

REAL ESTATE EXCISE TAX AFFIDAVIT

PLEASE TYPE OR PRINT

CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

This form is your receipt
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

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

1 SELLER GRANTOR	Name <u>Sammy Cron</u>	2 BUYER GRANTEE	Name <u>Sammie Elaine Preble</u>
	Mailing Address <u>P.O. Box 547</u>		c/o <u>Sammy Cron</u>
	City/State/Zip <u>Pomeroy WA 99347</u>		Mailing Address <u>P.O. Box 547</u>
	Phone No. (including area code) <u>(509) 843-2383</u>		City/State/Zip <u>Pomeroy WA 99347</u>
3 Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee Name _____ Mailing Address _____ City/State/Zip _____ Phone No. (including area code) _____		List all real and personal property tax parcel account numbers – check box if personal property <u>1-053-14-0005-1040</u> <input checked="" type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/>	
		List assessed value(s) _____ _____ _____	

4 Street address of property: 1808 Columbia St.

This property is located in Pomeroy

☐ Check box if any of the listed parcels are being segregated from another 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)
Lot 5 in Block 14 of Mulkey's Addition to the City of Pomeroy.

<p>5 Select Land Use Code(s): <u>11 - Household, single family units</u> enter any additional codes: _____ (See back of last page for instructions)</p> <p>Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>6</p> <p>Is this property designated as forest land per chapter 84.33 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>Is this property receiving special valuation as historical property per chapter 84.26 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If any answers are yes, complete as instructed below.</p> <p>(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, 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. 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 your local county assessor for more information.</p> <p>This land <input type="checkbox"/> does <input type="checkbox"/> does not qualify for continuance.</p> <p>_____ DEPUTY ASSESSOR</p> <p>_____ DATE</p> <p>(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 and payable by the seller or transferor at the time of sale.</p> <p>(3) OWNER(S) SIGNATURE _____ PRINT NAME</p>	<p>7 List all personal property (tangible and intangible) included in selling price.</p> <p>If claiming an exemption, list WAC number and reason for exemption: WAC No. (Section/Subsection) <u>458-61A-201 (8)(1)</u> Reason for exemption <u>Deed of Gift</u></p> <p>Type of Document <u>Quit Claim Deed</u> Date of Document <u>11/9/12</u></p> <table> <tr> <td>Gross Selling Price</td> <td>\$ _____</td> </tr> <tr> <td>*Personal Property (deduct)</td> <td>\$ _____</td> </tr> <tr> <td>Exemption Claimed (deduct)</td> <td>\$ _____</td> </tr> <tr> <td>Taxable Selling Price</td> <td>\$ _____ 0.00</td> </tr> <tr> <td>Excise Tax : State</td> <td>\$ _____ 0.00</td> </tr> <tr> <td><u>0.0025</u> Local</td> <td>\$ _____ 0.00</td> </tr> <tr> <td>*Delinquent Interest: State</td> <td>\$ _____</td> </tr> <tr> <td>Local</td> <td>\$ _____</td> </tr> <tr> <td>*Delinquent Penalty</td> <td>\$ _____</td> </tr> <tr> <td>Subtotal</td> <td>\$ _____ 0.00</td> </tr> <tr> <td>*State Technology Fee</td> <td>\$ _____ 5.00</td> </tr> <tr> <td>*Affidavit Processing Fee</td> <td>\$ _____ 5.00</td> </tr> <tr> <td>Total Due</td> <td>\$ _____ 10.00</td> </tr> </table> <p>A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX *SEE INSTRUCTIONS</p>	Gross Selling Price	\$ _____	*Personal Property (deduct)	\$ _____	Exemption Claimed (deduct)	\$ _____	Taxable Selling Price	\$ _____ 0.00	Excise Tax : State	\$ _____ 0.00	<u>0.0025</u> Local	\$ _____ 0.00	*Delinquent Interest: State	\$ _____	Local	\$ _____	*Delinquent Penalty	\$ _____	Subtotal	\$ _____ 0.00	*State Technology Fee	\$ _____ 5.00	*Affidavit Processing Fee	\$ _____ 5.00	Total Due	\$ _____ 10.00
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Total Due	\$ _____ 10.00																										

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Grantor or Grantor's Agent <u>Rich Burns</u>	Signature of Grantee or Grantee's Agent <u>Tina Warren</u>
Name (print) <u>Rich Burns</u>	Name (print) <u>Tina Warren</u>
Date & city of signing: <u>11/29/2012</u>	Date & city of signing: <u>11/29/2012</u>

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 (1C)).

PAID
NOV 29 2012

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

1. ☒ 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 of _____ and 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? ☐ YES ☐ NO

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.

Grantor's Signature

x _____
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.

Exchange Facilitator's Signature

REAL ESTATE EXCISE TAX AFFIDAVIT

CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

2271

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PLEASE TYPE OR PRINT

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 percentage of ownership next to name.

1 SELLER GRANTOR	Name <u>Helen J. Perry, a single woman</u>	2 BUYER GRANTEE	Name <u>Helen J. Perry and Gregory Dean Perry, joint tenants with right of survivorship</u>
	Mailing Address <u>P.O. Box 353</u>		Mailing Address <u>P.O. Box 353</u>
	City/State/Zip <u>Pomeroy, WA 99347</u>		City/State/Zip <u>Pomeroy, WA 99347</u>
	Phone No. (including area code) _____		Phone No. (including area code) _____
3	Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee	List all real and personal property tax parcel account numbers – check box if personal property	
Name _____		List assessed value(s)	
Mailing Address _____		1 058 01 00E 1020 000 <input type="checkbox"/> \$46,128.00	
City/State/Zip _____		1 051 26 001 3250 000 <input type="checkbox"/> \$ 1,925.00	
Phone No. (including area code) _____			

4 Street address of property: 391 South 7th Street, Pomeroy, WA 99347

This property is located in Pomeroy

☐ Check box if any of the listed parcels are being segregated from another 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)

Lot E of Darby's Addition to the City of Pomeroy, and a portion of Lot 1 in Block 26, of Wilson's Addition to the City of Pomeroy. All more particularly described as follows: Beginning at the Southwest corner of Lot E, thence northerly on the westerly line of said Lot E and said Lot 1, 80 feet; thence easterly at a right angle 60 feet to the East line of said Lot 1; thence southerly on the easterly line of said Lots 1 and E, respectively, to the North line of Arlington Street; thence West on South line of said Lot E to the place of beginning.

5	Select Land Use Code(s): <u>11 - Household, single family units</u> enter any additional codes: _____ (See back of last page for instructions)	7	List all personal property (tangible and intangible) included in selling price.
	Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		If claiming an exemption, list WAC number and reason for exemption: WAC No. (Section/Subsection) <u>458-61A-204(1)</u> Reason for exemption <u>Creation of joint tenancy with right of survivorship with no consideration given.</u>
6	Is this property designated as forest land per chapter 84.33 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Is this property receiving special valuation as historical property per chapter 84.26 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If any answers are yes, complete as instructed below. (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, 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. 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 your local county assessor for more information. This land <input type="checkbox"/> does <input type="checkbox"/> does not qualify for continuance.		Type of Document <u>Statutory Warranty Deed</u> Date of Document <u>9/11/2012</u> Gross Selling Price \$ _____ 0.00 *Personal Property (deduct) \$ _____ Exemption Claimed (deduct) \$ _____ Taxable Selling Price \$ _____ 0.00 Excise Tax : State \$ _____ 0.00 <u>0.0025</u> Local \$ _____ 0.00 *Delinquent Interest: State \$ _____ Local \$ _____ *Delinquent Penalty \$ _____ Subtotal \$ _____ 0.00 *State Technology Fee \$ _____ 5.00 *Affidavit Processing Fee \$ _____ 5.00 Total Due \$ _____ 10.00
DEPUTY ASSESSOR _____ DATE _____		A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX *SEE INSTRUCTIONS	
(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 and payable by the seller or transferor at the time of sale. (3) OWNER(S) SIGNATURE _____ PRINT NAME			

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Grantor or Grantor's Agent <u>Helen J. Perry</u>	Signature of Grantee or Grantee's Agent <u>Helen J. Perry</u>
Name (print) <u>Helen J. Perry</u>	Name (print) <u>Helen J. Perry and Gregory Dean Perry</u>
Date & city of signing: <u>9/11/12 Pomeroy</u>	Date & city of signing: <u>9/11/12 Pomeroy</u>

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 (1C)).



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(See back of last page for instructions)

☐ Check box if partial sale of property

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

1 SELLER GRANTOR	Name <u>Steven L. Brown as Trustee fbo Mary E. Brown Decedents Trust UA January 9, 2012</u>	2 BUYER GRANTEE	Name <u>Teresa E. Eller</u>	
	Mailing Address <u>386 Hwy 12 E</u>		Mailing Address <u>10211 E Jamie Lane</u>	
	City/State/Zip <u>Pomeroy, WA 99347</u>		City/State/Zip <u>Spokane Valley, WA 99206</u>	
	Phone No. (including area code) _____		Phone No. (including area code) _____	
3	Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee		List all real and personal property tax parcel account numbers – check box if personal property	List assessed value(s)
	Name _____		<u>2-012-43-008-3000</u> <input type="checkbox"/>	<u>348,446</u>
	Mailing Address _____		<u>2-012-43-017-1000</u> <input type="checkbox"/>	
	City/State/Zip _____		<input type="checkbox"/>	
	Phone No. (including area code) _____		<input type="checkbox"/>	

4 Street address of property: _____

This property is located in ☐ unincorporated Garfield County OR within ☐ city of _____☐ Check box if any of the listed parcels are being segregated from another 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)

The SW 1/4, and The SE 1/4 of the NW 1/4, in Section 8, and the NE 1/4 and the E 1/2 of the NW 1/4 in Section 17 all in Township 12N, Range 43, E.W.M.Except an easement being a strip of land 10 feet in width adjacent to and lying westerly and southerly of Bell Plain Road and also a 10-foot wide strip of land for a temporary construction easement and being a portion of the SW 1/4 of Section 8 T12N, R43 E.W.M.5 Select Land Use Code(s):
83
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 ☐6
Is this property designated as forest land per chapter 84.33 RCW? YES ☐ NO ☒
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? ☒ ☐
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)

NEW OWNER(S): To continue the current designation as forest land or 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. 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 your local county assessor for more information.

