do sonment and fine (RCW 9A.20.020 (1C)).

REV 84 0001ae (2/22/10)

THIS SPACE OCT 03 2013

COUNTY TREASURER



REAL ESTATE EXCISE TAX AFFIDAVIT

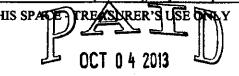
R PRINT

CHAPTER 82.45 RCW - CHAPTER 458-61A WAC

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

This form is your receipt when stamped by cashier.

Name Tim Bemis	ck of last p		If multiple owners Shenandoah		e of ownership next t	o name.
Oh atta Danada			Name Nettie A. Sev	ers	V-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	<u> </u>
S		— [월 월]			1 - 1 - 1 - V	_1
Maiting Address 12227 E. Tallman Rd. Chattaroy WA 99003		BUYER GRANTEE			cannon R	
City/State/Zip		- [플립		Pomerc	Unit -	<u>19347</u>
Phone No. (including area code)	<u> </u>		Phone No. (including area		<u>°843 50</u>	16
Send all property tax correspondence to: \(\bigsize \) Same as Buyer/Grante	:e		l and personal property tax poers – check box if personal		List assesse	d value(s)
Shenandoah J. Severs Nettie A. Severs		20124	1202130100000			
iling Address 1203 Turannon To		20124	1202130300000			
y/state/zip Pometoy, WA 99347						
one No. (including area code) 509 843 5016					<u> </u>	
Street address of property: 463 Gould City Mayview Rd.	- Pomero	, WA 99:	347			<u>`</u>
This property is located in 🗓 unincorporated Garfield			County OR within City	of Uninco	rp	
Check box if any of the listed parcels are being segregated from	n a larger n		County OR William Lifetty	<u> </u>		
Legal description of property (if more space is needed, you m			shoot to such many of the	- CC: 4:4)		
The land referred to herein is situated in the State of Washi 42 E.W.M. That part of the West half of the Southwest qua of Section 21 lying westerly of the county road.						
Select Land Use Code(s): 11 Household, single family units			it all personal property (tangible and i	ntangible) included	l in selling
enter any additional codes:						
(See back of last page for instructions)		_				
•	ES NO	·				
this property exempt from property tax per chapter 36 RCW (nonprofit organization)?					· · · · · · · · · · · · · · · · · · ·	
	ES NO	1				
<u> </u>		If clair	ming an exemption, list	t WAC numb	ber and reason for	exemption
		WAC	No. (Section/Subsection	n)		
ricultural, or timber) land per chapter 84.34?		Pesco	n for exemption			
this property receiving special valuation as historical property		Reason	i for exemption			
r chapter 84.26 RCW?						
any answers are yes, complete as instructed below.			0 4-4-4	IM	-1 (0)4(5)	
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EW OWNER(S): To continue the current designation as forest la assification as current use (open space, farm and agriculture, or tin		Date o	f Document10/01/13			
nd, you must sign on (3) below. The county assessor must then of	determine		Gross Selling I		170,000.00	
the land transferred continues to qualify and will indicate by sign the land no longer qualifies or you do not wish to continue the de	ing below.		•		0.00	
the tand no longer quarties or you do not wish to continue the oc classification, it will be removed and the compensating or addition			Personal Property (ded		0.00	
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.33.140 or RCW 84.34.108). Prior to signing (3) below, you may	y contact		Taxable Selling F			
nur local county assessor for more information.			Excise Tax : S			
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• •		1	*Affidavit Processing	Fcc \$		
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COUNTY TREASURER



This form is your receipt when stamped by cashier.

R PRINT CHAPTER 82.45 RCW – CHAPTER 458-61A WAC
THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

□ Check box if partial sale of property Name Brian S. Bartels					f ownership next to	
		2	Name Brian S. Bartels & K	ristin L. B	artels	
Kristin L. Bartels			Richard Bartels & M	lary Barte	ls	
Mailing Address 14 Pheasant Ridge Road		BUYER GRANTEE	Mailing Address 14 Pheasant F	Ridge Roa	d	
City/State/Zip Pomeroy WA 99347		— [<u>\$</u> 3]	City/State/Zip Pomeroy WA	99347		
Phone No. (including area code)		_ ⁻ 5	Phone No. (including area code)	******		
		List all res	and personal property tax parcel a	ccount		
Send all property tax correspondence to: Same as Buyer/Gri Brian S. Bartels & Kristin L. Bartels Richard	antec	numk	ers - check box if personal propert	у	List assessed	``
ne		10700	0600120400000		7,19	8.00
ling Address 14 Pheasant Ridge Road Pomeroy WA 99347						
// State/21p						
ne No. (including area code)					 	
Street address of property: 14 Pheasant Ridge Road,	, Pomeroy, W	VA 99347			<u> </u>	· . ,
This property is located in 🛮 unincorporated Garfiel	d		County OR within 🔲 city of	Unincorp	·	
☐ Check box if any of the listed parcels are being segregated t	from a larger r					
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	YES NO	· —				
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JO INC III (INCIDITUTE OF BRIDESSION).			,		***************************************	
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KAREN ROOSEVELT GARFIELD COUNTY TREASURER

SCHEDULE C

The land referred to herein is situated in the State of Washington, County of Garfield and described as follows:

In Township 11 North, Range 42 E.W.M.

That part of the Northeast quarter of the Northwest quarter of Section 6, more particularly described as follows:

Commencing at the Northeast corner of said Section 6; thence South 75°14'56" West 3396.14 feet to the True Place of Beginning; thence South 57°41'26" East 384.95 feet; thence South 33°19'14" West 220.00 feet; thence North 57°44'00" West 431.32 feet; thence North 45°09'30" East 225.95 feet to the place of beginning.

TOGETHER WITH BUT SUBJECT TO the rights of others an easement for ingress and egress, herein named Pheasant Ridge Road, lying 24 feet on each side of the following described centerline:

Commencing at the Northwest corner of the above described tract; thence North 19°46′ East 25.38 feet to the True Place of Beginning, said point being a point on a curve; thence deflect left and continue around a curve to the right with a radius of 150.00 feet for a distance of 48.46 feet; thence South 59°01′43″West 98.87 feet to a point of curve; thence around a curve to the left with .a radius of 300.00 feet for a distance of 192.89 feet; thence South 22°11′20″ West 20.52 feet to a point of curve; thence around a curve to the right with a radius of 45.00 feet for a distance of 50.54 feet; thence South 86°32′28″ West 16.1 feet, more or less to the centerline of Dutch Flat Road.

TOGETHER WITH an easement for ingress, egress and utilities lying over and across that part of the Northeast quarter of the Northwest quarter of said Section 6, more particularly described as follows:

Commencing at the Northeast corner of said Section 6; thence South 75°14'56"West 3396.14 feet to the True Place of Beginning; thence South 57°41'26" East 35.00 feet; thence North 18°57'41" West 54.61 feet; thence South 19°46' West 35.00 feet to the place of beginning.



REAL ESTATE EXCISE TAX AFFIDAVIT

REPRINT

CHAPTER 82.45 RCW — CHAPTER 458-61A WAC

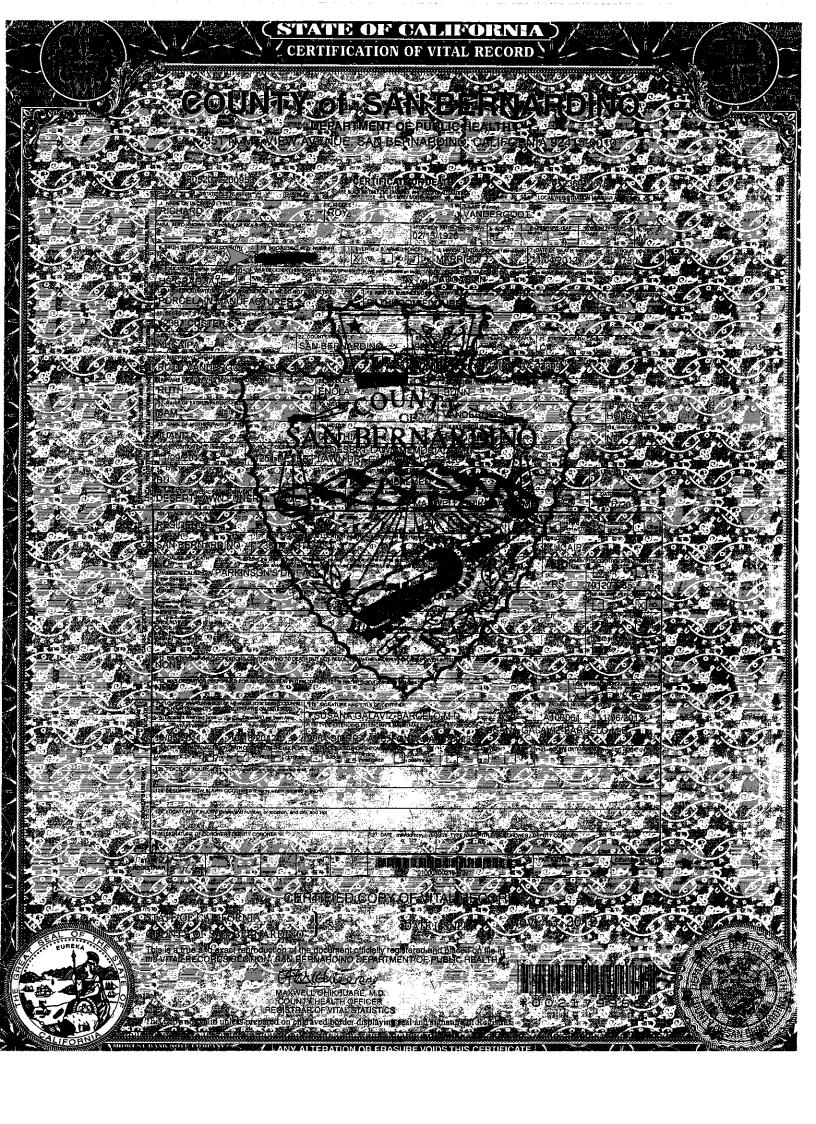
THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPL

(See Application)

Check box if pertial sale of property.	back of last	r belle	307 ID	If multiple owners, list percent		of ownership next to name.	,
Name Ruth E. Vandergoot, Co-Trustee			:	Name Ronald D. Vandergoot		· · · · · · · · · · · · · · · · · · ·	4
Date Norman Vandergoot, Co-Trustee			و ہے	Debra L. Vandergoot	<u> </u>		-
Mailing Address 31955 Highview Drive City/State/Zip Rediands CA 92373			BUYER	Mailing Address 31955 Highview Dr Redlands CA 9237	176		4
City/State/Zip Rediands CA 92373			E	City/State/Zip	<u> </u>		_
Phone No. (including area code)	;		<u></u>	Phone No. (including area code)	_		
Send all property tax correspondence to: 🔼 Same as Buyer/Ör	nnice	Liet		al and personal property tax parcel accou bers – check box if personal property	unet	List assessed value(s)	
Name Ronald D. Vandergoot Debra L. Vandergoot		1_		4203440200000 <u>r</u>	5 l	19030	_
Meiling Address 31955 Highview Drive		I_			ا د	, , ,	.
City/State/Zip Reclience CA 92373				<u>.</u>	ا د		.
Phone No. (including area code)		_			د		-
Street address of property: Land Only		•				<u>,, </u>	_
This property is located in 🗵 unincorporated Garfiel	đ			County OR within City of Unin	COL	p	_
Check box if any of the listed percels are being segregated f	rom a larner	parcel	l.				
Legal description of property (If more space is needed, yo The land referred to herein is situated in the State of Wi 42 E.W.M. The Southwest quarter of the Northwest quarter of the Northwest quarter of the Northwest quarter of existing roads for ingress, egress and utilities.	schington, Cuarter of the	County Sout	of C	arfield and described as follows: In quarter of Section 34. TOGETHER			
Select Land Use Code(a): 91 Undeveloped land (land only)			_	st all personal property (tangible an	d iț	ntangible) included in selling	
enter any additional codes:		_	_			·	-
(See back of last page for instructions)	YES N	<u>.</u>	_				•
Is this property exempt from property tax per chapter		20	_	· · · · · · · · · · · · · · · · · · ·	_	,	-
84.36 RCW (nonprofit organization)?			_		_		•
	YES N	╗.	e ala	imine an enametion, list WAC au-			•
is this property designated as forest land per chapter 84.33 RCW?		m (."		iming an exemption, list WAC nu			
is this property classified as current use (open space, firm and	- 2	9 3	٧٨C	No. (Section/Subsection) 458-6	IA	-217(1)	
agriculturel, or timber) land per chapter 84.34?			teas	n for exemption			_
Is this property receiving special valuation as historical property per chapter 84.26 RCW?		9		Correction deed for Quit Claim D	000	I Inst. No. 5958, Excise Tex	_
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If any answers are yes, complete as instructed below. (1) NOTICE OF CONTINUANCE (FOREST LAND OR CURI	DENIT 1 10E	, I,	^u==	of Document Quit Claim Deed (QC	(O)		
NEW OWNER(S); To continue the current designation as force		L					•
classification as current use (open space, farm and agriculture, o)ate	of Document10/05/13	_	····	•
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	9/13	-		,*Delinquent Interest: State \$	-	0.00	•
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and payable by the seller or transferor at the time of sale.				*State Technology Fee \$		5.00 5.00	•
(3) OWNER(S) SIGNATURE				*Affidavit Processing Fee \$ Total Due \$		10.00	CK
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CERTIEV INDER PENALTY O	A DESTIO	V TW	AT T	HE FOREGOING IS TRUE AND CO		***************************************	-
_					- urti	-0-1/	
Signature of Grantor or Grantor's Agent Ruth E-1 (and 05	and			ure of Grantee's Agent	0	HD. Houding	001
Name (print) Ruth E. Vandergoot, Co-Trustee	1	·		(print) Ronald D. Vanderg	ool		
Date & city of signing: 10-5-13 (CAUFE)	enin			(Jacque)	7	HUFORIVA	
		_		city of signing: 70.5.75			_
Perjury: Perjury is a clase C follony which is punishable by impa a fine in an amount fixed by the court of not more than five thou	riconment in	n the st	00.0°	proctional institution for a maximum to	OTT	n of not more than five years, or by	
EV \$4 0001a (02/13/07)		2	URE	R'S USE ON CO		NTY TREASURER	_
	ULI	Ü	y	2013		•	9

KAREN ROOSEVELT GARFIELD COUNTY TREASURER

2 4 3 2 pué



VANDERGOOT TRUST

This Trust agreement is entered into by and between RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT, of San Bernardino County, California, hereinafter referred to as "Trustors," or separately referred to as "Husband" or "Wife," and RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT, of San Bernardino County, California, hereinafter referred to collectively as "Trustee."