This land ☒ does ☐ does not qualify for continuance.Keshia Vordobuegg 12/5/12
DEPUTY ASSESSOR DATE

(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 and payable by the seller or transferor at the time of sale.

(3) OWNER(S) SIGNATURE

Teresa E. Eller

PRINT NAME

Teresa E. Eller

7 List all personal property (tangible and intangible) included in selling price.

N/A

If claiming an exemption, list WAC number and reason for exemption:

WAC No. (Section/Subsection) 458-61A-202Reason for exemption Inheritance or Devise - Distribution upon Termination of Decedents TrustType of Document Warranty DeedDate of Document Dec. 5, 2012

Gross Selling Price \$ _____

*Personal Property (deduct) \$ _____

Exemption Claimed (deduct) \$ _____

Taxable Selling Price \$ _____

Excise Tax : State \$ _____

Local \$ _____

*Delinquent Interest: State \$ _____

Local \$ _____

*Delinquent Penalty \$ _____

Subtotal \$ _____

*State Technology Fee \$ 5.00*Affidavit Processing Fee \$ 5.00Total Due \$ 10.00A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX
*SEE INSTRUCTIONS

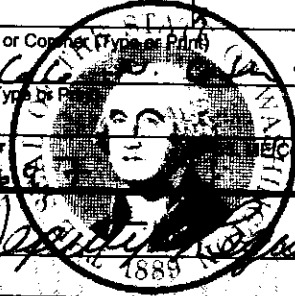
8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Grantor or Grantor's Agent Steven L BrownName (print) Steven L BrownDate & city of signing: 12-05-12 PomeroySignature of Grantee or Grantee's Agent Teresa E. EllerName (print) Teresa E. EllerDate & city of signing: 12-05-12 Spokane Valley

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 (1C)).

STATE OF WASHINGTON DEPARTMENT OF HEALTH

Mary Elizabeth Brown				April 28, 2011	
3. Sex (M/F) Female	4a. Age - Last Birthday 77	4b. Under 1 Year Months Days	4c. Under 1 Day Hours Minutes	5. Social Security Number 537-32-4013	6. County of Death Garfield
7. Birthdate Mar. 29, 1934	8a. Birthplace (City, Town, or County) Des Moines	8b. (State or Foreign Country) Iowa	9. Decedent's Education High School Graduate		
10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify. No		11. Decedent's Race(s) White		12. Was Decedent ever in U.S. Armed Forces? No	
13a. Residence: Number and Street (e.g., 624 SE 5 th St.) (Include Apt. No.) 52 Fair Grounds Road				13b. City or Town Pomeroy	
13c. Residence: County Garfield	13d. Tribal Reservation Name (if applicable) N/A	13e. State or Foreign Country Washington	13f. Zip Code + 4 99347	13g. Inside City Limits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk	
14. Estimated length of time at residence. 48 years	15. Marital Status at Time of Death Married	16. Surviving Spouse's Name (Give name prior to first marriage) Robert Allen Brown			
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED). Homemaker			18. Kind of Business/Industry (Do not use Company Name) Own Home		
19. Father's Name (First, Middle, Last, Suffix) William H. Poe			20. Mother's Name Before First Marriage (First, Middle, Last) Evelyn West		
21. Informant's Name Robert A. Brown	22. Relationship to Decedent Husband	23. Mailing Address: Number and Street or RFD No. City or Town State Zip 52 Fair grounds Road - Pomeroy, Washington 99347			
24. Place of Death, if Death Occurred In a Hospital: Emergency Room			24. Place of Death, if Death Occurred Somewhere Other than a Hospital:		
25. Facility Name (If not a facility, give number & street or location) Garfield County Memorial Hospital			26a. City, Town, or Location of Death Pomeroy	26b. State WA	27. Zip Code 99347
28. Method of Disposition Burial	29. Place of Final Disposition (Name of cemetery, crematory, other place) Pomeroy City Cemetery		30. Location-City/Town, and State Pomeroy, WA. 99347		
31. Name and Complete Address of Funeral Facility Richardson-Brown Funeral Home - 750 Columbia St. Pomeroy, WA 99347			32. Date of Disposition May 4, 2011		
33. Funeral Director Signature X <i>Jerry Barton</i>					
34. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Add additional lines if necessary. IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. <i>Cardiac Arrest</i> Interval between Onset & Death <i>1 hour</i> Due to (or as a consequence of): b. <i>Massive Pulmonary Embolism</i> Interval between Onset & Death <i>5 days 1 hr</i> Due to (or as a consequence of): c. <i>DVT</i> Interval between Onset & Death <i>5 days</i> Due to (or as a consequence of): d. Interval between Onset & Death					
35. Other significant conditions contributing to death but not resulting in the underlying cause given above				36. Autopsy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	37. Were autopsy findings available to complete the Cause of Death? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
38. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Undetermined <input type="checkbox"/> Suicide <input type="checkbox"/> Pending		39. If female <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days before death <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year		40. Did tobacco use contribute to death? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
41. Date of Injury (mm/dd/yyyy)	42. Hour of Injury (24hrs)	43. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)		44. Injury at Work? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
45. Location of Injury: Number & Street: Apt No. City or Town: County: State: Zip Code + 4:					
46. Describe how injury occurred				47. If transportation injury, specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other (Specify)	
48a. Certifying Physician - To the best of my knowledge, death occurred at the time, date, and place and due to the cause(s) and manner stated. X <i>John Mayfield</i>			48b. Medical Examiner/Coroner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.		
49. Name and Address of Certifier (Physician, Medical Examiner or Coroner) (Type & Print) <i>John Mayfield</i>			50. Hour of Death (24hrs) 2024		
51. Name and Title of Attending Physician if other than Certifier (Type & Print)			52. Date Signed (mm/dd/yyyy) 05/02/2011		
53. Title of Certifier <i>P.D.</i>	54. License Number 108468	55. Coroner File Number		56. Was case referred to ME/Coroner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
57. Registrar Signature <i>Stacy Chouner, Deputy Registrar</i>				58. Date Received (mm/dd/yyyy) 05/02/2011	
59. Amendments					



DOH 01-003 (5/96)

THIS IS A CERTIFIED COPY OF THE RECORD ON FILE WITH CENTER FOR HEALTH STATISTICS. CERTIFIED COPIES MUST HAVE THE OFFICIAL SEAL.

4
FILED

JUN 21 2012
M. J. JAMES
COUNTY CLERK
GARFIELD COUNTY, WASH.

THE DOCUMENT TO WHICH THIS CERTIFICATE IS ATTACHED IS A
FULL, TRUE AND CORRECT COPY OF THE ORIGINAL ON FILE
AND OF RECORD IN MY OFFICE.

DATED THIS 5th DAY OF December, 2012

ATTEST: Terrilee Cox
County Clerk and Clerk of the Superior Court of the
State Of Washington, in and for the County of Garfield.

SUPERIOR COURT OF WASHINGTON FOR GARFIELD COUNTY

IN THE MATTER OF THE ESTATE)
OF ROBERT A. BROWN,) NO. 12-4-00004-7
)
Deceased.) LETTERS TESTAMENTARY
)

STATE OF WASHINGTON)
)ss.
County of Garfield)

WHEREAS, the Last Will and Testament of ROBERT A. BROWN, deceased,
was, on June 21st, 2012, duly exhibited, proven, and recorded in our Superior Court;
and, whereas, it appears in and by said Will that STEVEN L. BROWN was appointed
executor thereon, and whereas, said STEVEN L. BROWN duly qualified, as such.

NOW, THEREFORE, KNOW ALL MEN BY THESE PRESENTS, that we
hereby authorize said STEVEN L. BROWN to execute said Will according to law.

WITNESS my hand and the seal of said Court this 21st day of June 2012.

Terrilee Cox
CLERK OF SAID SUPERIOR COURT

By: M. J. James
DEPUTY

FILED

JUN 22 2011

Jessie Cox
COUNTY CLERK
GARFIELD COUNTY, WASH.

THE DOCUMENT TO WHICH THIS CERTIFICATE IS ATTACHED IS A
FULL, TRUE AND CORRECT COPY OF THE ORIGINAL ON FILE
AND OF RECORD IN MY OFFICE.

DATED THIS 31st DAY OF January 2012

ATTEST: [Signature]
County Clerk and Clerk of the Superior Court of the
State Of Washington, in and for the County of Garfield.

SUPERIOR COURT OF WASHINGTON FOR GARFIELD COUNTY

IN THE MATTER OF THE ESTATE)
OF MARY E. BROWN,) NO. 11-4-00010-3
Deceased.) LETTERS TESTAMENTARY

STATE OF WASHINGTON)
County of Garfield)ss.

WHEREAS, the Last Will and Testament of MARY E. BROWN, deceased, was,
on June 20th, 2011, duly exhibited, proven, and recorded in our Superior Court; and,
whereas, it appears in and by said Will that ROBERT A. BROWN was appointed
executor thereon, and whereas, said ROBERT A. BROWN duly qualified, as such.

NOW, THEREFORE, KNOW ALL MEN BY THESE PRESENTS, that we
hereby authorize said ROBERT A. BROWN to execute said Will according to law.

WITNESS my hand and the seal of said Court this 22nd day of June 2011.

[Signature]
CLERK OF SAID SUPERIOR COURT

By: _____
DEPUTY

FILED
JUN 20 2011
COUNTY CLERK
SPRINGFIELD COUNTY, WASH.

Last Will and Testament of

MARY E. BROWN

I, MARY E. BROWN, of legal age, do hereby make, publish and declare this to be my Last Will and Testament, and I hereby revoke all former Wills and Codicils made by me.

ARTICLE 1.

FAMILY

1.1 My immediate family consists of my husband, ROBERT A. BROWN, hereinafter called "my spouse," and our children, DEAN S. BROWN II, STEVEN L. BROWN and TERESA E. ELLER, hereinafter called "my children."

ARTICLE 2.

DEBTS, EXPENSES AND TAXES

2.1 Except as otherwise provided herein, I direct my Personal Representative to pay those of my just debts and funeral expenses as are required to be paid by law and to pay the expenses of probate as soon as practicable after my death. I further direct that such debts and expenses be paid from the residue of my estate. If any item of property of my estate is subject to a mortgage, deed of trust, security agreement, lien or other encumbrance, the legatee or devisee taking such property shall take it subject to such encumbrance and shall not be entitled to have the obligation secured thereby paid out of my

Mary E Brown

was acquired by my spouse as my spouse's separate property, and all policies of property or liability insurance covering such property.

3.2 In the event my spouse survives me by five months, I give, devise and bequeath all of the rest, residue and remainder of my property to my spouse.

3.3 In addition to any disclaimer rights conferred by law, I hereby authorize my spouse to disclaim, in whole or in part, any property, interest in property, right, privilege or power granted to or passing to my spouse by reason of my death, whether under this Will or otherwise. Any such disclaimer shall be made in writing in conformance with the applicable law and prior to the date a federal estate or state inheritance or estate tax return is required to be filed for my estate, excluding extensions. In the event of any such disclaimer, I give, devise and bequeath the property, interest, right, privilege or power disclaimed to my trustee named in Article 4, in trust, upon the terms and conditions set forth therein.

ARTICLE 4.

TRUST

4.1 Establishment of Trust. In the event of a disclaimer by my spouse pursuant to the terms of Article 3, or if my spouse does not survive me as elsewhere provided herein and property passes to this trust under the terms of Article 5, the same shall be received, administered and distributed by my trustee named herein, hereinafter called "Trustee," in trust, however, upon the following terms and conditions.

Mary E Brown

4.2 Purpose. The purpose of this trust shall be to provide for the reasonable care, support and maintenance of my spouse until my spouse's death and thereafter to provide for the reasonable care, support, welfare and education of the children of any of my deceased children and to protect them from mismanagement and improvidence, until each receives his or her distributive share of my trust estate.

4.3 Term. The term of this trust shall be for the lifetime of my spouse, and thereafter until all of the corpus is distributed under the terms hereof.

4.4 Distributions To Spouse.

4.4.1 Income. The net income of this trust shall be paid to my spouse until my spouse's death, in such amounts and at such intervals as Trustee may determine, but not less frequently than annually.

4.4.2 Principal. Trustee may, in Trustee's sole discretion, distribute principal of this trust to my spouse according to the purpose of this trust until my spouse's death, subject to the limitations of Section 4.9.2 following. In making such distributions, Trustee shall take into consideration, to the extent Trustee deems advisable, other income or resources of my spouse known to Trustee.

4.5 Distributions after Death of Spouse.

4.5.1 Division of Trust. After my spouse's death the trust shall be divided into shares, one share in the name of each living child and one share in the name of each deceased child who has then living a child or children (my "grandchildren"). If property passes to this trust under other provisions of this Will, the share for each of my grandchildren passing to this trust shall be maintained as a separate trust share.

Mary E. Brown

my living children and one share for each deceased child who has a child or children then living. The share for each of my living children shall be distributed to him or her. The share for each deceased child shall be consolidated with such child's trust share otherwise provided for herein and administered and distributed therewith. In the event any grandchild for whom a share has been established under this Article 4 dies prior to final distribution of said share, such grandchild's share shall be consolidated with the trust shares for his or her brother(s) and/or sister(s) and administered and distributed therewith; provided, that an equal share be distributed to each brother and sister whose share has already been distributed hereunder. In the event such grandchild has no surviving brother or sister, then I direct that his or her share be distributed in the manner provided herein had such grandchild's parent who is my child not had a living child at the time this trust was initially divided into shares under Section 4.5.1.

4.8 Spendthrift Clause. The beneficial interest in principal or income hereunder of any beneficiary or beneficiaries shall not be subject to the claims of the respective beneficiary's creditors or others, nor to legal process, and shall not be voluntarily or involuntarily assigned, alienated or encumbered in any manner whatsoever.

4.9 Powers of Trustee.

4.9.1 Subject to the limitations and restrictions hereinafter imposed, my Trustee shall manage and control the trust property in accordance with the standards of a prudent businessman in the management and operation of his own property; shall have complete power and authority in Trustee's discretion, to retain assets received whether or not the same produce income or are likely to appreciate in value; to sell, convey, exchange, lease or encumber trust property on such terms and conditions as Trustee deems advisable; to invest and reinvest the assets in properties of all kinds; to settle and compromise claims on such terms as Trustee deems advisable; to enter into and conclude mergers, consolidations and/or reorganization agreements affecting any asset or assets at any time held in the trust estate; and to participate in the establishment of a partnership, division or sale of partnership assets, dissolution and liquidation of a partnership or corporation, incorporation of a partnership or any other arrangement or rearrangement. Trustee may cause any securities or other property held to be registered and held in bearer form, in the name of a nominee or in unregistered form and may vote in person or by proxy at corporate or other meetings. Trustee may borrow money for any purposes Trustee deems necessary or desirable and may mortgage, pledge, grant security interests in or hypothecate any real or personal property at any time forming a part of the trust estate and

Mary E. Brown

may loan money of the trust estate, all upon such terms and conditions as Trustee deems advisable; provided, that the same be for the benefit of the trust estate. If more than one party is serving as Trustee, I hereby empower such co-Trustees to authorize in writing any one or more of them to execute checks, make deposits or withdrawals, issue instructions, negotiate instruments, execute documents and instruments, purchase, sell, exchange or lease trust assets, and otherwise transact business on behalf of the trust estate and all Trustees. If a bank serves as Trustee, it may hold funds in checking or savings accounts at said bank and may invest trust assets in interest-bearing instruments issued by said bank or any common trust fund established and maintained for the collective investment of fiduciary funds. Trustee may employ agents, advisors and attorneys in the management of the trust property and delegate discretionary authority to them, and expenses therefor shall be borne by the trust estate. In no event shall any person dealing with Trustee be obligated to see to the application of the purchase price or any other monies or properties disposed of or acquired by Trustee. Trustee is authorized to make and participate in making elections pertaining to determination of the amount of or method of payment of federal estate and/or state inheritance taxes. Any partial or final division or distribution of the trust estate may be made by Trustee in kind, that is, in real estate, stocks, bonds, mortgages or other securities or property belonging to the trust estate, according to Trustee's absolute discretion, and such property shall be taken at the then market value or, if there be no readily ascertainable market value, at such value as Trustee may establish therefor. Trustee shall be entitled to reasonable compensation from time to time for Trustee's services. Trustee is authorized to merge this trust with any other trust or trusts the provisions and beneficiaries of which are substantially the same as those contained herein. Trustee shall have all rights, powers, privileges and discretion conferred herein. If no trustee is named herein to succeed a named trustee, the trustee acting shall have the authority to appoint a successor trustee. And, if none is so appointed, the court having jurisdiction of this trust shall appoint a successor trustee.

4.9.2 Limitations on Trustee's Powers.

4.9.2.a In the event my spouse serves as co-Trustee, my spouse shall have no right, power or authority, as a Trustee, to distribute or vote for distribution of any trust principal, such power and authority being hereby vested exclusively and for all purposes in the other co-Trustee. In addition, my spouse shall have no right, power or authority to exercise or participate in the exercise of any rights

Mary E. Brown

of ownership in any policies of life insurance upon the life of my spouse owned by my trust estate, such rights, powers and authority being hereby vested exclusively and for all purposes in the other co-Trustee.

4.9.2.b During the term my spouse serves as a co-Trustee, my spouse shall have the exclusive power and authority to manage all assets of the trust estate, including the sole power and authority to make all decisions relating to the leasing, sale, exchange, and purchase of assets, and the investment and reinvestment of property, income and gains of the trust estate, subject, however, to the restrictions contained in Section 4.9.2.a above.

4.10 Accounting. No bond or other security shall be required of Trustee. I hereby relieve Trustee from any duties imposed by law insofar as making reports and accounts are concerned, except that Trustee shall at all times maintain accurate records of trust income, gains, expenses and losses, and hold the trust books and records open and subject to inspection by the beneficiaries, their agents or lawful representatives, and upon written request from any of such persons, Trustee shall give such person a full, complete and accurate accounting of the trust hereby created. During the period of the trust, any capital gains obtained, stock dividends received, or discounts obtained shall be credited to the principal of the trust estate. In determining net income, Trustee shall make reasonable allowances for depletion and depreciation in accordance with good accounting practices. Trustee shall have the right and power to apportion income, deductions, losses and credits among the beneficiaries in such manner as Trustee, in Trustee's sole discretion, deems proper. The requirements or provisions of the Uniform Trustee's Accounting Act or any other trustee's accounting act under the laws of the state of Washington or any other laws of like or similar import are hereby waived.

4.11 Trustee. I hereby appoint my spouse and STEVEN L. BROWN as co-Trustees. In the event STEVEN L. BROWN is unable or unwilling to serve, I appoint TERESA E. ELLER as co-Trustee. In the event neither STEVEN L. BROWN nor TERESA E. ELLER are able or willing to serve, I appoint such person or other party as my spouse may appoint in writing as co-Trustee. In the event my spouse fails to so appoint a successor Trustee or the person or party so appointed is unable or unwilling to serve, I appoint DEAN S. BROWN II as co-Trustee. In the event my spouse is unable or unwilling to serve, I direct that the other co-Trustee serve as the sole Trustee. A successor Trustee shall have no obligation to determine the accuracy or propriety of any act or omission of a predecessor Trustee and shall have no liability or obligations arising out of any act or omission occurring prior to assumption of the duties as Trustee. Wherever in this Will the

Mary E. Brown

ARTICLE 6.