Reference in this Trust to the "Trustee" shall be deemed a reference to the acting Trustee, whether as original trustee, alternate trustee, successor trustee, or co-trustees.

I. TRUST PROPERTY

A. Original Trust Estate

The Trustors have transferred to the Trustee, without consideration, the sum of one dollar (\$1.00), receipt of which is hereby acknowledged, which is the original corpus of the Trust Estate.

B. Additions to Trust Estate

Additional property may be added to the Trust Estate at any time by the Trustors, or either of them, or by any person or persons, by inter vivos or testamentary transfer. All such original and additional property is referred to herein collectively as the Trust Estate, and shall be held, managed and distributed as herein provided.

ł

In witness hereof, the provisions of this Trust agreement shall bind RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT, as Trustors, and RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT, as Trustees, and any Successor Trustees, assuming the role of Trustee hereunder, and the beneficiaries of any Trust created hereunder.

Dated at County, California, on TRUSTORS:

RICHARD R. VANDERGOOT

RUTH E. VANDERGOOT

TRUSTEES:

State of ON YESPATA	en in	
State of <u>CALIFORNIA</u> County of <u>SAN BERNARDINO</u> On <u>5 13 04</u> before me, <u>SUSA</u>	N HARRETT, NOTARY PUBLIC NAME, TITLE OF OFFICER - E.S., JANE DOE, NOTARY PUBLIC	OPTIONAL SECTION CAPACITY CLAIMED BY SIGNE Though statute does not require the Notary fill in the data below, doing so may pro- invaluable to persons relying on the document INDIVIDUAL
personally appeared <u>RICHARD R</u>	S PITH E VANDERGOOT NAME(S) OF SIGNERIS)	CORPORATE OFFICER(S)
SUSAN HARREIT COMM 1007/dz Notice (Collomic State Lance (Collomic	oved 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 h/s/hydr/their authorized capacity(ies), and that by his/he/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.	PARTNER(S) LIMITED GENERAL ATTORNEY-IN-FACT TRUSTEE(S) GUARDIAN/CONSERVATOR OTHER: SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(ICS)
THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:	OPTIONAL SECTION TITLE OR TYPE OF DOCUMENT TRUST ACREEME 32	NT
Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.	NUMBER OF PAGES 32 DATE OF DOCUME SIGNER(S) OTHER THAN NAMED ABOVE	ENT 5-12-94

4/1993 NATIONAL NOTARY ASSOCIATION • 8/236 Remmet Ave., P.O. Box 7184 • Canoga Park, CA 9/1309

Certification of Trust

1. The following trust is the subject of this Certification:

RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT, Trustees of the VANDERGOOT TRUST DATED MAY 12, 1994.

2. The names and addresses of the currently acting Trustees of the trust are as follows:

Name:

RICHARD R. VANDERGOOT

Name:

RUTH E. VANDERGOOT

Address:

12387 Custer Street Yucaipa, CA 92399 Address:

12387 Custer Street Yucaipa, CA 92399

3. The trust is revocable. The persons holding the power to revoke the trust are:

RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT

- 4. The trust is currently in full force and effect.
- 5. Attached to this Certification and incorporated in it are selected provisions of the trust evidencing the following:

a. Article One

Creation of the trust and initial Trustees

b. Article Fifteen

Successor Trustees

c. Article Seventeen

Powers of the Trustees

d. Article Eighteen -

Signature pages

- 6. The Taxpayer Identification Number of this trust is RICHARD R. VANDERGOOT's Social Security Number.
- 7. Title to trust assets should be taken in the form specified in the first paragraph of this Certification.
- 8. The trust has not been revoked, modified, or amended in any manner which would cause the representations contained in this Certification of Trust to be incorrect.

CERTIFICATION OF TRUST VANDERGOOT TRUST DATED MAY 12, 1994

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Law Offices of John M. Preston, A.P.C. 800-698-6918

- The trust provisions that are not attached to this Certification are of a personal nature and set forth the distribution of trust property. They do not modify the powers of the Trustees.
- 10. The signatories of this Certification are currently the acting Trustees of the trust and declare that the foregoing statements and the attached trust provisions are true and correct, under penalty of perjury.

11. This Certification is dated yell -, 2008.

RICHARD R. VANDERGOOT, Trustee

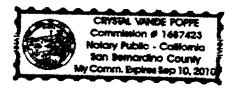
RUTH E. VANDERGOOT, Trustee

STATE OF CALIFORNIA

) ss.

COUNTY OF SAN BERNARDINO

Subscribed and sworn to (or affirmed) before me on this 2/1/2 day of RICHARD ROY VANDERGOOT, also known as RICHARD ROY VANDERGOOT, and RUTH E. VANDERGOOT, also known as RUTH ENOLA VANDERGOOT, proved to me on the basis of satisfactory evidence to be the persons who appeared before me.



Notary Signature

CERTIFICATION OF TRUST VANDERGOOT TRUST DATED MAY 12, 1994

SECOND AMENDMENT AND COMPLETE RESTATEMENT TO THE VANDERGOOT TRUST DATED MAY 12, 1994

Article One

Creation of Our Trust

Section 1. Our Trust

On May 12, 1994, we executed the VANDERGOOT TRUST. We now wish to restate that original trust, and any amendments, in their entirety. This restatement shall replace and supersede our original trust and all prior amendments.

When the term "Trustmaker" is used in our trust, it shall have the same legal meaning as "Grantor," "Settlor," "Trustor," or any other term referring to the maker of a trust.

The following shall serve as our Trustees:

RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT.

Our trust is a joint revocable living trust that contains our instructions for our own well-being and that of our loved ones. All references to "our trust" or "trust," unless otherwise stated, shall refer to this Living Trust and the trusts created in it. All references to "Trustee" shall refer to our initial Trustee or Trustees, or their successor or successors in trust.

Notwithstanding anything in our trust to the contrary, when we are serving as Trustees under our trust, either of us may act for and conduct business on behalf of our trust as a Trustee without the consent of any other Trustee. Additionally, if one of us is serving as a Trustee together with another person, either Trustee may act for

SECOND AMENDMENT AND COMPLETE RESTATEMENT TO THE VANDERGOOT TRUST DATED MAY 12, 1994

1-1

Law Offices of John M. Preston, A.P.C. 800-698-6918



and conduct business on behalf of our trust as a Trustee without the consent of any other Trustee.

Section 2. The Name of Our Trust

For convenience, our trust shall be known as the:

VANDERGOOT TRUST DATED MAY 12, 1994.

For purposes of beneficiary designations and transfers directly to our trust, our trust shall be referred to as:

RICHARD R. VANDERGOOT and RUTH E. VANDERGOOT, Trustees of the VANDERGOOT TRUST DATED MAY 12, 1994.

In addition to the above description, any description for referring to our trust shall be effective to transfer title to our trust or to designate our trust as a beneficiary so long as that format indicates that assets are to be held in a fiduciary capacity.

Section 3. No New Tax Identification Number for Our Trust

Pursuant to federal income tax law, our trust is a "grantor" trust and is not required to have a separate identification number as long as one of us is serving as a Trustee. The identification number for our trust is our own social security numbers (See IRC Regulation 1.671-3(a)(1)).

Section 4. Income Taxes Filed on Our Personal Form 1040

Pursuant to federal income tax law, we are treated as the owners of our trust for tax reporting purposes because we have retained control of the assets transferred to our trust (See IRC Sections 674-677). Also, federal income tax law specifically states that a trust income tax return should not be filed, and all income should be reported on our personal 1040 income tax return (See IRC Regulation 1.671-4).

SECOND AMENDMENT AND COMPLETE RESTATEMENT TO THE VANDERGOOT TRUST DATED MAY 12, 1994

PRV REV

Article Fifteen

The Resignation, Replacement, and

Succession of Our Trustees

Section 1. The Resignation of a Trustee

Any Trustee may resign by giving thirty days' written notice to each of us or to our respective legal representatives. If either of us is not living, the notice shall be delivered to the Trustee, if any, and to all of the beneficiaries then eligible to receive mandatory or discretionary distributions of net income from any trust created under this agreement.

If a beneficiary is a minor or is legally incapacitated, the notice shall be delivered to that beneficiary's guardian or other legal representative.

Section 2. The Removal of a Trustee

Any Trustee may be removed as follows:

a. Removal by Us

We reserve the right to remove any Trustee at any time, but only if we both agree.

b. Removal by One of Us

After one of us dies or during any period that one of us is disabled and the other Trustmaker is living and is not disabled, the surviving nondisabled Trustmaker may remove any Trustee.

c. Removal by Other Beneficiaries

After the death or incapacity of both of us, a majority of the beneficiaries then eligible to receive mandatory or discretionary distributions of net income under this agreement may remove any Trustee.

d. Notice of Removal

Neither of us, nor any of our beneficiaries, need give any Trustee being removed any reason, cause, or ground for such removal.

Notice of removal shall be effective when made in writing by either:

Personally delivering notice to the Trustee and securing a written receipt, or

Mailing notice in the United States mail to the last known address of the Trustee by certified mail, return receipt requested.

Section 3. Replacement of Trustees

Trustees shall be replaced in the following manner:

a. The Death or Disability of a Trustee While We Are Serving as Trustees

We may serve as the only Trustees or we may name any number of Trustees to serve with us. If any of these other Trustees subsequently die, resign, become legally incapacitated, or are otherwise unable or unwilling to serve as a Trustee, we may or may not fill the vacancy, as we both agree.

b. Removal of Either Trustmaker as Trustee

Upon the resignation, disability or death of either one of us while serving as Trustee, the other one of us if able and willing, will serve with DALE NORMAN VANDERGOOT as a Co-Trustee.

SECOND AMENDMENT AND COMPLETE RESTATEMENT TO THE VANDERGOOT TRUST DATED MAY 12, 1994

RRV REV If neither of us is able to serve as Trustee due to resignation, disability, and/or death, but at least one of us is still living, DALE NORMAN VANDERGOOT will serve as the sole Trustee.

Upon the resignation, disability or death of DALE NORMAN VANDERGOOT to serve as Trustee, RONALD DEAN VANDERGOOT will serve as the sole Trustee.

c. Death of Both Trustmakers

Upon the death of both Trustmakers, the then acting Trustees will be replaced with the following in the order in which their names appear:

FIRST:

DALE NORMAN VANDERGOOT

SECOND:

RONALD DEAN VANDERGOOT

d. Successor Trustees

If a successor Trustee is unwilling or unable to serve during the period in which a Trustmaker is disabled or after the death of a Trustmaker, the next following successor Trustee shall serve until the successor Trustees so named have been exhausted.

A Trustee may be listed more than once in this Section or an initial Trustee may also be named as a disability Trustee or a Trustee who will serve at death. Naming a Trustee more than once is done as a convenience only and is not to be construed as a termination of that Trustee's trusteeship.

e. Unfilled Trusteeship

In the event no named Trustees are available, a majority of the beneficiaries then eligible to receive distributions of net income under this agreement shall forthwith name a Certified Public Accountant unrelated by blood or marriage to any beneficiary under this agreement (hereafter "CPA"), Certified Financial Planner unrelated by blood or marriage to any beneficiary under this agreement (hereafter "CFP"), a private fiduciary, or

We executed this restatement on _______, 20 08.

We certify that we have read the foregoing restatement to our revocable living trust agreement, and that it correctly states the changes we desire to make in our trust. We approve this restatement to our revocable living trust in all particulars, and request our Trustee to execute it.

RICHARD R. VANDERGOOT, Trustmaker

RUTH E. VANDERGOOT Trustmaker

RICHARD R. VANDERGOOT, Trustee

RUTH E. VANDERGOON Trustee

STATE OF CALIFORNIA

COUNTY OF SAN BERNARDINO

SS.

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.

CRYSTAL WARDE POPPE Commission # 1687423 Hotory Public - Colifornia Bon Bernardino County My Comm. Expires Sep 10, 2010 Notary signature



This form is your receipt when stamped by cashier.

R PRINT

CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

when s

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

(See back of last page for instructions)

☐ Check box if partial sale of property			If multiple owners, list percenta	ge of ownership next to r	ame.			
Name Ronald D. Vandergoot		3	NameTroy Thompson					
Debra L. Vandergoot		_	Christine Thompson					
Mailing Address 31955 Highview Drive City/State/Zip Redlands CA 92373		\ <u>#</u>	Mailing Address 1506 Airway Avenue					
E City/State/Zip Redlands CA 92373		Mailing Address 1506 Airway Avenue City/State/Zip Lewiston ID 83501						
Phone No. (including area code)		_ 5	Phone No. (including area code)					
	, 1	List all re	al and personal property tax parcel accoun					
Send all property tax correspondence to: Same as Buyer/Gra Troy Thompson Christine Thompson	intee	ถนกา	bers - check box if personal property	List assessed	value(s)			
Name	İ	2010	4203440200000					
Mailing Address 1506 Airway Avenue					 			
City/State/ZipLewiston ID 83501								
Phone No. (including area code)								
Street address of property: Land Only, Pomeroy, WA								
This property is located in X unincorporated Asotin			County OR within City of Clarks	ston				
☐ Check box if any of the listed parcels are being segregated fi								
Legal description of property (if more space is needed, you The land referred to herein is situated in the State of Wa 42 E.W.M. The Southwest quarter of the Northwest qu the use of existing roads for ingress, egress and utilities	shington, Co arter of the S	ounty of G Southeast	arfield and described as follows: In aquarter of Section 34. TOGETHER	Township 10 North, Ra	inge TO			
Select Land Use Code(s): 91 Undeveloped land (land only)		_	st all personal property (tangible and ice.	intangible) included i	n selling			
enter any additional codes:		_						
(See back of last page for instructions)	YES NO	. -						
Is this property exempt from property tax per chapter		-						
84.36 RCW (nonprofit organization)?								
6	YES NO	If cla	iming an exemption, list WAC nun	aher and reason for a	vemntion			
Is this property designated as forest land per chapter 84.33 RCW?			-	•	_			
Is this property classified as current use (open space, farm and		WAC	No. (Section/Subsection)					
agricultural, or timber) land per chapter 84.34?		Reaso	on for exemption					
Is this property receiving special valuation as historical property per chapter 84.26 RCW?			·					
If any answers are yes, complete as instructed below.		 						
(1) NOTICE OF CONTINUANCE (FOREST LAND OR CURI	RENT USE)	Type	of Document Statutory Warranty D	eed (SWD)				
NEW OWNER(S): To continue the current designation as fores	t land or		of Document					
classification as current use (open space, farm and agriculture, o land, you must sign on (3) below. The county assessor must the								
if the land transferred continues to qualify and will indicate by s	igning below	<i>י</i> .	Gross Selling Price \$					
If the land no longer qualifies or you do not wish to continue the	designation	1	*Personal Property (deduct) \$					
or classification, it will be removed and the compensating or add will be due and payable by the seller or transferor at the time of	utional taxes sale. (RCW	' E	Exemption Claimed (deduct) \$					
84.33.140 or RCW 84.34.108). Prior to signing (3) below, you r			Taxable Selling Price \$					
your local county assessor for more information.			Excise Tax : State \$					
This land, \(\subseteq \does \) does not qualify for continuance.	2 (2		Local \$					
Kellua Vordennuggen 10-9 Deputy Assessor	<u>1-13</u>	-	*Delinquent Interest: State \$					
	DTV		Local \$	0.00				
(2) NOTICE OF COMPLIANCE (HISTORIC PROPE NEW OWNER(S): To continue special valuation as historic	property,		*Delinquent Penalty \$	214.20				
sign (3) below. If the new owner(s) does not wish to continu additional tax calculated pursuant to chapter 84.26 RCW, sha	e, all		Subtotal \$					
additional tax calculated pursuant to chapter 84.20 RC w, sha and payable by the seller or transferor at the time of sale.	an oc ude		*State Technology Fee \$	5.00	5.00			
(3) OWNER(S) SIGNATURE			*Affidavit Processing Fee \$	040.00				
	· <u>····</u>	_	Total Due \$	219.20	C			
PRINT NAME		_	A MINIMUM OF \$10.00 IS DUE *SEE INSTRUC		TAX			
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Signature of			iture of	N				
Grantor or Grantor's Agent			tee or Grantee's Agent /www	Krompor-				
Name (print) Ronald D. Vandergoot		Name	(print) Troy Thompson					
Date & city of signing: 10-6-3, Cav (G	10K NA		& city of signing: 10-7-13	Clarkston	WA			
Perjury: Perjury is a class C felony which is punishable by imp a fine in an amount fixed by the court of not more than five thou	risonment in	the state (\$5,000.0	correctional institution for a maximum to 0), or by both imprisonment and fine (R	erm of not more than fi CW 9A.20.020 (1C)).	ve years, or by			

REV 84 0001a (02/13/07)

OCT 0 9 2013

COUNTY TREASURER



MOBILE HOME REAL ESTATE EXCISE TAX AFFIDAVIT

Submit to County Treasurer of the county in which property is located.

This form is your receipt when stamped

Chapter 82.45 RCW
Chapter 458-61A WAC
FOR USE WHEN TRANSFERRING TITLE TO MOBILE HOME ONLY

: [PLEASE TYPE OR PRINT INCOMPLETE AFFIDAVI	ITS WILL NOT BE A				Name	+ Tolene Hinrs	iche
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OF ME	Name				OWNER	Name		
NO H					EGAL OW	Street		
LOCATION	City		State	Zip Code	LEC	City	State	Zip Code
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			THI	OCT	10	2013	MLI.	COUNTY TREASURER
REV	84 0003 (12/27/06))		- 001	, 5			9434

KAREN ROOSEVELT GARFIELD COUNTY TREASURER



is ath Cert

PLEASE TYPE OR PRINT

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

Check box il partial sale of property

Check box il partial sale of property

This form is your receipt when stamped by cashier.

Chapter 82.45 RCW - Chapter 458-61A WAC

Chapter 82.45 RCW - Chapter 458-61A WAC

Chapter 458-61A WAC

Chapter 458-61A WAC

See back of last page for instructions)

If multiple owners, list percentage of ownership next to name.

Check box if partial sale of property		2	Name David & Joiene Hinrichs	
Name <u>Sandra Hinrichs</u>		ŕ	Name David & Joieve J.	
		E W	Mailing Address PO Box 413	
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Phone No (including area code)	'	<u>L</u>		ist assessed value(s)
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State ² Ztp	1			
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Street address of property				
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This property is located in Pomeroy	t bance	el are	part of a boundary this any	
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		7	ist all personal property (tangible and intangib	le) included in selling
Select Land Use Code(s):	-¬ !			
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(See back of last page for instructions) YES	NO			
this property exempt from property tax per chapter	\square			
4 36 RCW (nonprofit organization)?		1	WAC sumber 20	d reason for exemption:
YES	NO	lf	laiming an exemption, list WAC number an	, (Cason to:)
thus conperty designated as forest land per chapter 84.33 RCW?	☑	lw.	C No. (Section/Subsection) 458-61A-201	
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encultural, or timber) land per chapter 64.541	\square	Re		
s this property receiving special valuation as insurred property	لسنا	-		
per chapter 84.26 RCW?		1-	- 1.40	<u></u>
If any answers are yes, complete as instructed below. 1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT U	JSE)	Ty	pe of Document Quit Claim Deed of Gift	
		D	ite of Document 5/8/08	
NEW OWNER(S). To continue the current use agriculture, or timber classification as current use (open space, farm and agriculture, or timber classification as current use (open space, farm and agriculture).	i) mine	-	Gross Selling Price \$	0.00
land, you must sign on (3) below. The county assessed interest signing t	below.		*Personal Property (deduct) \$	
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or classification, it will be removed and the sometime of sale. (R	CW	ļ	Taxable Selling Price \$	0.00
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your local county assessor for more information.		i	0.0025 Local \$	0.0
This land does does not qualify for continuance.			*Delinquent Interest: State \$	
		-	Local \$	
DEPUTY ASSESSOR			*Delinquent Penalty \$	
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) NEW OWNER(S): To continue special valuation as historic proper NEW OWNER(S): To continue special valuation as h			Subtotal \$	0.0
NEW OWNER(S): To continue special valuation as sign (3) below. If the new owner(s) does not wish to continue, all sign (3) below. If the new owner(s) does not wish to continue, all sign (3) below. If the new owners to change 84.26 RCW, shall be	due		*State Technology Fee \$	5.0
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		_		
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1 CERTIFY UNDER PERAGE			Cignoture 01 //// h / //	√.
Signature of UMMA DYMMY		_	Grantee or Grantee's Agent NVOTOV	
Grantor or Grantor's Agent Nicos (origi) Richard D. Burns			Name (print) Resa Cox	
Name (print)				omeroy
Date & city of signing.	==		Communication to the communica	of not more than five years, or
Perjury: Perjury is a class C felony which is punishable by imprison	ment	in the	state correctional institution for a maximum term of	9A.20.020 (1C)).
a time in an amount lixed by the court of the		. 1	ANRER'S USE CINAY	COUNTY TREASUR
REV 84 000 lac (2/22/10)	他	リリ	Carpeter 3 days 11, 11.	
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1	مشب	S	EP 2 2 2010 😃	194

KAREN ROOSEVELT

1945



REAL ESTATE EXCISE TAX SUPPLEMENTAL STATEMENT

(WAC 458-61A-304)

This form must be submitted with the Real Estate Excise Tax Affidavit (FORM REV 84 0001A) for claims of tax exemption as provided below. Completion of this form is required for the types of real property transfers listed in numbers 1-3 below. Only the first page of this form needs original signatures.

AUDIT: Information you provide on this form is subject to audit by the Department of Revenue. In the event of an audit, it is the taxpayers' responsibility to provide documentations to support the selling price or any exemption claimed. This documentation must be maintained for a minimum of four years from date of sale. (RCW 82.45.100) Failure to provide supporting documentation when requested may result in the assessment of tax, penalties, and interest. Any filing that is determined to be fraudulent will carry a 50% evasion penalty in addition to any other accrued penalties or interest when the tax is assessed.

PERJURY: Perjury is a class C felony which is punishable by imprisonment in a state correctional institution for a maximum term of not more than five years, or by a fine in an amount fixed by the court of not more than five thousand dollars (\$5,000.00), or by both imprisonment and fine (RCW 9A.20.020 (1C)).

		certify that the
(type of instrumen	t), dated, was	delivered to me in escrow by
sign below and ind	icate name of firm. The payment of	ompany agent, or title insurance company agent named here must the tax is considered current if it is not more than 90 days beyond interest and penalties apply to the date of the instrument.
		n-taxable; however, any consideration received is not a gift and is th Grantor (seller) and Grantee (buyer) must sign below.
	of different transfer types are prorm and paying your tax.	ovided on the back. This is to assist you with correctly
delivered, or contra property. The term secure the purchas	acted to be paid or delivered, includ includes the amount of any lien, mo e price, or any part thereof, or remai	either tangible (boats, motor homes, etc) or intangible, paid or ing performance of services, in return for the transfer of real ortgage, contract indebtedness, or other encumbrance, given to ning unpaid on the property at the time of sale. "Consideration" property by the buyer at the time of transfer.
A: Gifts with	consideration	
\$	and has	nue to make all payments after this transfer on the total debt of received from the grantee (buyer) \$
payı	ment towards equity is taxable.	tems received in exchange for property) towards the equity. Any
liab	le and pay grantor (seller) \$	total debt of \$ for which grantor (seller) is (include in this figure the value of any items received quity. Total of debt relief and equity payment are taxable.
B: Gifts with	out consideration	
	re is no debt on the property; Granto tax is due.	or (seller) has not received any consideration towards equity.
	ntor (seller) has made and will conti has not received any consideration t	nue to make 100% of payments on total debt oftowards equity. No tax is due.
	ntee (buyer) has made and will cont ntor (seller) any consideration toward	inue to make 100% of payments on existing debt and has not paid ds equity. No tax is due.
exis		re made and will continue to make payments from joint account on er. Grantee (buyer) has not paid grantor (seller) any consideration
Has the	re been or will there be a refinance of	of the debt? YES NO
If grantor (seller) v	was on title as co-signor only, please	e see WAC 458-61A-215 for exemption requirements.
	acknowledges this transaction ma -keeping requirements and evasio	y be subject to audit and have read the above information n penalties.
San	dra Hunch	
	Grantor's Signature	Grantee's Signature
. 🗌 IRS "TAX DI	EFERRED" EXCHANGE (WAC	458-61A-213)
I, (print name)		certify that I am acting as an Exchange Facilitator in transferring
real property to	pursuant t	o IRC Section 1031, and in accordance with WAC 458-61A213.

For tax assistance visit http://dor.wa.gov or call (360) 570-3265. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 705-6715. Teletype (TTY) users may call 1-800-451-7985.

Exchange Facilitator's Signature

evenue

MOBILE HOME ... REAL ESTATE EXCISE TAX AFFIDAVIT

Submit to County Treasurer of the county in which property is located.

Chapter 82.45 RCW

This form is your receipt when stamped

Chapter 458-61A WAC by cashier.

FOR USE WHEN TRANSFERRING TITLE TO MOBILE HOME ONLY

	Hinrichs		9	KED 	Name Davi	d Hinrichs Roberts	
Jolene Hi	inrichs_			REGISTI OWNER	- NFET	100013	
Street PC, Sc.	x 443			ŘŞ	Street P.O.	Box 275	
Street PO, So. City Pomery	ir	State Wet,	Zip Code 79347	NEW	City Pomer	rot w	700011
Name				~	Name		
M				OWNE	<u> </u>		
Street O City				GA	Street	Str	ate Zip Code
City		State	Zip Code	L	City		
PERSONAL PROPERT PARCEL or ACCOUNT	NO					T NO. 1-053-10	
LIST ASSESSED VALU	YEAR		MODEL		SIZE	SERIAL NO. or I.D.	REVENUE TAX CODE NO.
SKY	1973				70×14	019430014	
Delinquent Interest: S	ocal	\$ \$ \$ \$ \$	5.00	Gi Na Da Si	ate and Place of gnature of rantee/Agent—	30to	ELLE
Cotal Due		\$	/0.00	N	ame (print)	gret Robe	rts
If exemption claimed, WAC No. (Sec/Sub)_ WAC Title WAC Title A MINIMUM O	458-61A	- 201 (B		D:	ate & Place of S	Bret Robe Signing: 9/30/13	Sarkston, wa
	REASURER'S CE operty taxes due _ home described he	RTIFICATE Garfiel	d	w o aı	hich possesses	therwise transferring owner a tax lien, the seller does not lien, the seller is guilty of d	ship of) a mobile home
_ <i></i>	7/1100	se his.	200	9.	onlies to Fraud a	A.56.010 (4d), and RCW 9	t inform the buyer (new eliberate deception as it itle 9 and 9A RCW (RC)
Date	Coun	ty Treasurer or		9	onlies to Fraud a	PA.56.010 (4d), and RCW 9	t inform the buyer (new eliberate deception as it itle 9 and 9A RCW (RC)
Date	Coun		Deputy HIS SPACE ORI	9	onlies to Fraud a	A.56.010 (4d), and RCW 9	t inform the buyer (new eliberate deception as it itle 9 and 9A RCW (RC
Date	Coun			9	onlies to Fraud a	PA.56.010 (4d), and RCW 9	t inform the buyer (new eliberate deception as it itle 9 and 9A RCW (RC

REV 84 0003 (12/27/06)