PERSONAL REPRESENTATIVE

6.1 I hereby appoint my spouse Personal Representative of this my Last Will and Testament. In the event my spouse does not act, then I appoint STEVEN L. BROWN as Personal Representative and if he does not act, then I appoint TERESA E. ELLER as Personal Representative. Said Personal Representative shall serve without bond and shall have unrestricted non-intervention powers.

4.2 My Personal Representative is authorized to make and participate in the making of such elections concerning the method of valuing property of my estate, method of payment of estate and inheritance taxes, and allocation of administration expenses for income and estate tax purposes, and shall have no liability to my estate, heirs, legatees or devisees arising out of the making or failure to make such elections and allocations in good faith.

IN WITNESS WHEREOF, I have hereunto set my hand
this day of September, 1989, at Pullman, Washington.

Mary E. Brown (SEAL)

The foregoing instrument consisting of ten typewritten pages, each of which bears the signature of the testatrix was on the date thereof, by said MARY E. BROWN signed, sealed, published as and declared to be her LAST WILL AND TESTAMENT, in the presence of us, who at her request, and in her sight and presence, and in the presence of each other, have subscribed our names as witnesses thereto.

KB Myklebor
Residing at Pullman
Cheryl M. Roden
Residing at Pullman, WA

AFFIDAVIT OF ATTESTING WITNESSES

STATE OF WASHINGTON)
) ss
County of Whitman)

The undersigned witnesses, after being duly sworn on oath, depose and say:

The Will of MARY E. BROWN dated September 8, 1989, was executed by the Testatrix on the date thereof at Pullman, Washington. Immediately prior to execution, the Testatrix declared the Will to be her Will and directed or requested the witnesses to subscribe their names to it. The Testatrix signed the Will in the presence of all of the witnesses, and the witnesses attested the execution by all subscribing their names to the Will in the presence of the Testatrix and of each other. The Testatrix appeared to be of sound mind and acted freely without duress or undue influence. The witnesses were all competent. This affidavit is signed at the request of the Testatrix.

KB Myklebor
WITNESS

Cheryl M. Roden
WITNESS

Mary E. Brown

SIGNED AND SWORN to before me on September 8, 1989, by
K.B. myklebust and Cheryl M Rodeen

D. J. Paul
NOTARY PUBLIC in and for the
State of Washington, residing at
Pullman

My appointment expires: 2-13-91
WLL14

Mary E. Brown



PLEASE TYPE OR PRINT

REAL ESTATE EXCISE TAX AFFIDAVIT
CHAPTER 82.45 RCW – CHAPTER 458-61A WACThis form is your receipt
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

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

1 SELLER GRANTOR	Name <u>Steven L Brown as trustee fbo Mary E Brown Decedents Trust UA January 9, 2012</u>	2 BUYER GRANTEE	Name <u>Steven L Brown</u>
	Mailing Address <u>386 Hwy 12 E</u>		Mailing Address <u>386 Hwy 12 E</u>
	City/State/Zip <u>Pomeroy, WA 99347</u>		City/State/Zip <u>Pomeroy, WA 99347</u>
	Phone No. (including area code) <u>(509) 843-1811</u>		Phone No. (including area code)
3	Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee	List all real and personal property tax parcel account numbers – check box if personal property	
Name		<u>2-011-42-004-4000</u> <input type="checkbox"/>	
Mailing Address		<u>2-011-42-009-1010</u> <input type="checkbox"/>	
City/State/Zip		<input type="checkbox"/>	
Phone No. (including area code)		<input type="checkbox"/>	
		List assessed value(s) <u>253,396</u>	

4 Street address of property: 52 Fairgrounds Rd
This property is located in ☐ unincorporated Garfield County OR within ☐ city of _____
☐ Check box if any of the listed parcels are being segregated from another 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)
The NE 1/4 of the NE 1/4 of section 9 and the E 1/2 of section 4 in T11N, R42, EWM. EXCEPT beginning at the Northeast corner of said section 4, thence west on section line 1340 feet; thence south 122 feet; thence east on line parallel with North line of said section, 1340 feet; thence North 122 feet to the place of beginning.

5 Select Land Use Code(s): 11 83
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)?	<input type="checkbox"/>	<input type="checkbox"/>

6

	YES	NO
Is this property designated as forest land per chapter 84.33 RCW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is this property receiving special valuation as historical property per chapter 84.26 RCW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If any answers are yes, complete as instructed below.

(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, 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. 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 your local county assessor for more information.

This land ☒ does ☐ does not qualify for continuance.Kathia Vorobonko 12/5/12
DEPUTY ASSESSOR DATE

(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 and payable by the seller or transferor at the time of sale.

(3) OWNER(S) SIGNATURE

Steven L Brown

PRINT NAME

Steven L Brown

7 List all personal property (tangible and intangible) included in selling price.

N/A

If claiming an exemption, list WAC number and reason for exemption:

WAC No. (Section/Subsection) 458-61A-202Reason for exemption Inheritance or Devise- Distribution upon termination of Decedents TrustType of Document Warranty DeedDate of Document Dec. 5, 2012

Gross Selling Price	\$
*Personal Property (deduct)	\$
Exemption Claimed (deduct)	\$
Taxable Selling Price	\$
Excise Tax : State	\$
Local	\$
*Delinquent Interest: State	\$
Local	\$
*Delinquent Penalty	\$
Subtotal	\$
*State Technology Fee	\$ 5.00
*Affidavit Processing Fee	\$ 5.00
Total Due	\$ 10.00

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 Grantor or Grantor's Agent Steven L Brown
Name (print) Steven L. Brown
Date & city of signing: 12-05-12 Pomeroy

Signature of Grantee or Grantee's Agent Steven L Brown
Name (print) Steven L Brown
Date & city of signing: 12-05-12 Pomeroy

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 (1C)).

DEC 05 2012

KAREN ROOSEVELT
GARFIELD COUNTY TREASURER

STATE OF WASHINGTON DEPARTMENT OF HEALTH

Mary Elizabeth Brown				April 28, 2011	
3. Sex (M/F) Female	4a. Age - Last Birthday 77	4b. Under 1 Year Months Days	4c. Under 1 Day Hours Minutes	5. Social Security Number 537-32-4013	6. County of Death Garfield
7. Birthdate Mar. 29, 1934	8a. Birthplace (City, Town, or County) Des Moines	8b. (State or Foreign Country) Iowa	9. Decedent's Education High School Graduate		
10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify. No			11. Decedent's Race(s) White		12. Was Decedent ever in U.S. Armed Forces? No
13a. Residence: Number and Street (e.g., 624 SE 5 th St.) (Include Apt. No.) 52 Fair Grounds Road				13b. City or Town Pomeroy	
13c. Residence: County Garfield	13d. Tribal Reservation Name (if applicable) N/A	13e. State or Foreign Country Washington	13f. Zip Code + 4 99347	13g. Inside City Limits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk	
14. Estimated length of time at residence. 48 years	15. Marital Status at Time of Death Married	16. Surviving Spouse's Name (Give name prior to first marriage) Robert Allen Brown			
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED). Homemaker			18. Kind of Business/Industry (Do not use Company Name) Own Home		
19. Father's Name (First, Middle, Last, Suffix) William H. Poe			20. Mother's Name Before First Marriage (First, Middle, Last) Evelyn West		
21. Informant's Name Robert A. Brown	22. Relationship to Decedent Husband	23. Mailing Address: Number and Street or RFD No. City or Town State Zip 52 Fair grounds Road - Pomeroy, Washington 99347			
24. Place of Death, if Death Occurred in a Hospital: Emergency Room			24. Place of Death, if Death Occurred Somewhere Other than a Hospital:		
25. Facility Name (If not a facility, give number & street or location) Garfield County Memorial Hospital			26a. City, Town, or Location of Death Pomeroy	26b. State WA	27. Zip Code 99347
28. Method of Disposition Burial	29. Place of Final Disposition (Name of cemetery, crematory, other place) Pomeroy City Cemetery		30. Location-City/Town, and State Pomeroy, WA, 99347		
31. Name and Complete Address of Funeral Facility Richardson-Brown Funeral Home - 750 Columbia St. Pomeroy, WA 99347			32. Date of Disposition May 4, 2011		
33. Funeral Director Signature X <i>Jenny Barton</i>					
34. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Add additional lines if necessary.					
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. Cardiac Arrest		Due to (or as a consequence of):		Interval between Onset & Death 1 hour	
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST b. Massive Pulmonary Embolism		Due to (or as a consequence of):		Interval between Onset & Death 5 days 1 hour	
c. DVT		Due to (or as a consequence of):		Interval between Onset & Death 5 days	
d.		Due to (or as a consequence of):		Interval between Onset & Death	
35. Other significant conditions contributing to death but not resulting in the underlying cause given above				36. Autopsy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	37. Were autopsy findings available to complete the Cause of Death? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
38. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Undetermined <input type="checkbox"/> Suicide <input type="checkbox"/> Pending		39. If female <input checked="" type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days before death <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year		40. Did tobacco use contribute to death? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
41. Date of Injury (mm/dd/yyyy)	42. Hour of Injury (24hrs)	43. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)		44. Injury at Work? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
45. Location of Injury: Number & Street: Apt. No. City or Town: County: State: Zip Code+ 4:					
46. Describe how injury occurred				47. If transportation injury, specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other (Specify)	
48a. Certifying Physician - To the best of my knowledge, death occurred at the time, date, and place and due to the cause(s) and manner stated.			48b. Medical Examiner/Coroner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.		
49. Name and Address of Certifier (Physician, Medical Examiner or Coroner) (Type or Print) <i>John Mayfield</i>			50. Hour of Death (24hrs) 2024		
51. Name and Title of Attending Physician if other than Certifier (Type or Print)			52. Date Signed (mm/dd/yyyy) 05/02/2011		
53. Title of Certifier PA	54. License Number 108468	55. Coroner File Number		56. Was case referred to ME/Coroner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
57. Registrar Signature <i>Kathy Croun</i>				58. Date Received (mm/dd/yyyy) 05/02/2011	
59. Amendments					

4
FILED

JUN 21 2012
COUNTY CLERK
GARFIELD COUNTY, WASH.