KAREN ROOSEVELT GARFIELD COUNTY TREASURER

2435

ıl	WASHINGTON STATE DEPARTMENT OF	
α L	WASHINGTON STATE DEPARTMENT OF LICENSING	i

Vehicle Certificate of Ownership (Title) Application

	_			-					Fees
Plate or TPO 90854	Color #1		Color #2		Vehicle Ide 0194300	ntification Number (VI)H	N)		Filing
odel year Pwr	Use MOB	Make SKY		Series/Boo	dy type	Model ID	Value code	Year	Scale weight
cle engine or motor home number	er	Fleet code		ipment #	MO reg	Reg exp date	Scale weight	Seats	RTA excise tax
clared GWT Mor	nth GWT	GWT expiratio	n	Mileage		1	evious title # 09402901	State WA	License
ecial options	,			nty of residence	e	Purchase price	Tax jurisdiction	Tax rate	Application
DAV Leased NRM Bonded Native American Region	ı 🔲 No	o title issued on-roadworthy	12	USE TAX EXE	MPT: Private	automobile was purch	nased and used by	me in another	Inspection
Joint tenants with rights of survi		_	1	Washington of	n	ays while I was a bona sonal and family trans		e i entered	VIN assignment
ashington State primary re Washington State princip						Washington State sal- sales/use tax paid by			Gross weight
reet address is required or or exceptions to this rule,	n the vehi	icle record.	т 🗀 т	ransferred to	SPOUSE	COUNTRY, Notarized :		ed.	GWT credit (Attach proof
or more than two registe		gal owners	, please a	ttach add	itional app	lications.	· · · · · · · · · · · · · · · · · · ·		Arbitration
nme (Last, First, Middle initial) NRICKS, DAVID									Sales/Use tax
nme (Last, First, Middle initial) DBERTS, BRET									License service
ashington State primary residence		lress (if an indi	vidual) or Wa	shington State	e principal plac	ce of business street a	iddress (if a busine	ss)	Plate
ddress (continued) OMEROY WA 99347									LPG
ailing address (if different than res			ion address						Aquatic weed
st owner's Washington driver lice	nse, ID card	d, or UBI numb	er	Second	owner's Was	hington driver license	, ID card, or UBI nu	mber	Trauma
lew legal owner or lie	nholde	r-must be t	illed out if	different th	an the reg	istered owner			Replacement tab
ame (Last, First, Middle initial) ame (Last, First, Middle initial)	_								State parks donation
ddress	.=								Out of state
									Other
ddress (continued)				T :	d	hington delvor liconon	ID card or IIII ru	mher	Total fees and tax
rst owner's Washington driver lice	nse, ID card	d, or UBI numb	er 	Second	owners was	hington driver license	, ib caid, or obi rid		
lealer's report of sale certify that this information is corre	ect	VA dealer numb	ber Deak	er name			Date	of sale	Subagent fee (Do not include in total)
he vehicle is clear of encumbrance xcept as shown. Any required sale as been collected.		ate of delivery	Vehi	cle is: N	ew 🗌 Used	Previously •	ealer's authorized :	signature	
yone who knowingly make prisonment or both. I certify	s a false y under p	statement r	nay be gui	ity of a felcer the laws	ony under s	tate law and upo of Washington t	n conviction sh that the foregoi	all be punish ng is true an	ned by a fine, d correct.
130/13 Clarkston	WA 9	19413 (C	Registered o	owner signatur			Position, if signir	ig for a business	3
e and place	[No. 1]	7903-((Régistèred d	owner signatur	18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Position, if signif	g for a business)
tarization/Certificatio	on for re	egistered	owner(s) signatu	re				
		State	of			, Co	unty of	- 1	3121.61.21
		Sign	ed or attest	ed before m	e on	by	ithunt!	unicks	RBIEL MA
. (Seal or stamp)						Sig	nature		
		Title				Prir and	nted or stamped na	me	
420-001 (R/1/11)WA						Dea	aler or county/office	number or nota	ry expiration date 00 or TTY (360) 664-011



REAL ESTATE EXCISE TAX AFFIDAVIT

CHAPTER 82.45 RCW - CHAPTER 458-61A WAC

NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

Name David Hinrichs		2		10000	<u> 185</u>
Tolena Harlins			Bret Robe	175	
				30x 2	75-
Making Address P. Box 4/3		BUYE	City/State/Zip Pomer	ni .	
(in State/Lip Parneray Wa. 9934)		- ^m 5	Phone No (including area code	1509	1847-7298
Phone No (including area code) (509) 843-243			al and personal property tax parce		
Send all property tax correspondence to. 🗹 Same as Buyer/Gr		กษาต	bers - check box if personal property		List assessed value(s)
ling Address					
/State Zip					
ne No - including area code)					
ne ste sineruung area court					
Street address of property 1779 Colum	Bid	STruez	<u></u>		
Tims property is located in 🔲 unincorporated			County OR within Cotty of Z	comer	22
healthous if any of the fisted parcels are being segregated	from another	r parcel, are p	part of a boundary line adjustment	or parcels	being merged.
Legal description of property (if more space is needed, so LOTS 9410, except to 10 8/01/10 of Mulkey	ie we is Ada	ist eight ton t	thteen feet (18% of 18	r) of Emero	Lot 9, v.
Select Land Use Code(s):	<u></u>		st all personal property (tang	ible and in	stangible) included in selling
		- pr	rice.		
enter any additional codes:		- -			
(See back of last page for instructions)	YES N	NO		· · · · · · · · · · · · · · · · · · ·	
this property exempt from property tax per chapter 36 RCW (nonprofit organization)?					
	YES N	NO If cla	iming an exemption, list W.	AC numb	er and reason for exemption
this property designated as forest land per chapter 84.33 RCW ^o		mar :			1 🛦
this property classified as current use (open space, farm and		Ø ∶WAC	No. (Section/Subsection)	- Frequency	A C - AI PI CACA
gnoultural, or tumber) land per chapter 84.349		Reas	on for exemption _£5+0	<u> </u>	Community po
this property receiving special valuation as historical property er chapter 84.26 RCW?		E Reas		GH	<u> </u>
any answers are yes, complete as instructed below.			of Document Quit	Class	Need
) NOTICE OF CONTINUANCE (FOREST LAND OR CUI	CRENT USI				
(EW ()WNER(S). To continue the current designation as fore lassification as current use (open space, farm and agriculture,	or timber)	Date	of Document Jaly	15	2013
and you must sign on (3) below. The county assessor must the	hen determi	ne :			
the jainst transferred continues to qualify and will indicate by	signing belo	OW.			
the land no longer qualifies or you do not wish to continue the classification, it will be removed and the compensating or ac-	ic uesignam iditional tax	(es -			
it be the and navable by the seller or transferor at the time of	f sale. (RCV	W			
4 3 (140) or RCW 84 34.108). Prior to signing (3) below, you	may contac	ət			
our local county assessor for more information.					
his land does does not qualify for continuance		i			
DEPUTY ASSESSOR	DATE	:			
(2) NOTICE OF COMPLIANCE (HISTORIC PROP	ERTY)				
IEW OWNER(S): To continue special valuation as historities (3) below. If the new owner(s) does not wish to continue	c property,				
Advisorations calculated nursuant to chanter 84 ZD KV.W. S	iue, ail hall be due	, !			5.00
nd payable by the seller or transferor at the time of sale.		:	*Affidavit Processing Fe		
(3) OWNER(S) SIGNATURE			Total Du	e \$	/0.0
PRINT NAME			A MINIMUM OF \$10.00 *SEE II	IS DUE II NSTRUCT	
		EDV THAT 1	THE FOREGOING IS TRUE A	ND CORR	ECT.
I CERTIFY UNDER PENALTY	OF PERJU	KLIBALI			~ /
	OF PERJU	Signa	ature of		
Signature of	OF PERJU	Signa Grat	itee or Grantee's Agen	34	TO BUTTO
Signature of Grantor or Grantor's Agent Name (print)	OF PERJU	Signa Grat	ature of ntee or Grantee's Agent e (print)	Sil. Rop.	TEMINI erts
Signature of Grantor's Agent	OF PERJU	Signa Grat Nam	itee or Grantee's Agen	Sil. Kapi Ui L	mersk

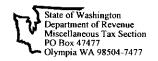
REV 84 0001a (04/30/09)

THIS SPACE TREOSURER'S USE OF LA

2390

COUNTY TREASURER 7

KAREN ROOSEVELT



REAL ESTATE EXCISE TAX SUPPLEMENTAL STATEMENT

(WAC 458-61A-304)

This form must be submitted with the Real Estate Excise Tax Affidavit (FORM REV 84 0001A) for claims of tax exemption as provided below. Completion of this form is required for the types of real property transfers listed in numbers 1-3 below. Only the first page of this form needs original signatures.

AUDIT: Information you provide on this form is subject to audit by the Department of Revenue. In the event of an audit, it is the taxpayers' responsibility to provide documentations to support the selling price or any exemption claimed. This documentation must be maintained for a minimum of four years from date of sale. (RCW 82.45.100) Failure to provide supporting documentation when requested may result in the assessment of tax, penalties, and interest. Any filing that is determined to be fraudulent will carry a 50% evasion penalty in addition to any other accrued penalties or interest when the tax is assessed.

PERJURY: Perjury is a class C felony which is punishable by imprisonment in a state correctional institution for a maximum term of not more than five years, or by a fine in an amount fixed by the court of not more than five thousand dollars (\$5,000.00), or by both imprisonment and fine (RCW 9A.20.020 (1C)).

	The persons signing below do hereby declare under penalty of perjury that the following is true (check appropriate statement):
1.	☐ DATE OF SALE : (WAC 458-61A-306(2))
	I, (print name) certify that the
	(type of instrument), dated, was delivered to me in escrow by
	(seller's name). NOTE: Attorney, escrow agent, title company agent, or title insurance company agent named here must sign below and indicate name of firm. The payment of the tax is considered current if it is not more than 90 days beyond the date shown on the instrument. If it is past 90 days, interest and penalties apply to the date of the instrument.
2.	GIFTS: (WAC 458-61A-201) The gift of equity is non-taxable; however, any consideration received is not a gift and is taxable. One of the boxes below must be checked. Both Grantor (seller) and Grantee (buyer) must sign below.
	NOTE: Examples of different transfer types are provided on the back. This is to assist you with correctly completing this form and paying your tax.
	"Consideration" means money or anything of value, either tangible (boats, motor homes, etc) or intangible, paid or delivered, or contracted to be paid or delivered, including performance of services, in return for the transfer of real property. The term includes the amount of any lien, mortgage, contract indebtedness, or other encumbrance, given to secure the purchase price, or any part thereof, or remaining unpaid on the property at the time of sale. "Consideration" includes the assumption of an underlying debt on the property by the buyer at the time of transfer.
	A: Gifts with consideration
	1. Grantor (seller) has made and will continue to make all payments after this transfer on the total debt of \$\ and has received from the grantee (buyer) \$\
	(include in this figure the value of any items received in exchange for property) towards the equity. Any payment towards equity is taxable.
	2. Grantee (buyer) will make payments on total debt of \$ for which grantor (seller) is liable and pay grantor (seller) \$ (include in this figure the value of any items received in exchange for property) towards the equity. Total of debt relief and equity payment are taxable.
	B: Gifts without consideration
	 There is no debt on the property; Grantor (seller) has not received any consideration towards equity. No tax is due.
	2. Grantor (seller) has made and will continue to make 100% of payments on total debt ofand has not received any consideration towards equity. No tax is due.
	3. Grantee (buyer) has made and will continue to make 100% of payments on existing debt and has not paid grantor (seller) any consideration towards equity. No tax is due.
	4. Grantor (seller) and grantee (buyer) have made and will continue to make payments from joint account on existing debt before and after the transfer. Grantee (buyer) has not paid grantor (seller) any consideration towards equity. No tax is due.
	Has there been or will there be a refinance of the debt?
	If grantor (seller) was on title as co-signor only, please see WAC 458-61A-215 for exemption requirements.
	The undersigned acknowledges this transaction may be subject to audit and have read the above information regarding record-keeping requirements and evasion penalties.
_	1 Sull But
	Grantor's Signature Grantee's Signature
3.	☐ IRS "TAX DEFERRED" EXCHANGE (WAC 458-61A-213)
	I, (print name), certify that I am acting as an Exchange Facilitator in transferring
	real property to pursuant to IRC Section 1031, and in accordance with WAC 458-61A213.
	NOTE: Exchange Facilitator must sign below.

For tax assistance visit http://dor.wa.gov or call (360) 570-3265. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 705-6715. Teletype (TTY) users may call 1-800-451-7985.

Exchange Facilitator's Signature

REAL ESTATE EXCISE TAX AFFIDAVIT

R PRINT

CHAPTER 82.45 RCW - CHAPTER 458-61A WAC

When stamped by cashier.

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

(See back of last page for instructions)

If multiple owners, list percentage of ownership next to name.

☐ Check box if partial sale of property		_		David M. Fruh and Lora L.	Fruh,	
Name K. Wayne Slaybaugh as his sole and separate		-		Name husband and wife	,	
property, and Claudia R. Slaybaugh as her *		-	밀			
Mailing Address C/o First American Title 330 Diagonal		— Š	GRANTEE	Mailing Address PO Box 441 Pomeroy WA 99347		
City/State/Zip Clarkston WA 99403		_		City/State/Zip		
Phone No. (including area code)	<u> </u>	_	ı	Phone No. (including area code)		
Send all property tax correspondence to: Same as Buyer/Grantee		List a	li rca	and personal property tax parcel account	List assessed	value(s)
David M. Fruh and Lora L. Fruh, husband and w	- 1			ers - check box if personal property 09 001 1900	107,985	5.00
DO D 444	— [001	03 001 1800	l ——————	
Mailing Address PO Box 441 Pomeroy WA 99347						
ity/State/Zip Pomeroy VVA 99341						
hone No. (including area code)						
Street address of property: 204 Hill Street, Pomercy, WA 99	9347					
0.6-14				County OR within City of Pomer	oy	
This property is located in unincorporated Gamelo	1	1	_			
Check box if any of the listed parcels are being segregated from a l	ren. Ren. he	arcei.		the second second second		
Legal description of property (if more space is needed, you may	/ sttach	a sep	aratc	sheet to each page of the arridavity	of "C" (now 2nd) Stre	et
The West 50 feet of Lot 1 in Block 9 of Wilson's Addition to the	e City o	of Por	nero	y, together with the vacated East han t	int to grant easement	s for
The West 50 feet of Lot 1 in Block 9 or Wilson's Admitted to abutting thereon. RESERVING to the City of Pomeray, wit reconstruction, repair and maintenance of public utilities and ser						
construction, repair and maintenance of public utilities and ser	ivices.	5018 :	ano :	separate property and reach A. Sibyou	logit do not sele alle	
separate property and Linda K. Tucker as her sole and seprate	re brobe	arty				
		_				 _
Select Land Use Code(s): 11 Household, single family units			-	st all personal property (tangible and	intangible) included	in selling
			pr	ice.		
enter any additional codes:		Ì				
(See back of last page for instructions) YES	s no	.	_			
			_			
Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)?	<u> </u>					
			_			
YES			cla	iming an exemption, list WAC num	ber and reason for	exemption:
Is this property designated as forest land per chapter 84.33 RCW?			/ A C	No. (Section/Subsection)		
Is this property classified as current use (open space, farm and	Ċ)					
agricultural, or timber) land per chapter 84.34?		R	¢85 0	on for exemption		
Le this property receiving special valuation as historical property	X	_				
per chapter 84.26 RCW?		1_				
If any answers are yes, complete as instructed below.		_ ا		of Document Statutory Warranty De	ed (SWD)	
(1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT	T USE)					
NEW OWNER(S): To continue the current designation as forest land classification as current use (open space, farm and agriculture, or timb	a or iber)	Ţ	ate	of Document09/30/13		
land you must also on (1) below. The county assessor must then det	termine	.		Gross Selling Price \$	89,990.00	
if the land transferred continues to qualify and will indicate by signiff	ng below	/. <u> </u>		•	0.00	
If the land no longer qualifies or you do not wish to continue the design	ignation	1		*Personal Property (deduct) \$		
or classification, it will be removed and the compensating or addition will be due and payable by the seller or transferor at the time of sale.	RCW	'	1	Exemption Claimed (deduct) \$		
84.33.140 or RCW 84.34.108). Prior to signing (3) below, you may o	contact			Taxable Selling Price \$		
your local county assessor for more information.				Excise Tax : State \$		
This land does does not qualify for continuance.				Local \$		
- - · ·		_1		,*Delinquent Interest: State \$		
		- 1		Local \$	0.00	
DEPUTY ASSESSOR DAT	re	j			0.00	
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY	Y)			*Delinquent Penalty \$	0.00	
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY NEW OWNER(S): To continue special valuation as historic prop	Y) perty,				1,529.85	
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY NEW OWNER(S): To continue special valuation as historic property (3) helow. If the new owner(s) does not wish to continue, all	Y) perty, il		-	Subtotal \$		5.00
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY NEW OWNER(S): To continue special valuation as historic prop	Y) perty, il		-	Subtotal \$ *State Technology Fee \$	1,529.85 5.00	5,00
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY NEW OWNER(S): To continue special valuation as historic property of the new owner(s) does not wish to continue, all additional tax calculated pursuant to chapter 84.26 RCW, shall be	Y) perty, il		-	Subtotal \$ *State Technology Fee \$ *Affidavit Processing Fee \$	1,529.85 5.00 0.00	5,00
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY NEW OWNER(S): To continue special valuation as historic property (3) below. If the new owner(s) does not wish to continue, all additional tax calculated pursuant to chapter 84.26 RCW, shall be and payable by the seller or transferor at the time of sale.	Y) perty, il			Subtotal \$ *State Technology Fee \$	1,529.85 5.00	5.00
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY NEW OWNER(S): To continue special valuation as historic property (3) below. If the new owner(s) does not wish to continue, all additional tax calculated pursuant to chapter 84.26 RCW, shall be and payable by the seller or transferor at the time of sale. (3) OWNER(S) SIGNATURE	Y) perty, il	_		Subtotal \$ *State Technology Fee \$ *Affidavit Processing Fee \$ Total Due \$	1,529.85 5.00 0.00 1,534.85	
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Perjury: Perjury is a class C felony which is punishable by imprisonment in the state correctional institution for a maximum term of not more than five years, or by a fine in an amount fixed by the court of not more than five thousand dollars (\$5,000.00), or by both imprisonment and fine (RCW 9A.20.020 (IC)).

REV 84 0001a (02/13/07)



2436 pué

KAREN ROOSEVELT GARFIELD COUNTY TREASURER

COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT, made and entered into this 17th day of JULY, 2002, by and between MONTE A. SLAYBAUGH and KAREN R. SLAYBAUGH, husband and wife, at Pomeroy, Garfield County, Washington.

In consideration of the love and affection that each of the said parties has for the other, and in consideration of the mutual benefits to be derived by the parties hereto, it is hereby agreed, covenanted and promised as follows:

The parties do not intend by this Agreement to change the status of any of their property. This Agreement shall operate only upon such property as is the community property of the parties upon the first of them to die.

That upon the death of either MONTE A. SLAYBAUGH or KAREN A. SLAYBAUGH, title to all community property shall vest in the other, if he or she survives the decedent.

In the absence of other evidence indicating the parties intent to terminate this Agreement, it shall, nevertheless, be deemed mutually terminated and of no further force and effect upon a court of competent jurisdiction dissolving the marriage or granting a decree of divorce or separate maintenance to one or the other party.

IN WITNESS WHEREOF, the said MONTE A. SLAYBAUGH and KAREN R. SLAYBAUGH have hereunto set their hands and seals this $\frac{174}{4}$ day of $\frac{1}{2}$, 2002.

Monte A. SLAYBAUGH

Karen R. Slaybaugh

COMMUNITY PROPERTY AGREEMENT



20130535 Thu Sep 26 13:43:01 PDT 2013
Filing Fee: \$(No FieldTag Finance TotalFees found)
Garfield County, WA Recorder
DEATH
Pages 2

			Middle	LAS	T	Suffix	2. Death Oa		٠	4488	•
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(ay 14, 19		Pomero			ashing		l	Son	ne Col	12 Was Decedent	over in t
, Was Decedent No	of Hispanic Orig	jin? (Yes o	r No) if yes, spec	äfy.	11. Decede	nt's Race(s)	White			Armed Forces?	Yes
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c. Residence: Co	ounty	13d. Tr	ribal Reservation	on Name (if appl		State or Foreign	Country	99347	74	XO Yes D	
Garfield . Estimated length	th of time at res	idence. 1	5. Mantal Stati	us at Time of Dr		rviving Spouse	s Name (Give name		a)		
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Inpat	ient										
. Facility Name (1)			City, Town, or Loc	ation of Death	26b. State	27. Zip Code 99403	
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CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2012-017492

DATE ISSUED: 12/28/2012

FEE NUMBER: 0003201119

GIVEN NAMES: BETTY BROYLES
LAST NAME: SLAYBAUGH

AKA: ELIZABETH BROYLES SLAYBAUGH

COUNTY OF DEATH: BENTON
DATE OF DEATH: DECEMBER 26,2012
HOUR OF DEATH: 12:30 P.M.
SEX: FEMALE

AGE: 96 YEARS

SOCIAL SECURITY NUM

HISPANIC ORIGIN: NO. NOT HISPANIC

RACE: WHITE

BIRTHDATE: AUGUST 02,1916 BIRTHPLACE: POMEROY, GARFIELD CNTY, WASHINGTON

MARITAL STATUS: WIDOWED SPOUSE:

OCCUPATION: STORE CLERK

INDUSTRY: RETAIL EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED

US ARMED FORCES! NO

INFORMANT: LINDA TUCKER
RELATIONSHIP: DAUGHTER
ADDRESS: 3124 S CASCADE ST. KENNEWICK, WA 99337

CAUSE OF DEATH:

A. DEBILITY

INTERVAL: WEEKS

B. PNEUMONTA

INTERVAL: WEEKS
C. ASPIRATION

INTERVAL: WEEKS

D.

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: CHRONIC RENAL FAILURE, CONGESTIVE HEART FAILURE

DATE OF INJURY: Hour of Injury:

INJURY AT WORK? PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP: COUNTY:

DESCRIBE HOW INJURY OCCURRED:

STATUS OF DECEDENT. IF A TRANSPORTATION INJURY:

NOT APPLICABLE

ITEM(S) AMENDED: NONE

O

NUMBER(S): NONE DATE(S): NONE

PLACE OF DEATH: NURSING HOME / LONG TERM CARE FACILITY FACILITY OR ADDRESS: LIFE CARE CENTER OF KENNEWICK CITY, STATE, ZIP: KENNEWICK, WASHINGTON 99336

RESIDENCE STREET: 3124 S CASCADE ST CITY, STATE, ZIP: KENNEWICK, WASHINGTON 993375052 INSIDE CITY LIMITS? YES COUNTY: BENTON

TRIBAL RESERVATION: NOT APPLICABLE LENGTH OF TIME AT RESIDENCE: 1 YEAR

FATHER: JOHN BROYLES MOTHER: LIZZIE SHOOK

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: DESERT LAWN CREMATORY
CITY, STATE: KENNEWICK, WA
DISPOSITION DATE: DECEMBER 28,2012

FUNERAL FACILITY: MUELLER'S CHAPEL OF THE FALLS
ADDRESS: 314 W 1ST AVE
CITY, STATE, ZIP: KENNEWICK WA 99336
FUNERAL DIRECTOR: CURTIS D MCGARY

MANNER OF DEATH: NATURAL

889

MANNER OF DEATH: MATURAL.

AUTOPSY: NO

AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE

DID TOBACCO USE CONTRIBUTE TO DEATH? NO

PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: WAYNE M. KOHAN, MD TITLE: PHYSICIAN CERTIFIER

ADDRESS: 2108 W. ENTIAT AVENUE CITY, STATE, ZIP: KENNEWICK WA 99336

TE SIGNED: DECEMBER 26,2012

CASE REFERRED TO ME/CORONER: NO

FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: RAQUEL MELCHOR DATE RECEIVED: DECEMBER 27,2012

DOH 01-003 (12/1



TIRRETA

SIDENCE

ACC LOC

QUERES

FOR INSTRUCTIONS SEE BACK AND HANDBOOK

HIS SY CEPT FIED COPY OF THE RECORDS ON THE WITH CENTER FOR HEM THE STATISTICS SCENTIFIED COPIES M

20130533 Thu Sep 26 13:43:01 PDT 2013 Filing Fee: \$(No FieldTag Finance TotalFees found) Garfield County, WA Recorder

6-4-01

A DOH/01-003 (5

DOH 110-008 (Rev. 7/91) (formerly DSHS 9-150)

Health 12 LOCAL FILE NUMBER **CERTIFICATE OF DEATH** 1. NAME First 2. SEX (M / F) 3. DEATH DATE (Mo, Day, Yr) Slaybaugh
7. BIRTHDATE (Mo, Day, Yr) 8. BIRTHPLACE (City, State or Foreign Country) Kenneth YEAR 6. UNDER 1 DAY Male <u>June</u> WAS DEC IN U.S. AF (Yes / No) DAYS T 12,1914 Pomeroy, WA
PLACE OF DEATH — 100 BOX FOR PLACE THEN GIVE ADDRESS O
1.□ HOME 2.□ IN TRANSPORT 3.□ EMERG. RM/OUT PTN 572 HOSP. No Garfield 11. CITY, TOWN OR LOCATION OF DEATH R INSTITUTION NAME 5. NUR HOME 6. 0.0 SMOKING IN LAST 15 YEARS? (Yes / No) 6. C) OTHER PLACE Pomeroy Garfield County Hospital No MARITAL STATUS — Married, Never married, Widowed, Divorced (Specify) 15. SURVIVING SPOUSE (If wife, give maiden name) 16 SOCIAL SECURITY NO. DECEDENT'S EDUCATION (Specify only highest grade Betty Bentley
19. KIND OF BUSINESS OF INDUSTRY <u>Married</u> USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED) Was Decedent of Hispanic origin or descent? (Ancestry) (Specify Yes or No. If Yes, specify Cuban, Mexican, Puerto Rican, etc.) Farming
23 CITY/TOWN, OR LOCATION 24. INSIDE CIT LIMITS? (Yes / No) (Yes / No) Specify: Farmer/Construction No $exttt{White}$ 25A. COUNTY 26. STATE 258. LENGTH OF 27. ZIP CODE 87yrs 204 Hill St. Garfield Pomeroy Yes 99<u>347</u> WA MOTHER'S NAME -- FIRST, MIDDLE, MAIDEN SURNAME AREZIO Matthew A. Slaybaugh Grace L. Old STREET OR RFD NO. 31. MAILING ADDRESS Pomeroy, Washington 99347 BettySlaybaugh 204 Hill St. 32. BURIAL, CREMATION REMOVAL, OTHER (Specify) Cremation June 4,2001 Lewiston, Idaho 83501 8. ADDRESS OF FACILITY Mt. View Crematory Richardson-Brown Funeral Home Pomeroy, Washington 99347 TO BE COMPLETED ONLY BY MEDICAL EXAMINER OR CORONER TO BE COMPLETED ONLY BY CENTIFICATION FOR STATES AND PLACE

BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE

TO THE CALLED STATES ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION, IN MY OPINION DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED. SIGNATURE AND TITLE ANP HOUR OF DEATH (24 X 44. DATE SIGNED (Mo., Day, Yr) 45. HOUR OF DEATH (24 Hrs.) 42. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type 46. PRONOUNCED DEAD (Mo., Day, Yr) 47. HOUR PRONOUNCED DEAD (24 Hrs.) 48. NAME AND ADDRESS OF CERTIFIER - PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print) 49. ME/CORONER FILE NUMBER 446 Pataha St. Suzanne Groves ARNP Pomeroy, WA 99347 50. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH: INTERVAL BETWEEN ONSET AND MMEDIATE CAUSE (Final disease or DUE TO, OR AS A CONSEQUENCE OF INTERVAL BETWEEN ON DEATH DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR CAUSE HEART FAILURE, LIST ONLY ONE INTERVAL BETWEEN ONSET AND DEATH HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST. DUE TO, OR AS A CONSEQUENCE OF INTERVAL BETWEEN ONSET AND DEATH DUE TO, OR AS A CONSEQUENCE OF DEATE 51. OTHER SIGNIFICANT CONDITIONS CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVE ABOVE: WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes / No) 52. AUTOPSY' No 56. HOUR OF INJURY | S7. DESCRIBE HOW INJURY OCCURRED: 54. ACC. SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) 55. INJURY DATE (Mo, Day, Yr) 58. INJURY AT WORK? (Yes / No) OFFICE STREET OR RED NO., CITY/TOWN, STATE PLACE OF INJURY --- AT HOME, FARM BLDG, ETC. (Specify) 63. DATE RECEIVED (Mo., Day, Yr)

COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT, made and entered into this / day of / 1991, by and between LARRY A. SLAYBAUGH and CLAUDIA R. SLAYBAUGH, husband and wife, at Pomeroy, Garfield County, Washington.