1 THE DOCUMENT TO WHICH THIS CERTIFICATE IS ATTACHED IS A
2 FULL, TRUE AND CORRECT COPY OF THE ORIGINAL ON FILE
3 AND OF RECORD IN MY OFFICE.

4 DATED THIS 5th DAY OF December 2012

5 ATTEST: Terrilee Cox
6 County Clerk and Clerk of the Superior Court of the
7 State Of Washington, in and for the County of Garfield.

8 SUPERIOR COURT OF WASHINGTON FOR GARFIELD COUNTY

9 IN THE MATTER OF THE ESTATE)
10 OF ROBERT A. BROWN,)

NO. 12-4-00004-7

Deceased.)

LETTERS TESTAMENTARY

11 STATE OF WASHINGTON)

12)ss.

13 County of Garfield)

14 WHEREAS, the Last Will and Testament of ROBERT A. BROWN, deceased,
15 was, on June 21st, 2012, duly exhibited, proven, and recorded in our Superior Court;
16 and, whereas, it appears in and by said Will that STEVEN L. BROWN was appointed
17 executor thereon, and whereas, said STEVEN L. BROWN duly qualified, as such.

18 NOW, THEREFORE, KNOW ALL MEN BY THESE PRESENTS, that we
19 hereby authorize said STEVEN L. BROWN to execute said Will according to law.

20 WITNESS my hand and the seal of said Court this 21st day of June 2012.

21 Terrilee Cox
22 CLERK OF SAID SUPERIOR COURT

23 By: [Signature]
24 DEPUTY

25 LETTERS TESTAMENTARY – Page 1 of 1

26 19cZ1B1E1PW1B.RA1P12.0620.IP

IRWIN, MYKLEBUST, SAVAGE
& BROWN, P.S.
P.O. BOX 604
PULLMAN, WASHINGTON 99163-0604
509/332-3502, FAX 509/332-6565

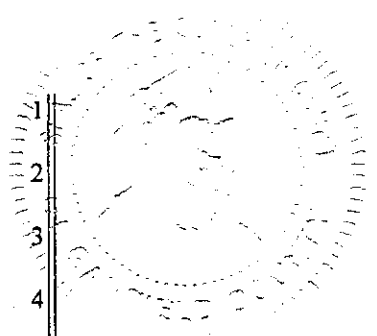
FILED

JUN 22 2011

Denilio Cox
COUNTY CLERK
GARFIELD COUNTY, WASH.

THE DOCUMENT TO WHICH THIS CERTIFICATE IS ATTACHED IS A
FULL, TRUE AND CORRECT COPY OF THE ORIGINAL ON FILE
AND OF RECORD IN MY OFFICE.

DATED THIS 31ST DAY OF January 2012
ATTEST: [Signature]
County Clerk and Clerk of the Superior Court of the
State Of Washington, in and for the County of Garfield.



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SUPERIOR COURT OF WASHINGTON FOR GARFIELD COUNTY

IN THE MATTER OF THE ESTATE)
OF MARY E. BROWN,) NO. 11-4-00010-3
Deceased.) LETTERS TESTAMENTARY

STATE OF WASHINGTON)
)ss.
County of Garfield)

WHEREAS, the Last Will and Testament of MARY E. BROWN, deceased, was,
on June 20th, 2011, duly exhibited, proven, and recorded in our Superior Court; and,
whereas, it appears in and by said Will that ROBERT A. BROWN was appointed
executor thereon, and whereas, said ROBERT A. BROWN duly qualified, as such.

NOW, THEREFORE, KNOW ALL MEN BY THESE PRESENTS, that we
hereby authorize said ROBERT A. BROWN to execute said Will according to law.

WITNESS my hand and the seal of said Court this 22ND day of June, 2011.

Denilio Cox
CLERK OF SAID SUPERIOR COURT

By: _____
DEPUTY

FILED
JUN 20 2011
COUNTY CLERK
SPRINGFIELD COUNTY, WASH.

Last Will and Testament of

MARY E. BROWN

I, MARY E. BROWN, of legal age, do hereby make, publish and declare this to be my Last Will and Testament, and I hereby revoke all former Wills and Codicils made by me.

ARTICLE 1.

FAMILY

1.1 My immediate family consists of my husband, ROBERT A. BROWN, hereinafter called "my spouse," and our children, DEAN S. BROWN II, STEVEN L. BROWN and TERESA E. ELLER, hereinafter called "my children."

ARTICLE 2.

DEBTS, EXPENSES AND TAXES

2.1 Except as otherwise provided herein, I direct my Personal Representative to pay those of my just debts and funeral expenses as are required to be paid by law and to pay the expenses of probate as soon as practicable after my death. I further direct that such debts and expenses be paid from the residue of my estate. If any item of property of my estate is subject to a mortgage, deed of trust, security agreement, lien or other encumbrance, the legatee or devisee taking such property shall take it subject to such encumbrance and shall not be entitled to have the obligation secured thereby paid out of my

Mary E Brown

was acquired by my spouse as my spouse's separate property, and all policies of property or liability insurance covering such property.

3.2 In the event my spouse survives me by five months, I give, devise and bequeath all of the rest, residue and remainder of my property to my spouse.

3.3 In addition to any disclaimer rights conferred by law, I hereby authorize my spouse to disclaim, in whole or in part, any property, interest in property, right, privilege or power granted to or passing to my spouse by reason of my death, whether under this Will or otherwise. Any such disclaimer shall be made in writing in conformance with the applicable law and prior to the date a federal estate or state inheritance or estate tax return is required to be filed for my estate, excluding extensions. In the event of any such disclaimer, I give, devise and bequeath the property, interest, right, privilege or power disclaimed to my trustee named in Article 4, in trust, upon the terms and conditions set forth therein.

ARTICLE 4.

TRUST

4.1 Establishment of Trust. In the event of a disclaimer by my spouse pursuant to the terms of Article 3, or if my spouse does not survive me as elsewhere provided herein and property passes to this trust under the terms of Article 5, the same shall be received, administered and distributed by my trustee named herein, hereinafter called "Trustee," in trust, however, upon the following terms and conditions.

Mary E Brown

4.2 Purpose. The purpose of this trust shall be to provide for the reasonable care, support and maintenance of my spouse until my spouse's death and thereafter to provide for the reasonable care, support, welfare and education of the children of any of my deceased children and to protect them from mismanagement and improvidence, until each receives his or her distributive share of my trust estate.

4.3 Term. The term of this trust shall be for the lifetime of my spouse, and thereafter until all of the corpus is distributed under the terms hereof.

4.4 Distributions To Spouse.

4.4.1 Income. The net income of this trust shall be paid to my spouse until my spouse's death, in such amounts and at such intervals as Trustee may determine, but not less frequently than annually.

4.4.2 Principal. Trustee may, in Trustee's sole discretion, distribute principal of this trust to my spouse according to the purpose of this trust until my spouse's death, subject to the limitations of Section 4.9.2 following. In making such distributions, Trustee shall take into consideration, to the extent Trustee deems advisable, other income or resources of my spouse known to Trustee.

4.5 Distributions after Death of Spouse.

4.5.1 Division of Trust. After my spouse's death the trust shall be divided into shares, one share in the name of each living child and one share in the name of each deceased child who has then living a child or children (my "grandchildren"). If property passes to this trust under other provisions of this Will, the share for each of my grandchildren passing to this trust shall be maintained as a separate trust share.

Mary E. Brown

my living children and one share for each deceased child who has a child or children then living. The share for each of my living children shall be distributed to him or her. The share for each deceased child shall be consolidated with such child's trust share otherwise provided for herein and administered and distributed therewith. In the event any grandchild for whom a share has been established under this Article 4 dies prior to final distribution of said share, such grandchild's share shall be consolidated with the trust shares for his or her brother(s) and/or sister(s) and administered and distributed therewith; provided, that an equal share be distributed to each brother and sister whose share has already been distributed hereunder. In the event such grandchild has no surviving brother or sister, then I direct that his or her share be distributed in the manner provided herein had such grandchild's parent who is my child not had a living child at the time this trust was initially divided into shares under Section 4.5.1.

4.8 Spendthrift Clause. The beneficial interest in principal or income hereunder of any beneficiary or beneficiaries shall not be subject to the claims of the respective beneficiary's creditors or others, nor to legal process, and shall not be voluntarily or involuntarily assigned, alienated or encumbered in any manner whatsoever.