In consideration of the love and affection that each of the said parties has for the other, and in consideration of the mutual benefits to be derived by the parties hereto, it is hereby agreed, covenanted and promised as follows:

The parties agree that all property presently owned by either of them, of whatsoever nature, is their community property. They further agree that all property which either of them shall hereafter acquire, by any means whatsoever, shall be their community property.

That upon the death of either LARRY A. SLAYBAUGH or CLAUDIA R. SLAYBAUGH, title to all community property shall vest in the other, if he or she survives the decedent.

In the absence of other evidence indicating the parties intent to terminate this Agreement, it shall, nevertheless, be deemed mutually terminated and of no further force and effect upon a court of competent jurisdiction dissolving the marriage or granting a decree of divorce or separate maintenance to one or the other party.

IN WITNESS WHEREOF, the said LARRY A. SLAYBAUGH and CLAUDIA

R. SLAYBAUGH have hereunto set their hands and seals this 17+16

day of 1991.

LARRY A SLAYBAUGH

Claudia K. Slaybaugh.

COMMUNITY PROPERTY AGREEMENT



20130536 Thu Sep 26 13:43:01 PDT 2013

		Z DEP	ÂŖŢMĖ	Garfield Count	y, WA Recorder	Istalree	DEATH Pages
Local File Number		Washin	gton State Cer	tificate of Death	State File Number		
1. Legal Name (include A	UCA's dany) First	Middle	LAST	Suffix 2	. Death Date	8	609
1 1	_		n a c1 - 2	المستحداث	T		

	1. Legal Name (include AKA's if any) First	Middle	LAST	Suffix	2. Death Da	ite	l 8	60922	
•	Lar	rv Alvis	Bud Slav	/baugh	June	18, 2008	-		
		inhasy 4b. Under 1 Ye		r 1 Day Minutes	Social Security Nur		6. County of		
	Male 70	Months D	·				<u>Ga</u>	<u>rfield</u>	
	7. Birthdate Ba. Birthplace (City, Town, or County) Bb. (State or Foreign Country) 9. Decedent's Education Two Years College								
	Feb. 25, 1938 P	omeroy		STILTIZ COTT ecedent's Race(s)		140	Tears	12 Was Granded aver bull C	
	NO	(Yes or No) If yes, apeci	y. 11. 51	acadanta nacatar	White			Armed Forces? Yes	
ă	H3h City or Town								
≝	1387 Columbia St.	13d. Tribal Reservatio	Name (# andicable)	13e. State or Foreign	Country	13f. Zip Code		13g. Inside City Limits?	
긟	Garfield	N/A	, 115.7.5 (# up p		ngton	9934		KRYes □ No □ Unk	
runeral Jirector	14. Estimated length of time at resider	nce. 15. Marital Statu	اہم	16. Surviving Spouse Claud	ia Rav	Horsell			
2	17. Usual Occupation (Indicate type of w District Engineer	ork done during most of w	orking life. (DO NOT USE	RETIREO). 18, Kind of I	Forest Ser	o not use Company	Name)		
98	19. Father's Name (First, Middle, Lest, Se	uffix)			Name Before First		iddle, Last)		
	Kenneth Allen Slavbaugh Betty Broyles Bentley								
8	21. Informant's Name 22. Relationship to Decedent 23. Mailing Address: Number and Street or RFD No. City or Town State Zep								
Ξ	Claudia Slaybaugh	Wife	}	L38/ Columb	ia St P	omeroy, w	asning	ton 99347	
2	Claudia Slaybaugh Wife 1387 Columbia St Pomeroy, Washington 99347 24. Place of Death, & Death Occurred in a Hospital: Llored								
	25. Facility Name (If not a tacility, give number & street or location) Home 26a. City, Town, or Location of Death 26b. State 27. Zip Code								
	1387 Columbia St Pomerov WA 99347								
	28. Method of Disposition		I Disposition (Name of		her place)	30. Location-			
	Cremation		n View Crem	atory		Lewis	ton, I	daho 83501 Disposition	
	31. Name and Complete Address of F Richardson-Brown F	uneral Home	- 750 Colur	mbia St	Pomeroy.WA	99347		ne 23, 2008	
	33. Funeral Director Signature X	<u> </u>	D H						
	<u> </u>	Lever	Datu						
		U_{-}	Cause of Dest	h (See instructions and	examples)	and number custs a	e cardiac a	most respiratory except or	
	34. Enter the <u>chain of events</u> – diseas ventricular fibrillation without showing	ses, injunes, or compli the etiology, DO NOT	cations that directly `ABBREVIATE. Add	additional lines if ne	cessary.	nai events such a	is cardiac ai		
	į		_					Interval between Onset & Death	
	MMEDIATE CAUSE (Final disease of condition resulting in death)	a. MET	ISTATIC RE	NAL CRLL	CARLINOM	4		6 Mo	
	ĺ			Due to (or as a conse	quence of):			Interval between Onsat & Death	
	Sequentially list conditions, if any, lead to the cause listed on line a. Enter the			Due to (or as a conse	nuanon of			Interval between Onset & Death	
	UNDERLYING CAUSE (disease or inj			Due to for as a carisa	qualica ory.			1	
	that initiated the events resulting in death)LAST	<u>c.</u>		Due to (or as a conse	guence of:			Interval between Onset & Death	
		<u>.</u>							
	35. Other significant conditions contrib	outing to death but not	resulting in the under	lying cause given ab	ove	36. Autopsy?	37. Were 4	autopsy findings available to	
ם				•		Yes K No	complete t	the Cause of Death?	
eriller						L res mativo	<u> </u>		
υ.	38. Manner of Death	39. If female	ithic continues.	Not pregnant, but pr	onnant within 47 da	ve hafora death		Did tobacco use contribute to death?	
à	Matural ☐ Homicide	☐ Not pregnant w ☐ Pregnant at tim	e of death 🔲	Not pregnant, but pr	egnant 43 days to 1	year before dea	ლი ⊡\	res 🖺 Probably	
elec	☐ Suicide ☐ Pending			Unknown if pregnan			(27)		
Ē	41. Date of Injury (ммююллуг)	42. Hour of Injury (24h	rs) His. Mace of In	ijury (e.g., Decedent's h	urne, construction site,	resuppresent, WOODED		Injury at Work? Yes □ No □ Unk	
8	45. Location of Injury: Number & Street	et;	1				Apt No.		
Ē	1		County:		State:		Zip Code+ 4	Y.	
Ö.	City or Town: 46. Describe how injury occurred	<u>,</u>	Geoffity.		018(6.	47. If transporta	lion injury, s	pecify:	
	1					Driver/Opera		edestrian	
	l					☐ Passenger		Other (Specify)	
	48a. Certifying Physician-To the best place and due to the causo(s) and mai	of my knowledge, death o	ocurred at the time, date	, and 48b. Medic	al Examiner/Coron death occurred at the	er - On the basis of time, date, and place	examination.	, and/or investigation, in my the cause(s) and manner stated.	
	* Truckael T.	Rooney, m	•	•					
	49. Name and Address of Certifier - P	/		pe or Print)			50. Hour o	f Death (24hrs)	
	Dr. Michael T. Roc	ney MD - 42	8 6th Av	Lewiston.	ID 83501			0530	
	51. Name and Title of Attending Phys	ician if other than Carl	ifier (Type or Print)					Signed (MARODYYYY) -18-2008	
	53. Title of Certifier	54. License N	lumber	55. ME/0	Coroner File Numbe	r 56. \	Vas case re	ferred to ME/Coroner?	
) m	4745 - 194	HO			<u>"</u> 5	Yes 🔲 No	
	Doctor								
	57. Registrar Signature					58. Date Receiv	ed (MNDD/Y	m	
•	57. Registrar Signature		eautist	Carre)	58. Date Receiv	200	_	
•	57. Registrar Signature	rele - D	guty	CADA		1	<i>f</i>	_	
•	57. Registrar Signature x Cause Lelerae		gutyk			1	<i>f</i>	_	



Check box if partial sale of property

REAL ESTATE EXCISE TAX AFFIDAVIT

This form is your receipt

R PRINT CHAPTER 82.45 RCW - CHAPTER 458-61 A WAC when stamped by cashier.

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

(See back of last page for instructions)

If multiple owners, list percentage of ownership next to name. PLEASE TYPE OR PRINT

ì	Name ESTATE OF CHARLES H. KAUSCHE		-	Name RANDALL KAUSCHE (33-1/3%), KATHY E. BERG (33-1/3%)			
~ %	by RANDY KAUSCHE, Personal Representative	<u>-</u>	- H	<u>& GLENDA M. CLOUD (33-1/3%)</u>				
E N	Mailing Address PO Box 626			Mailing Address PO Box 626	· · · · · · · · · · · · · · · · · · ·			
SELLER GRANTOR	City/State/Zip Pomeroy, WA 99347			Mailing Address PO Box 626 City/State/Zip POMEROY WA 99347				
Ĭ	Phone No. (including area code) (509) 843-1343		Phone No. (including area code)(509) 843-1343					
3	Send all property tax correspondence to: Same as Buyer/Grantee		ist all real and personal property tax parcel account numbers – check box if personal property List assessed value(s)					
Nan	ne	_ _	<u>2-012-40-013-2000-0000</u> <u>263,086</u>					
Mai	ling Address			1-018-3000-0000				
	/State/Zip	- 1						
Pho	ne No. (including area code)							
	Street address of property:				<u> </u>			
	This property is located in Garfield							
	Check box if any of the listed parcels are being segregated from another	er naro	celare o	part of a boundary line adjustment or parcels	s being merged.			
	Legal description of property (if more space is needed, you may attach			•				
	South half of Section 13, Township 12 North, Range 40, E.W. M., a				quarter of Section			
	18, Township 12 North, Range 41, E.W.M.				•			
					<u> </u>			
5	Select Land Use Code(s):		T T	ist all personal property (tangible and	intangible) included in selling			
	94 - Open space land classified under chapter 84.34 RCW		pr	rice.				
	enter any additional codes:	'	١	lone				
	(See back of last page for instructions) YES 1	NO						
Wa								
cha	pters 84.36, 84.37, or 84.38 RCW (nonprofit organization, senior							
citiz	en, or disabled person, homeowner with limited income)?		76 -1-	iming an exemption, list WAC num	has and reason for everytian			
6	YES ?	NO	ii cia	iming an exemption, list wAC num	ber and reason for exemption.			
Is t	nis property designated as forest land per chapter 84.33 RCW?	7	WAC	No. (Section/Subsection) 458-61A	-217			
			Reas	on for exemption				
_	cultural, or timber) land per chapter 84.34 RCW?	_		ECORD				
	En brokers) recent mile obtains a second sec	☑						
•	chapter 84.26 RCW?		ļ	CORRECTED BRIDE	in.			
	ny answers are yes, complete as instructed below.	· ·	Туре	of Document CORRECTED PR DEE	:U			
	NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE) W OWNER(S): To continue the current designation as forest land or	<i>.)</i>	Date	of Document				
clas	ssification as current use (open space, farm and agriculture, or timber) lar	and,		Gross Selling Price \$	0.00			
you	must sign on (3) below. The county assessor must then determine if the d transferred continues to qualify and will indicate by signing below. If the	he the	·	*Personal Property (deduct) \$				
lan	d no longer qualifies or you do not wish to continue the designation or],	Exemption Claimed (deduct) \$				
clas	ssification, it will be removed and the compensating or additional taxes v	will	·	Taxable Selling Price \$	0.00			
be (due and payable by the seller or transferor at the time of sale. (RCW 33.140 or RCW 84.34.108). Prior to signing (3) below, you may contact	t t		Excise Tax : State \$	0.00			
yo.	ar local county assessor for more information.				0.00			
Th	is land 🛮 does . 🗌 does not qualify for continuance.			*Delinquent Interest: State \$	the state of the s			
1	Sestia Vuecibriege 10-11-12		1	•				
+	DEPUTY ASSESSOR DATE							
	(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY)		-	•	0.00			
sig	W OWNER(S): To continue special valuation as historic property. n (3) below. If the new owner(s) does not wish to continue, all			*State Technology Fee \$	 			
adio	itional tax calculated pursuant to chapter 84.26 RCW, shall be due a vable by the seller or transferor at the time of sale.	and		*Affidavit Processing Fee \$				
pay	(4) OMATOD (C) CICNIATUDE		1		10.00			
-2	Po Atlante		-	1000.000	***			
	PRINT NAME Cong Kausche	_		A MINIMUM OF \$10.00 IS DUE I				
1	Parker sole		ŀ	*SEE INSTRUC	TIONS			
	any wasen		<u>. </u>					
S	I CERTIFY UNDER PENALTY OF PERJU	JRY T	тнат Т	THE FOREGOING IS TRUE AND CORI	RECT.			
Sig	gnature of cantor's Agent Rang Raise		Sign	ature of	Il A Kember			
Gı	antor or Grantor's Agent // (My) (Char)	_	Grai	ature of other or Grantee's Agent	a of the			
Na	me (print) RANDY KAUSCHE, PR		Nam	e (print) RANDALL R KAUSCHE	<u> </u>			
Da	nte & city of signing: Och /113 Ponyag SA	<u> </u>	Date	& city of signing: 0-7 11 13	Tomery WA			
	rjury: Perjury is a class C felony which is punishable by imprisonment				/			
Pe a fi	rjury: Perjury is a class C felony which is punishable by imprisonment in in an amount fixed by the court of not more than five thousant exits.	urs (\$2	Q00.00)), or by both imprisonment and fine (RC	W 9A.20.020 (1C)).			
				ERLS USE ONLY	COUNTY TREASURER			
KL.				_				
-	<u> </u>	JCT	15	2013	2437			

2437 rue



REAL ESTATE EXCISE TAX AFFIDAVIT

when stamped by cashier.

PLEASE TYPE OR PRINT

R PRINT CHAPTER 82.45 RCW – CHAPTER 458-61A WAC when s
THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED
(See back of last page for instructions)

This form is your receipt

	Check box if partial sale of property	L DACK U	1 1451 }	age for ms	Suuci	If multiple	owners, lis	t percentage	of ownership	next to name.
1	Name <u>Donald Koller</u> and Jane Koller			2	Na	me Christine S				
, <u>~</u>				"				218	Place	
SELLER GRANTOR	Mailing Address P.O. Box 72			BUYER GRANTEE	Ma Ma	ailing Address_				
SKA SKA	City/State/Zip Pomeroy, WA 99347			- RAN	Cit	ty/State/Zip	Pasa	O WF	7 980	31
	Phone No. (including area code) 509843-373 2			_ B	Ph	one No. (includi				
3	Send all property tax correspondence to: Same as Buyer/Gr			List all rea	al an	d personal prope	rty tax parc	el account		·
				num	nbers	- check box if p	ersonal prop	perty	List as	ssessed value(s)
Nam				<u>1-051-0</u>	09-00	02-1910				
l	ling Address		- 1							
l	/State/Zip		- 1							
Pnor	ne No. (including area code)		_ [·				
4	Street address of property: 230 Hill Street, Pomeroy, WA	·								
	This property is located in Pomeroy								•••	
	Check box if any of the listed parcels are being segregated if	from ano	ther pa	arcel, are p	part of	f a boundary line	adiustmen	t or parcels	being merged	
	Legal description of property (if more space is needed, yo							=		
	East 10 Feet of Lot 1, all of Lot 2 of Block 9 of Wilson's						01 1110 1111	,		
		, radino		o only or r	Oilic	Sioy.				
	•									
5	Select Land Use Code(s):			7 Li	ist all	l personal pror	nerty (tang	ible and in	ntangible) inc	luded in selling
	11 - Household, single family units				rice.	Larranim brol	, , , , , , , , , , , , , , , , , , , ,	,	mangrote, me	idaed in Seiling
	enter any additional codes:									
(See back of last page for instructions)	WEG		1						
Ic th	is property exempt from property tax per chapter	YES	NO	•						
	6 RCW (nonprofit organization)?	ш	✓							
6		YES	NO	_						
Is thi	is property designated as forest land per chapter 84.33 RCW?		NO ☑	If clai	imin	g an exemption	on, list W	AC numb	er and reaso	n for exemption:
	s property classified as current use (open space, farm and	Ħ	<u>.</u>	WAC	No.	(Section/Sub	section)	458-61A-2	201(b)(1)	
	ultural, or timber) land per chapter 84.34?	_				r exemption				
Is this	s property receiving special valuation as historical property		✓	Gift	טו ווע	rexemption				
	hapter 84.26 RCW?									
If any	y answers are yes, complete as instructed below.									
	OTICE OF CONTINUANCE (FOREST LAND OR CURR		SE)	Type	of D	ocument Qui	t Claim De	ed		
	 OWNER(S): To continue the current designation as forest ification as current use (open space, farm and agriculture, or 		land	Date of	of D	ocument	1011	7113		
уон г	must sign on (3) below. The county assessor must then dete	rmine if	fthe				<u> </u>	11		0.00
	transferred continues to qualify and will indicate by signing						_	,		
	no longer qualifies or you do not wish to continue the design ification, it will be removed and the compensating or addition					sonal Property				
be du	ne and payable by the seller or transferor at the time of sale. (RCW		E	xem	ption Claime				
	3.140 or RCW 84.34.108). Prior to signing (3) below, you m local county assessor for more information.	ay conta	act				~			
-					г					
Tms	land does does not qualify for continuance.				L	0.0025				
	DEPUTY ASSESSOR	DATE			*De	elinquent Inte				
	(2) NOTICE OF COMPLIANCE (HISTORIC PROPE					4D 11				
NEW	OWNER(S): To continue special valuation as historic p	roperty	' ,	1		*Delinque				
addit	(3) below. If the new owner(s) does not wish to continue ional tax calculated pursuant to chapter 84.26 RCW, sha	e, all ll be due	e and			*O				
payal	ble by the seller or transferor at the time of sale.					*State Techn				
	(3) OWNER(S) SIGNATURE				*A	ffidavit Proce	=			
						,	Total Due	e \$	· · · · · · · · · · · · · · · · · · ·	10.00
	PRINT NAME			[A	MINIMIM O	ነሮ ፍተል ሰበ ነ	IS DIJE IN	EFF/CVANI	MOD TAV
					A	MINIMUM O		NSTRUCTI		//UR IAA
8	I CERTIFY UNDER PENALTY O	FPFRI	II)RV	THAT TH	— — НЕ Б	ORECOING IS	TRIIF AN	ND COPPI	ECT	
Sign	ature of	···	1				LAVEAD	~ CORRI	 . /	/
	ntor or Grantor's Agent <u>Lane Kalle</u>	_	_	Signati Grant e		oi r Grantee's A	gept	Tano.	. Toll	ler
	e (print) Jane Koller		_	Name			No.	KAllo	V)	·
	& city of signing: 10/17/13 Pomer	W 1	_		`•	_	10/10	12 1	Pavania	
שומני	active of signing.	υÄ	.	Date &	e city	of signing: _	10/17	(12 <u>'</u>	Pomen	<u> </u>
Perju	ry: Perjury is a class C felony which is punishable by impri	isonmen	t in the	estate cor	oci	onal institution	for a maxii	mum term	of not more th	an five years, or by a



REAL ESTATE EXCISE TAX SUPPLEMENTAL STATEMENT

(WAC 458-61A-304)

This form must be submitted with the Real Estate Excise Tax Affidavit (FORM REV 84 0001A) for claims of tax exemption as provided below. Completion of this form is required for the types of real property transfers listed in numbers 1-3 below. Only the first page of this form needs original signatures.

AUDIT: Information you provide on this form is subject to audit by the Department of Revenue. In the event of an audit, it is the taxpayers' responsibility to provide documentation to support the selling price or any exemption claimed. This documentation must be maintained for a minimum of four years from date of sale. (RCW 82.45.100) Failure to provide supporting documentation when requested may result in the assessment of tax, penalties, and interest. Any filing that is determined to be fraudulent will carry a 50% evasion penalty in addition to any other accrued penalties or interest when the tax is assessed.

PERJURY: Perjury is a class C felony which is punishable by imprisonment in a state correctional institution for a maximum term of not more than five years, or by a fine in an amount fixed by the court of not more than five thousand dollars (\$5,000.00), or by both imprisonment and fine (RCW 9A.20.020 (1C)).

The persons signing below do hereby declare under penalty of p	erjury that the following is true (check appropriate statement):					
1. DATE OF SALE: (WAC 458-61A-306(2))						
I, (print name)	certify that the					
(type of instrument), dated, was deli	ivered to me in escrow by					
(seller's name). NOTE: Agent named here must sign below considered current if it is not more than 90 days beyond the and penalties apply to the date of the instrument. Reasons held in escrow:	e date shown on the instrument. If it is past 90 days, interest					
Signature	Firm Name					
<u> </u>						
taxable. The value exchanged or paid for equity plus the arbelow must be checked. Both Grantor (seller) and Grantee						
Grantor (seller) gifts equity valued at \$ to gra	and the state of t					
NOTE: Examples of different transfer types are provid completing this form and paying your tax.						
"Consideration" means money or anything of value, either delivered, or contracted to be paid or delivered, including property. The term includes the amount of any lien, mortgas secure the purchase price, or any part thereof, or remaining includes the assumption of an underlying debt on the property. A: Gifts with consideration	performance of services, in return for the transfer of real age, contract indebtedness, or other encumbrance, given to unpaid on the property at the time of sale. "Consideration"					
\$ and has rece						
received by grantor is taxable.	received in exchange for property). Any consideration					
	% of total debt of \$ for which grantor (include in this figure the value of any items sideration received by grantor is taxable.					
B: Gifts without consideration						
 There is no debt on the property; Grantor (see No tax is due. 	eller) has not received any consideration towards equity.					
 Grantor (seller) has made and will continue and has not received any consideration towards. 	to make 100% of the payments on total debt of \$rds equity. No tax is due.					
3. Grantee (buyer) has made and will continue to make 100% of the payments on total debt of \$ and has not paid grantor (seller) any consideration towards equity. No tax is due.						
	nde and will continue to make payments from joint account on tee (buyer) has not paid grantor (seller) any consideration					
Has there been or will there be a refinance of the debt?	YES NO (If yes, please call (360) 570-3265 to see if this					
	nor only, please see WAC 458-61A-215 for exemption requirement					
The undersigned acknowledges this transaction may be regarding record-keeping requirements and evasion per	subject to audit and have read the above information					
Tane toller	Jane Toller					
Grantor's Signature	Grantee's Signature					
3. IRS "TAX DEFERRED" EXCHANGE (WAC 458-6						
I, (print name), certi	fy that I am acting as an Exchange Facilitator in transferring					
	C Section 1031, and in accordance with WAC 458-61A-213.					
NOTE: Exchange Facilitator must sign below.						



REAL ESTATE EXCISE TAX AFFIDAVIT

This form is your receipt when stamped by cashier.

This for the second sec

☐ Check box if partial sale of property	If multiple owners, list percentage of ownership next to name.
Name CORI DILLING ET AL,	Name Cathy Herres
TERREY DILLING KIM KURPING	N 232 Columbia Stroct
Mailing Address 10 20 × 1241	Mailing Address P.D. Box 465
Mailing Address 10 BOX 1841 City/State/Zip Lewiston Idaho 83501	Mailing Address P. D. Box 465 City/State/Zip PomeRoy, WA. 99347
Phone No. (including area code) 208-305-1698	Phone No. (including area code) 309-843-6124
	List all real and personal property tax parcel account
Send all property tax correspondence to: Same as Buyer/Grantee	numbers – check box if personal property List assessed value(s)
Name	4-000-00-000-0235 [
Mailing Address	
City/State/Zip	
Phone No. (including area code)	
G. 4.11 G.	
4 Street address of property:	
This property is located in Tunincorporated Garrield	County OR within city of
☐ Check box if any of the listed parcels are being segregated from another p	parcel, are part of a boundary line adjustment or parcels being merged.
Legal description of property (if more space is needed, you may attach	a separate sheet to each page of the affidavit)
1.N. Lat #3 Stentz Spaings Umatilla Natil Forest Pomeroy	
1010 I Lilla of 11 times To	P. LAST
Umatilla Nati Poresi tomeroy	KAnger DISTRICI
Cu	
Select Land Use Code(s): 46	List all personal property (tangible and intangible) included in selling
mt CABIN	price.
enter any additional codes: (See back of last page for instructions)	
YES NO	
Is this property exempt from property tax per chapter	
84.36 RCW (nonprofit organization)?	
6 YES NO	If claiming an exemption, list WAC number and reason for exemption:
Is this property designated as forest land per chapter 84.33 RCW?	It claiming an exemption, fist wAC number and reason for exemption:
Is this property classified as current use (open space, farm and	WAC No. (Section/Subsection)
agricultural, or timber) land per chapter 84.34?	Reason for exemption
Is this property receiving special valuation as historical property	
per chapter 84.26 RCW?	
If any answers are yes, complete as instructed below.	111111111111111111111111111111111111111
(1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE)	Type of Document Bill of Sales Mt CabiN
NEW OWNER(S): To continue the current designation as forest land or classification as current use (open space, farm and agriculture, or timber)	Date of Document 10/15/13
land, you must sign on (3) below. The county assessor must then determine	10 500
if the land transferred continues to qualify and will indicate by signing below	·
If the land no longer qualifies or you do not wish to continue the designation or classification, it will be removed and the compensating or additional taxes	
will be due and payable by the seller or transferor at the time of sale. (RCW	Exemption Claimed (deduct) \$
84.33.140 or RCW 84.34.108). Prior to signing (3) below, you may contact	Taxable Selling Price \$ \frac{42500.00}{}
your local county assessor for more information.	Excise Tax: State \$ 544,0
This land does does not qualify for continuance.	Local \$ 106.25
	*Delinquent Interest: State \$
DEPUTY ASSESSOR DATE	Local \$
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) NEW OWNER(S): To continue special valuation as historic property,	*Delinquent Penalty \$
sign (3) below. If the new owner(s) does not wish to continue, all	Subtotal \$ 650.25
additional tax calculated pursuant to chapter 84.26 RCW, shall be due and payable by the seller or transferor at the time of sale.	*State Technology Fee \$5.00
(3) OWNER(S) SIGNATURE	*Affidavit Processing Fee \$
(6) 6 111 21(6) 213 111 214	*Affidavit Processing Fee \$
PRINT NAME	-
I KINI WAME	A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX
	*SEE INSTRUCTIONS
8 I CERTIFY UNDER PENALTY OF PERJURY	THAT THE FOREGOING IS TRUE AND CORRECT.
Signature of	Signature of
Grantor or Grantor's Agent The Fellen El AL	Grantee or Grantee's Agent Ath Jews
Name (print) ar Lynn Dilbing	Name (print) Cythy Herres
Date & city of signing: 10/22/13 here 15th IN	Date & city of signing: $10-23-2013$
Perjury: Perjury is a class C felony which is punishable by imprisonment	ate attended institution for a maximum term of not more than five years, or b
a fine in an amount fixed by the court of not more than five thousand delars (
(EV 84 0001a (04/30/09) THIS SPACE - TRE	OCTRED 2013 ON

2439

BILL OF SALE

I, Cari Dilling et all; are selling the cabin on Lot #3 in Stentz Springs, South of Pomeroy WA to Cathy Herres. The sale includes the main cabin and all personal belongings left there and all out buildings and personal items in them as well. The purchase price is \$42,500.00.