4.9 Powers of Trustee.

4.9.1 Subject to the limitations and restrictions hereinafter imposed, my Trustee shall manage and control the trust property in accordance with the standards of a prudent businessman in the management and operation of his own property; shall have complete power and authority in Trustee's discretion, to retain assets received whether or not the same produce income or are likely to appreciate in value; to sell, convey, exchange, lease or encumber trust property on such terms and conditions as Trustee deems advisable; to invest and reinvest the assets in properties of all kinds; to settle and compromise claims on such terms as Trustee deems advisable; to enter into and conclude mergers, consolidations and/or reorganization agreements affecting any asset or assets at any time held in the trust estate; and to participate in the establishment of a partnership, division or sale of partnership assets, dissolution and liquidation of a partnership or corporation, incorporation of a partnership or any other arrangement or rearrangement. Trustee may cause any securities or other property held to be registered and held in bearer form, in the name of a nominee or in unregistered form and may vote in person or by proxy at corporate or other meetings. Trustee may borrow money for any purposes Trustee deems necessary or desirable and may mortgage, pledge, grant security interests in or hypothecate any real or personal property at any time forming a part of the trust estate and

Mary E. Brown

may loan money of the trust estate, all upon such terms and conditions as Trustee deems advisable; provided, that the same be for the benefit of the trust estate. If more than one party is serving as Trustee, I hereby empower such co-Trustees to authorize in writing any one or more of them to execute checks, make deposits or withdrawals, issue instructions, negotiate instruments, execute documents and instruments, purchase, sell, exchange or lease trust assets, and otherwise transact business on behalf of the trust estate and all Trustees. If a bank serves as Trustee, it may hold funds in checking or savings accounts at said bank and may invest trust assets in interest-bearing instruments issued by said bank or any common trust fund established and maintained for the collective investment of fiduciary funds. Trustee may employ agents, advisors and attorneys in the management of the trust property and delegate discretionary authority to them, and expenses therefor shall be borne by the trust estate. In no event shall any person dealing with Trustee be obligated to see to the application of the purchase price or any other monies or properties disposed of or acquired by Trustee. Trustee is authorized to make and participate in making elections pertaining to determination of the amount of or method of payment of federal estate and/or state inheritance taxes. Any partial or final division or distribution of the trust estate may be made by Trustee in kind, that is, in real estate, stocks, bonds, mortgages or other securities or property belonging to the trust estate, according to Trustee's absolute discretion, and such property shall be taken at the then market value or, if there be no readily ascertainable market value, at such value as Trustee may establish therefor. Trustee shall be entitled to reasonable compensation from time to time for Trustee's services. Trustee is authorized to merge this trust with any other trust or trusts the provisions and beneficiaries of which are substantially the same as those contained herein. Trustee shall have all rights, powers, privileges and discretion conferred herein. If no trustee is named herein to succeed a named trustee, the trustee acting shall have the authority to appoint a successor trustee. And, if none is so appointed, the court having jurisdiction of this trust shall appoint a successor trustee.

4.9.2 Limitations on Trustee's Powers.

4.9.2.a In the event my spouse serves as co-Trustee, my spouse shall have no right, power or authority, as a Trustee, to distribute or vote for distribution of any trust principal, such power and authority being hereby vested exclusively and for all purposes in the other co-Trustee. In addition, my spouse shall have no right, power or authority to exercise or participate in the exercise of any rights

Mary E. Brown

of ownership in any policies of life insurance upon the life of my spouse owned by my trust estate, such rights, powers and authority being hereby vested exclusively and for all purposes in the other co-Trustee.

4.9.2.b During the term my spouse serves as a co-Trustee, my spouse shall have the exclusive power and authority to manage all assets of the trust estate, including the sole power and authority to make all decisions relating to the leasing, sale, exchange, and purchase of assets, and the investment and reinvestment of property, income and gains of the trust estate, subject, however, to the restrictions contained in Section 4.9.2.a above.

4.10 Accounting. No bond or other security shall be required of Trustee. I hereby relieve Trustee from any duties imposed by law insofar as making reports and accounts are concerned, except that Trustee shall at all times maintain accurate records of trust income, gains, expenses and losses, and hold the trust books and records open and subject to inspection by the beneficiaries, their agents or lawful representatives, and upon written request from any of such persons, Trustee shall give such person a full, complete and accurate accounting of the trust hereby created. During the period of the trust, any capital gains obtained, stock dividends received, or discounts obtained shall be credited to the principal of the trust estate. In determining net income, Trustee shall make reasonable allowances for depletion and depreciation in accordance with good accounting practices. Trustee shall have the right and power to apportion income, deductions, losses and credits among the beneficiaries in such manner as Trustee, in Trustee's sole discretion, deems proper. The requirements or provisions of the Uniform Trustee's Accounting Act or any other trustee's accounting act under the laws of the state of Washington or any other laws of like or similar import are hereby waived.

4.11 Trustee. I hereby appoint my spouse and STEVEN L. BROWN as co-Trustees. In the event STEVEN L. BROWN is unable or unwilling to serve, I appoint TERESA E. ELLER as co-Trustee. In the event neither STEVEN L. BROWN nor TERESA E. ELLER are able or willing to serve, I appoint such person or other party as my spouse may appoint in writing as co-Trustee. In the event my spouse fails to so appoint a successor Trustee or the person or party so appointed is unable or unwilling to serve, I appoint DEAN S. BROWN II as co-Trustee. In the event my spouse is unable or unwilling to serve, I direct that the other co-Trustee serve as the sole Trustee. A successor Trustee shall have no obligation to determine the accuracy or propriety of any act or omission of a predecessor Trustee and shall have no liability or obligations arising out of any act or omission occurring prior to assumption of the duties as Trustee. Wherever in this Will the

Mary E. Brown

ARTICLE 6.

PERSONAL REPRESENTATIVE

6.1 I hereby appoint my spouse Personal Representative of this my Last Will and Testament. In the event my spouse does not act, then I appoint STEVEN L. BROWN as Personal Representative and if he does not act, then I appoint TERESA E. ELLER as Personal Representative. Said Personal Representative shall serve without bond and shall have unrestricted non-intervention powers.

4.2 My Personal Representative is authorized to make and participate in the making of such elections concerning the method of valuing property of my estate, method of payment of estate and inheritance taxes, and allocation of administration expenses for income and estate tax purposes, and shall have no liability to my estate, heirs, legatees or devisees arising out of the making or failure to make such elections and allocations in good faith.

IN WITNESS WHEREOF, I have hereunto set my hand
this day of September, 1989, at Pullman, Washington.

Mary E. Brown (SEAL)

The foregoing instrument consisting of ten typewritten pages, each of which bears the signature of the testatrix was on the date thereof, by said MARY E. BROWN signed, sealed, published as and declared to be her LAST WILL AND TESTAMENT, in the presence of us, who at her request, and in her sight and presence, and in the presence of each other, have subscribed our names as witnesses thereto.

KB Myklebust
Residing at Pullman
Cheryl M. Roden
Residing at Pullman, WA

AFFIDAVIT OF ATTESTING WITNESSES

STATE OF WASHINGTON)
) ss
County of Whitman)

The undersigned witnesses, after being duly sworn on oath, depose and say:

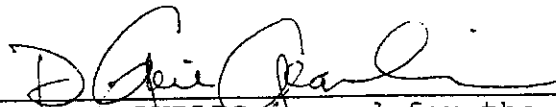
The Will of MARY E. BROWN dated September 8, 1989, was executed by the Testatrix on the date thereof at Pullman, Washington. Immediately prior to execution, the Testatrix declared the Will to be her Will and directed or requested the witnesses to subscribe their names to it. The Testatrix signed the Will in the presence of all of the witnesses, and the witnesses attested the execution by all subscribing their names to the Will in the presence of the Testatrix and of each other. The Testatrix appeared to be of sound mind and acted freely without duress or undue influence. The witnesses were all competent. This affidavit is signed at the request of the Testatrix.

KB Myklebust
WITNESS

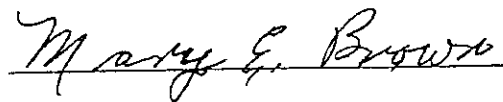
Cheryl M. Roden
WITNESS

Mary E. Brown

SIGNED AND SWORN to before me on September 8, 1989, by
K.B. myklebust and Cheryl m Rodeen .


NOTARY PUBLIC in and for the
State of Washington, residing at
Pullman .

My appointment expires: 2-13-91
WLL14



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

(See back of last page for instructions)

☐ Check box if partial sale of property

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

SELLER GRANTOR	1 Name <u>Dick Ledgerwood and Son, Inc.,</u>	BUYER GRANTEE	2 Name <u>Samme Ledgerwood</u>
	Mailing Address <u>141 Howell Grade Road</u>		Mailing Address <u>141 Howell Grade Road</u>
	City/State/Zip <u>Clarkston, WA 99403</u>		City/State/Zip <u>Clarkston, WA 9943</u>
	Phone No. (including area code)		Phone No. (including area code)
3 Send all property tax correspondence to: <input type="checkbox"/> Same as Buyer/Grantee	List all real and personal property tax parcel account numbers – check box if personal property		List assessed value(s)
Name <u>Samme Ledgerwood</u>	<u>2-011-44-016-3010</u> <input type="checkbox"/>		<u>43,105</u>
Mailing Address <u>141 Howell Grade Road</u>	<input type="checkbox"/>		
City/State/Zip <u>Clarkston, WA 99403</u>	<input type="checkbox"/>		
Phone No. (including area code)	<input type="checkbox"/>		

4 Street address of property: _____

This property is located in Select Location

☐ Check box if any of the listed parcels are being segregated from another 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)
That part of the S1/2S1/2 of Section 16 of Township 11 North, Range 44, W.M., Garfield County, Washington, more particularly described on Exhibit "A" attached hereto.

5 Select Land Use Code(s):
83 - Agriculture classified under current use chapter 84.34 RCW

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)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	YES	NO
Is this property designated as forest land per chapter 84.33 RCW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is this property receiving special valuation as historical property per chapter 84.26 RCW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If any answers are yes, complete as instructed below.

(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, **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. 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 your local county assessor for more information.

This land ☒ does ☐ does not qualify for continuance.

Keshia Vadumlegge 12/10/12
DEPUTY ASSESSOR DATE

(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 and payable by the seller or transferor at the time of sale.