Date:

Signature

Notary:

NOTARY PUBLIC WILLIAM ON THE OF TO A
Lisa J. Inell - Lewiston, Id 10-15-13

Expires 1-6-18



REAL ESTATE EXCISE TAX AFFIDAVIT REAL ESTATE EXCISE TAX AFFIDAVIT

CHAPTER 82.45 RCW — CHAPTER 458-61A WAC

When stamped by cashier.

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

(See back of last page for instructions)

The check box if partial sale of property

This form is your receipt when it is to property

This form is your receipt when it your rece Check box if partial sale of property Name E. PEARL HALL Name DANIEL M. MURRAY Mailing Address PO BOX 18706 Mailing Address PO BOX 4840 City/State/Zip_SPOKANE, WA 99228-0706 City/State/Zip PASCO, WA 99302-4840 Phone No. (including area code)_ Phone No. (including area code) List all real and personal property tax percel account numbers – check box if personal property Send all property tax correspondence to: Same as Buyer/Grantee 2-010-42-034-3050 Mailing Address City/State/Zip Phone No. (including area code)_ Street address of property: This property is located in Garfield County \square Check box if any of the listed parcels are being segregated from a larger parcel. Legal description of property (if more space is needed, you may attach a separate sheet to each page of the affidavit) MHT-1071: THE NORTHEAST QUARTER OF THE SOUTHEAST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 34, TOWNSHIP 10 NORTH, RANGE 42 EAST, W.M. Select Land Use Code(s): List all personal property (tangible and intangible) included in selling price. enter any additional codes (See back of last page for instructions) Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)? YES NO If claiming an exemption, list WAC number and reason for exemption: Is this property designated as forest land per chapter 84.33 RCW? Ø Is this property classified as current use (open space, farm and WAC No. (Section/Subsection) ◩ agricultural, or timber) land per chapter 84.34? Reason for exemption Is this property receiving special valuation as historical property per chapter 84.26 RCW? ☑ If any answers are yes, complete as instructed below. (1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE) Type of Document STATUTORY WARRANTY DEED NEW OWNER(S): To continue the current designation as forest land or Date of Document 4/23/13 classification as current use (open space, farm and agriculture, or timber) land, you must sign on (3) below. The county assessor must then determine if the land transferred continues to qualify and will indicate by signing below. 15,900.00 Gross Selling Price \$ If the land no longer qualifies or you do not wish to continue the designation or classification, it will be removed and the compensating or additional taxes will be due and payable by the seller or transferor at the time of sale. (RCW 84.33.140 or RCW 84.34.108). Prior to signing (3) below, you may contact the country assessment for moraliferments. *Personal Property (deduct) \$_ Exemption Claimed (deduct) \$_ 15,900.00 Taxable Selling Price \$_ your local county assessor for monainfor Excise Tax : State \$ 203.52 and does does not qualify for continuance 0.0025 Local \$ 39.75 Christian Krush D24-201 *Delinquent Interest: State \$_ 2.0 y Local \$_ <u>.4</u>6 (2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) 48.65 *Delinquent Penalty \$ NEW OWNER(S): To continue special valuation as historic property, sign (3) below. If the new owner(s) does not wish to continue, all additional tax calculated pursuant to chapter 84.26 RCW, shall be due and payable by the seller or transferor at the time of sale. 294.3624321 Subtotal \$ 5.00 *State Technology Fee \$_ *Affidavit Processing Fee \$_ (3) OWNER(S) SIGNATURE 299.34248.27 CKS x 2 Total Due \$__ PRINT NAME

A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX *SEE INSTRUCTIONS

I CERTIFY UNDER	PENALTY OF PERJURY THAT	THE FOREGOING IS TRUE	AND CORREGE.	100 00
Signature of Grantor or Grantor's Agent	Soft all Signs	ature of Grantes's Agent _/	hall l	1 flr
Name (print) E. PEARL HALL	Name Name	e (print) DANIEL M. MURI	MY	
Date & city of signing: 10/15//3	50.650	we gity of signing.	ya is las	80
Perjury: Perjury is a class C felony which is punis a fine in an amount fixed by the court of not more	shable by imprisonment in the state of than five thousand dollars (\$5,000.0	correctional institution for a r (i), or by both imprisonment	akimum term of not n and fine (RCW 9A.20.	nore than five years, or by
EV 84 0001ac (a) (2/1/08)		TREASTRER'S USE		COUNTY TREASURE

REV 84 0001ae (a) (2/1/08)

KAREN ROOSEVELT **GARFIELD COUNTY TREASURER** 2440 NE

COUNTY TREASURER



REAL ESTATE EXCISE TAX AFFIDAVIT

CHAPTER 82.45 RCW - CHAPTER 458-61A WAC

This form is your receipt when stamped by cashier.

PLEASE TYPE OR PRINT THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED

Name Quality Loan Service Corporation of Washington		2	lame JPMorgan Chase Bank, Nation	al Association	
<u> </u>	_	, [] -			
Mailing Address 2141 5th Ave City/State/Zip San Diego, CA 92101	— V	- 2	Mailing Address 800 Brooksedge Boul		
City/State/Zip San Diego, CA 92101	🖫	GR E	City/State/Zip Westerville, OH 43081		
Phone No. (including area code) (619) 645-7711			Phone No. (including area code)		
Send all property tax correspondence to: Same as Buyer/Grantee	n	numbe	and personal property tax parcel account rs – check box if personal property	List ass	essed value(s)
lame	<u>A.P.</u>	.N.: 1-	070-31-038-1300		
failing Address					
ity/State/Zip					
hone No. (including area code)					
Street address of property: 1245 MAIN ST. POMEROY, WA 99347					
This property is located in Garfield County					
Check box if any of the listed parcels are being segregated from another p	parcel, a	are par	of a boundary line adjustment or parcel	s being merged.	
Legal description of property (if more space is needed, you may attach					
That part of the Southeast quarter of the Southeast quarter of Section described as follows: Beginning at a point 180 feet East of the South thence East on the North line of Main Street 70 feet; thence North or the South half of the Southeast quarter of said Section 31; thence We said Section 31, a distance of 70 feet; thence South to the place of be	theast c n a line /est on	corner e paral the N	of Block 4 of Day's Addition to the Cl lel with the East line of said Block 4 t	ty of Pomerby; o the North line	UI
Select Land Use Code(s):	7	List	all personal property (tangible and	intangible) inc	uded in selling
Select Land Use Code(s): 11 - Household, single family units] 🗂	pric		2 , .	-
enter any additional codes:	-	- 0-			
(See back of last page for instructions)					
YES NO Sthis property exempt from property tax per chapter 4.36 RCW (nonprofit organization)?	/				
YES NO	o If	`clain	ning an exemption, list WAC num	ber and reaso	n for exemption:
s this property designated as forest land per chapter 84.33 RCW?]		_		
s this property classified as current use (open space, farm and gricultural, or timber) land per chapter 84.34?	- R	eason	No. (Section/Subsection) <u>458-61A</u> for exemption		
is this property receiving special valuation as historical property er chapter 84.26 RCW?		orecto: 20100	sure Deed of Trust to JPMorgan Cha 153)	se Bank, Natio	nal Association
if any answers are yes, complete as instructed below.			Trustee's Deed Upon	Sale	
1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE) NEW OWNER(S): To continue the current designation as forest land or classification as current use (open space, farm and agriculture, or timber) land			f Document Trustee's Deed Upon 10/23/13	Olic	
you must sign on (3) below. The county assessor must then determine if the	;		Gross Selling Price \$	80,	750.00
and transferred continues to qualify and will indicate by signing below. If the	.е		December (deduct) \$		0.00
and no longer qualifies or you do not wish to continue the designation or classification, it will be removed and the compensating or additional taxes with	ill		Personal Property (deduct) \$ temption Claimed (deduct) \$	80	750.00
be due and payable by the seller or transferor at the time of sale. (RCW)		E			0.00
14.33.140 or RCW 84.34.108). Prior to signing (3) below, you may contact			Taxable Selling Price \$		
your local county assessor for more information.			Excise Tax : State \$		
This land ☐does ☐does not qualify for continuance.			0.0025 Local \$		
OPDITE ACCUSAGO	-		*Delinquent Interest: State \$		
DEPUTY ASSESSOR DATE					
			*Delinquent Penalty \$		
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) NEW OWNER(S): To continue special valuation as historic property.			A		0.00
(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) NEW OWNER(S): To continue special valuation as historic property, sign (3) helow If the new owner(s) does not wish to continue, all	nd		Subtotal \$		
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(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) NEW OWNER(S): To continue special valuation as historic property, sign (3) below. If the new owner(s) does not wish to continue, all additional tax calculated pursuant to chapter 84.26 RCW, shall be due ar payable by the seller or transferor at the time of sale. (3) OWNER(S) SIGNATURE PRINT NAME I CERTIFY UNDER PENALTY OF PERJUE Signature of Grantor or Grantor's Agent Name (print) Christina Contreras Date & city of signing: OCT 2.3 2013	RY THA S G	Signat Grant Name Date &	*State Technology Fee \$* *Affidavit Processing Fee \$ Total Due \$ A MINIMUM OF \$10.00 IS DUE *SEE INSTRUCTION IE FOREGOING IS TRUE AND COFF ore of Grantee's Agent (print) Jacqueline Nograles city of signing:OCT2_3_2	IN FEE(S) ANOTHORS RRECT.	5.00 5.00 10.00 10.00
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KAREN ROOSEVELT

When recorded mail to:

JP Morgan Chase Bank, N.A. 800 Brooksedge Boulevard Westerville, OH 43081 . I APOTRER UMaria kio kan riddio arddio arddio and kan dau'r benn della addio ar ar ar ar

TS No.: WA-12-537127-SH

Space above this line for recorders use

Order No.: **120390942-WA-GSO** APN No.: **1-**070-31-038-1300

Assignment of Deed of Trust

For value received, Mann Mortgage LLC d/b/a Westcorp Mortgage Group hereby grants, assigns, and transfers to JPMorgan Chase Bank, National Association

All beneficial interest and all rights accrued or to accrue under that certain Deed of Trust dated 3/12/2010 executed by HEATHER M. HAYNES, as Trustor(s) to GARFIELD COUNTY TITLE COMPANY, as Trustee and recorded as Instrument No. 20100153, on 3/22/2010, of Official Records, in the office of the County Recorder of GARFIELD County, WA..

Said Deed of Trust encumbers the real property fully described as:

That part of the Southeast quarter of the Southeast quarter of Section 31, Township 12 North, Range 42 E.W.M., more particularly described as follows: Beginning at a point 180 feet East of the Southeast corner of Block 4 of Day's Addition to the City of Pomeroy; thence East on the North line of Main Street 70 feet; thence North on a line parallel with the East line of said Block 4 to the North line of the South half of the Southeast quarter of said Section 31; thence West on the North line of said South half of the Southeast quarter of said Section 31, a distance of 70 feet; thence South to the place of beginning.

And more commonly known as: 1245 MAIN ST., POMEROY, WA 99347

20100153 Non Nor 22 15:27:52 POT 2010 Filling Fee: 17:00 Seriold County We Recorder Fager 16

THE END OF THE PROPERTY OF THE

After Recording Return To: Hann Hortgage, LLC Attn: Post Clusing 1220 Whitefish Stage Road Kalispel; MT 59901

GASTOOS CA-TOOS [Space Above This Line For Recording Data]
Property Tex ID: 1-070-31-038-1300 Loss Number: 1116860
Abbreviated Legal Description: 5E1/45E1/4 S31 T12N R42E, Block 4, Day's Addition

DEED OF TRUST

DEFINITIONS

Words used in multiple sections of this document are defined below and other words are defined in Sections 5, 11, 13, 15, 20 and 21. Certain rules regarding the usage of words used in this document are also provided in Section 15.

(A) "Security Instrument" means this document, which is dated Narch 12, 2010, together with all Riders to this document.

(B) "Borrower" is Heather M. Haynes.

Borrower is the trustor under this Security Instrument.

(C) "Lander" is Mann Mortgage, LLC. Lander is a State Corporation organized and existing under the laws of Montana. Lender's address is 24? Thain Road, 104, Lewiston, ID 83501 Lender is the beneficiary under this Security Instrument.

(D) "Trustee" is Garfield County Title Company.

wanted DX Sugar T of 14 pages)

NGTON - Sergin Family - Family Mass/Fredicts Marc (INSPORTS INSTRUMENT) - Family Installer

(P) "RESPA" meens the Real Estate Settlement Procedures Act (12 U.S.C. §2601 et seq.) and its implementing requisition. Regulation X (24 C.F.R. Part 3500), as they might be amended from time to time, or any additional or successor legislation or requision that governs the same subject metre. As used in this Security Instrument, "RESPA" refers to all requirements and restrictions that are imposed in regard to a "federally related mortgage loan" even if the Loan does not qualify as a "federally related mortgage loan" under RESPA.

[Q] "Successor in Interest of Borrower" means any party that has taken title to the Property, whether or not that party has assumed Borrower's obligations under the Note and/or this Security Instrument.

TRANSFER OF RIGHTS IN THE PROPERTY

This Security instrument secures to Lander: (i) the repayment of the Loen, and all renewals, extensions and modifications of the Note; and (ii) the performance of Borrower's covariants and agreements under this Security instrument and the Note. For this purpose, Borrower irrevocably grants and conveys to Trustee, in trust, with power of sele, the following described property located in the

COUNTY OF GARFIELD

See attached EXHIBIT A

which currently has the address of

1245 Main Street Pomeroy, Washington 99347 ("Propeny Address"):

TOGETHER WITH all the improvements now or hereafter erected on the property, and all sessments, appurtenances, and fixtures now or hereafter a part of the property. All replacements and additions shall also be covered by this Security Instrument. All of the foregoing is referred to in this Security Instrument as the "Property."

BORROWER COVENANTS that Borrower is lawfully seized of the setate hareby conveyed and has the right to grant and convey the Property and that the Property is unencumbered, except for encumbrances of record. Borrower warrants and will defend generally the little to the Property against as claims and demands, subject to any encumbrances of record.

THIS SECURITY INSTRUMENT combines uniform covenants for national use and non-uniform ranks with limited variations by jurisdiction to constitute a uniform security instrument covering real

The state of tioner 2 of 14 page