(3) OWNER(S) SIGNATURE

Samantha Ledgerwood
PRINT NAME

Samantha Ledgerwood

7 List all personal property (tangible and intangible) included in selling price.

If claiming an exemption, list WAC number and reason for exemption:

WAC No. (Section/Subsection) 458-61A-201

Reason for exemption

Gift

Type of Document Quit Claim Deed

Date of Document 12/5/2012

Gross Selling Price \$	0.00
*Personal Property (deduct) \$	
Exemption Claimed (deduct) \$	
Taxable Selling Price \$	0.00
Excise Tax : State \$	0.00
<u>0.0000</u> Local \$	0.00
*Delinquent Interest: State \$	
Local \$	
*Delinquent Penalty \$	
Subtotal \$	0.00
*State Technology Fee \$	5.00
*Affidavit Processing Fee \$	5.00
Total Due \$	10.00

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 Grantor or Grantor's Agent <u>Sam Ledgerwood</u>	Signature of Grantee or Grantee's Agent <u>Samantha Ledgerwood</u>
Name (print) <u>Sam Ledgerwood, President</u>	Name (print) <u>Samantha Ledgerwood</u>
Date & city of signing: <u>12/5/2012, Clarkston, WA</u>	Date & city of signing: <u>12/5/2012 Clarkston WA</u>

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 (1C)).

That part of the S1/2S1/2 of Section 16 of Township 11 North, Range 44 East, W.M., Garfield County, Washington, more particularly described as follows: Commencing at the Southwest corner of said Section 16; thence N.70°32'47"E., 2466.86 feet to a point on the North right-of-way line of U.S. Highway No. 12, said point being the true place of beginning; thence N.10°36'E., 507.08 feet to a point on the North line of said S1/2S1/2; thence East along said North line a distance of 1142.72 feet to a point on the centerline of Clayton Road; thence S.14°05'W. along said centerline a distance of 90.43 feet to a point of curve; thence along said centerline around a curve to the right with a radius of 550.00 feet for a distance of 94.46 feet (chord bears S.19°00'12"W., 94.34 feet); thence S.23°55'25"W. along said centerline a distance of 89.88 feet to a point of curve; thence along said centerline around a curve to the left with a radius of 600.00 feet for a distance of 69.83 feet (chord bears S.20°35'21"W., 69.79 feet); thence S.17°15'18"W. along said centerline a distance of 278.79 feet to a point of curve; thence along said centerline around a curve to the left with a radius of 800.00 feet for a distance of 80.52 feet (chord bears S.14°22'18"W., 80.48 feet); thence S.11°29'18"W. along said centerline a distance of 172.93 feet to a point of curve; thence along said centerline around a curve to the left with a radius of 280.00 feet for a distance of 79.08 feet (chord bears S.3°23'50"W., 78.82 feet) to a point on the North right-of-way line of U.S. Highway No. 12; thence N.54°40'17"W. along said right-of-way line a distance of 48.37 feet; thence S.75°27'12"W. along said right-of-way line a distance of 126.40 feet; thence N.52°15'15"W. along said right-of-way line a distance of 257.04 feet to a point of curve; thence along said right-of-way line around a curve to the left with a radius of 1520.00 feet for a distance of 46.64 feet (chord bears N.53°07'59"W., 46.64 feet); thence S.35°59'16"W. along said right-of-way line a distance of 45.00 feet to a point on a curve; thence deflect right along said right-of-way line around a curve to the left with a radius of 1475.00 feet for a distance of 343.90 feet (chord bears N.60°41'29"W., 343.12 feet); thence N.67°22'15"W. along said right-of-way line a distance of 273.26 feet to the true place of beginning.

EXCEPTING THEREFROM all that portion lying in the right-of-way of Clayton Road.

EXHIBIT "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 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:** 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.

Reasons held in escrow: _____

Signature _____ Firm Name _____

2. **GIFTS:** (WAC 458-61A-201) The gift of equity is non-taxable; however, any consideration received is not a gift and is taxable. The value exchanged or paid for equity plus the amount of debt equals the taxable amount. One of the boxes below must be checked. Both Grantor (seller) and Grantee (buyer) must sign below.

Grantor (seller) gifts equity valued at \$ _____ to grantee (buyer).

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). Any consideration received by grantor is taxable.
2. ☐ Grantee (buyer) will make payments on _____ % of 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). Any consideration received by grantor is taxable.

B: Gifts without consideration

1. ☒ 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 the payments on total debt of \$ _____ and has not received any consideration towards 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.
4. ☐ Grantor (seller) and grantee (buyer) have made and will continue to make payments from joint account on total 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? ☐ YES ☐ NO (If yes, please call (360) 570-3265 to see if this transfer is taxable). 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.

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 458-61A-213.

NOTE: Exchange Facilitator must sign below.

Exchange Facilitator's Signature

For tax assistance, contact your local County Treasurer/Recorder or visit <http://dor.wa.gov> or call (360) 570-3265. To inquire about the availability of this document in an alternate format, visit <http://dor.wa.gov>. Teletype (TTY) users may call (360) 705-6718.

REAL ESTATE EXCISE TAX AFFIDAVIT

PLEASE TYPE OR PRINT

CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

This form is your receipt
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

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

1 SELLER GRANTOR	Name <u>Timberwood Ranches, L.L.C.</u>	2 BUYER GRANTEE	Name <u>Ward W. Leland - 50% interest</u>												
	Mailing Address <u>2828 E. 32nd Ave. Suite A</u>		<u>Roy M. Leland & Virginia E. Leland - 50% interest</u>												
	City/State/Zip <u>Spokane, WA 99223</u>		Mailing Address <u>2828 E. 32nd Ave., Ste. A</u>												
	Phone No. (including area code) _____		City/State/Zip <u>Spokane, WA 99223</u>												
3 Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee Name _____ Mailing Address _____ City/State/Zip _____ Phone No. (including area code) _____		List all real and personal property tax parcel account numbers – check box if personal property <table border="1"> <tr> <td><u>2-010-42-021-1000</u></td> <td><input type="checkbox"/></td> <td>List assessed value(s) <u>\$16,000.00</u></td> </tr> <tr> <td><u>2-010-42-022-3000</u></td> <td><input type="checkbox"/></td> <td><u>\$51,858.00</u></td> </tr> <tr> <td><u>2-010-42-027-1000</u></td> <td><input type="checkbox"/></td> <td><u>\$32,000.00</u></td> </tr> <tr> <td><u>2-010-42-028-1000</u></td> <td><input type="checkbox"/></td> <td><u>\$8,000.00</u></td> </tr> </table>		<u>2-010-42-021-1000</u>	<input type="checkbox"/>	List assessed value(s) <u>\$16,000.00</u>	<u>2-010-42-022-3000</u>	<input type="checkbox"/>	<u>\$51,858.00</u>	<u>2-010-42-027-1000</u>	<input type="checkbox"/>	<u>\$32,000.00</u>	<u>2-010-42-028-1000</u>	<input type="checkbox"/>	<u>\$8,000.00</u>
<u>2-010-42-021-1000</u>	<input type="checkbox"/>	List assessed value(s) <u>\$16,000.00</u>													
<u>2-010-42-022-3000</u>	<input type="checkbox"/>	<u>\$51,858.00</u>													
<u>2-010-42-027-1000</u>	<input type="checkbox"/>	<u>\$32,000.00</u>													
<u>2-010-42-028-1000</u>	<input type="checkbox"/>	<u>\$8,000.00</u>													

4 Street address of property: Stevens Ridge

This property is located in Garfield County

☐ Check box if any of the listed parcels are being segregated from another 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)

The East half of the East half of Section 21, the Northwest quarter of the Northwest quarter, the South half of the North half, and the South half of Section 22; the North half of Section 27; and the East half of the Northeast quarter of Section 28, all in Township 10 North, Range 42 EWM, Garfield County, Washington.

<p>5 Select Land Use Code(s): <u>88 - Forest land designated under chapter 84.33 RCW</u> enter any additional codes: _____ (See back of last page for instructions)</p> <p>Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>6 YES NO Is this property designated as forest land per chapter 84.33 RCW? <input checked="" type="checkbox"/> <input type="checkbox"/> Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? <input type="checkbox"/> <input checked="" type="checkbox"/> Is this property receiving special valuation as historical property per chapter 84.26 RCW? <input type="checkbox"/> <input checked="" type="checkbox"/> If any answers are yes, complete as instructed below. (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, 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. 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 your local county assessor for more information. This land <input checked="" type="checkbox"/> does <input type="checkbox"/> does not qualify for continuance. <u>Kathia Volobuev</u> <u>12/11/12</u> DEPUTY ASSESSOR DATE (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 and payable by the seller or transferor at the time of sale. (3) OWNER(S) SIGNATURE <u>Roy M. Leland</u> PRINT NAME <u>Roy M. Leland</u> <u>Virginia E. Leland</u> <u>Ward W. Leland</u> </p>	<p>7 List all personal property (tangible and intangible) included in selling price.</p> <p>If claiming an exemption, list WAC number and reason for exemption: WAC No. (Section/Subsection) <u>458-61A-211(2-b)</u> Reason for exemption <u>mere change of identity - no change in beneficial ownership interest</u></p> <p>Type of Document <u>Quit Claim Deed</u> Date of Document <u>12/5/12</u></p> <table border="1"> <tr> <td>Gross Selling Price \$</td> <td></td> </tr> <tr> <td>*Personal Property (deduct) \$</td> <td></td> </tr> <tr> <td>Exemption Claimed (deduct) \$</td> <td></td> </tr> <tr> <td>Taxable Selling Price \$</td> <td>0.00</td> </tr> <tr> <td>Excise Tax : State \$</td> <td>0.00</td> </tr> <tr> <td><u>0.0025</u> Local \$</td> <td>0.00</td> </tr> <tr> <td>*Delinquent Interest: State \$</td> <td></td> </tr> <tr> <td>Local \$</td> <td></td> </tr> <tr> <td>*Delinquent Penalty \$</td> <td></td> </tr> <tr> <td>Subtotal \$</td> <td>0.00</td> </tr> <tr> <td>*State Technology Fee \$</td> <td>5.00</td> </tr> <tr> <td>*Affidavit Processing Fee \$</td> <td>5.00</td> </tr> <tr> <td>Total Due \$</td> <td>10.00</td> </tr> </table> <p>A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX *SEE INSTRUCTIONS</p>	Gross Selling Price \$		*Personal Property (deduct) \$		Exemption Claimed (deduct) \$		Taxable Selling Price \$	0.00	Excise Tax : State \$	0.00	<u>0.0025</u> Local \$	0.00	*Delinquent Interest: State \$		Local \$		*Delinquent Penalty \$		Subtotal \$	0.00	*State Technology Fee \$	5.00	*Affidavit Processing Fee \$	5.00	Total Due \$	10.00
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*Affidavit Processing Fee \$	5.00																										
Total Due \$	10.00																										

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Grantor or Grantor's Agent <u>[Signature]</u>	Signature of Grantee or Grantee's Agent <u>[Signature]</u>
Name (print) <u>Ward W. Leland</u>	Name (print) <u>Roy M. Leland</u>
Date & city of signing: <u>December 5</u> , 2012 - Spokane	Date & city of signing: <u>December 5</u> , 2012 - Spokane

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, or by both imprisonment and fine (RCW 9A.20.020 (1C)).

REAL ESTATE EXCISE TAX AFFIDAVIT

This form is your receipt
when stamped by cashier.

PLEASE TYPE OR 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

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

1 SELLER GRANTOR	Name <u>Roy M. Leland</u>	2 BUYER GRANTEE	Name <u>Ward W. Leland</u>
	<u>Virginia E. Leland</u>		
	Mailing Address <u>2828 E. 32nd Ave. Suite A</u>		Mailing Address <u>2828 E. 32nd Ave., Ste. A</u>
	City/State/Zip <u>Spokane, WA 99223</u>		City/State/Zip <u>Spokane, WA 99223</u>
	Phone No. (including area code) _____		Phone No. (including area code) _____

3	Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee	List all real and personal property tax parcel account numbers - check box if personal property	List assessed value(s)	
	Name _____			2-010-42-021-1000 <input type="checkbox"/> \$16,000.00
	Mailing Address _____			2-010-42-022-3000 <input type="checkbox"/> \$51,858.00
	City/State/Zip _____			2-010-42-027-1000 <input type="checkbox"/> \$32,000.00
	Phone No. (including area code) _____			2-010-42-028-1000 <input type="checkbox"/> \$8,000.00

4 Street address of property: Stevens Ridge

This property is located in Garfield County

☐ Check box if any of the listed parcels are being segregated from another 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)

The East half of the East half of Section 21, the Northwest quarter of the Northwest quarter, the South half of the North half, and the South half of Section 22; the North half of Section 27; and the East half of the Northeast quarter of Section 28, all in Township 10 North, Range 42 EWM, Garfield County, Washington.

5 Select Land Use Code(s):
88 - Forest land designated under chapter 84.33 RCW

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)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6	YES	NO
	Is this property designated as forest land per chapter 84.33 RCW? <input checked="" type="checkbox"/>	<input type="checkbox"/>
	Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? <input checked="" type="checkbox"/>	<input type="checkbox"/>
Is this property receiving special valuation as historical property per chapter 84.26 RCW? <input type="checkbox"/>	<input checked="" type="checkbox"/>	

If any answers are yes, complete as instructed below.

(I) 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, 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. 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 your local county assessor for more information.

This land ☒ does ☐ does not qualify for continuance.

Kessia Vorobeyez 12/13/12
DEPUTY ASSESSOR DATE

(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 and payable by the seller or transferor at the time of sale.

(3) OWNER(S) SIGNATURE

Ward W. Leland
PRINT NAME
Ward W. Leland

7 List all personal property (tangible and intangible) included in selling price.

If claiming an exemption, list WAC number and reason for exemption:

WAC No. (Section/Subsection) 458-61A-2101(i)

Reason for exemption

gift from parents to child - no monetary consideration - no assumption of debt

Type of Document Quit Claim Deed

Date of Document 12/6/12

Gross Selling Price \$	_____
*Personal Property (deduct) \$	_____
Exemption Claimed (deduct) \$	_____
Taxable Selling Price \$	0.00
Excise Tax : State \$	0.00
<u>0.0025</u> Local \$	0.00
*Delinquent Interest: State \$	_____
Local \$	_____
*Delinquent Penalty \$	_____
Subtotal \$	0.00
*State Technology Fee \$	5.00
*Affidavit Processing Fee \$	5.00
Total Due \$	10.00

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 Grantor or Grantor's Agent <u>R. M. Leland</u>	Signature of Grantee or Grantee's Agent <u>Ward W. Leland</u>
Name (print) <u>Roy M. Leland</u>	Name (print) <u>Ward W. Leland</u>
Date & city of signing: <u>December 5, 2012 - Spokane</u>	Date & city of signing: <u>December 5, 2012 - Spokane</u>

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 (1C)).

PAID
DEC 13 2012

2276
THE

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 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:** 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.

Reasons held in escrow: _____

Signature

Firm Name

2. **GIFTS:** (WAC 458-61A-201) The gift of equity is non-taxable; however, any consideration received is not a gift and is taxable. The value exchanged or paid for equity plus the amount of debt equals the taxable amount. One of the boxes below must be checked. Both Grantor (seller) and Grantee (buyer) must sign below.

Grantor (seller) gifts equity valued at \$ _____ to grantee (buyer).

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). Any consideration received by grantor is taxable.
2. ☐ Grantee (buyer) will make payments on _____% of 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). Any consideration received by grantor is taxable.

B: Gifts without consideration

1. ☒ 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 the payments on total debt of \$ _____ and has not received any consideration towards 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.
4. ☐ Grantor (seller) and grantee (buyer) have made and will continue to make payments from joint account on total 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? ☐ YES ☐ NO (If yes, please call (360) 570-3265 to see if this transfer is taxable). 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.

Roy M. Leland Virginia E. Leland Ward W. Leland
Grantor's Signature Grantee's Signature

Roy M. Leland

Virginia E. Leland

Ward W. Leland

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 458-61A-213.

NOTE: Exchange Facilitator must sign below.

Exchange Facilitator's Signature

For tax assistance, contact your local County Treasurer/Recorder or visit <http://dor.wa.gov> or call (360) 570-3265. To inquire about the availability of this document in an alternate format, visit <http://dor.wa.gov>. Teletype (TTY) users may call (360) 705-6718.

PLEASE TYPE OR PRINT

REAL ESTATE EXCISE TAX AFFIDAVIT
CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

This form is your receipt
when stamped by cashier.

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ARE FULLY COMPLETED
(See back of last page for instructions)

☐ Check box if partial sale of property

If multiple owners, list percentage of ownership next to name

1. SELLER GRANTOR	Name TETRICK FAMILY L.L.C., a Washington limited liability company	2. BUYER GRANTEE	Name CINDY SUE L.L.C., a Washington limited liability company
	Mailing Address 72 W. Oliphant Ridge Road		Mailing Address 72 W. Oliphant Ridge Road
	City/State/Zip Pomeroy WA 99347		City/State/Zip Pomeroy WA 99347
	Phone No. (including area code) 509-843-1469		Phone No. (including area code) 509-843-1469
3. Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee	List all real and personal tax parcel account numbers – check box if personal property		
Name _____	Listed assessed value(s)		
Mailing Address _____	2-012-40-036-3030 <input type="checkbox"/> 82,340		
City/State/Zip _____	2-012-40-036-3031 <input type="checkbox"/> 670		
Phone No. (including area code) _____	2-011-41-006-2000 <input type="checkbox"/> 56,616		
	2-012-41-031-3030 <input type="checkbox"/> 80,889		

4. Street address of property: _____

This Property is located in ☒ unincorporated **Garfield** County OR within ☐ city of _____

☐ Check box if any of the listed parcels are being segregated from another parcel, are part of 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)

The Southwest Quarter of Section 36, Township 12 North, Range 40 E.W.M.

The West Half of Section 6, Township 11 North, Range 41 E.W.M.

A strip of land in the Southeast Quarter of the Southwest Quarter of Section 31, Township 12 North, Range 41 E.W.M. 40 feet in width along the east side of the Southeast Quarter of the Southwest Quarter of said Section 31, extending from the South boundary of said Section and running North to the public road running through said lands.

5. Select Land Use Code(s): **83**

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 ☒

6. YES ☐ NO ☒
Is this property designated as forest land per chapter 84.33 RCW? ☐ ☒
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? ☒ ☐
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)
NEW OWNER(S): To continue the current designation as forest land or 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. 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 your local county assessor for more information.

This land ☒ does ☐ does not qualify for continuance

Keshia Vadebnog 12/13/12
DEPUTY ASSESSOR DATE

(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY)
NEW OWNER(S): To continue special valuation as historic property, sign (3) below. If the new owner(s) do 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.

(3) OWNER(S) SIGNATURE

Richard Tetrick *Barbara Tetrick*
Richard Tetrick, Manager Barbara Tetrick, Manager of
of Cindy Sue L.L.C. Cindy Sue L.L.C.

7. List all personal property (tangible and intangible) included in selling price.

If claiming an exemption, list WAC number reason for exemption:

WAC No. (Section/Subsection) **458-61A-211(2)(c)**

Reason for exemption **Contribution to a subsidiary LLC**

Type of Document **Statutory Warranty Deed**

Date of Document **December 5, 2012**

Gross Selling Price	\$	- 0 -
*Personal Property (deduct)	\$	
Exemption Claimed (deduct)	\$	
Taxable Selling Price	\$	- 0 -
Excise Tax: State	\$	
Local	\$	
*Delinquent Interest: State	\$	
Local	\$	
*Delinquent Penalty	\$	
Subtotal	\$	
*State Technology Fee	\$	5.00
*Affidavit Processing Fee	\$	5.00
Total Due	\$	10.00

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 Grantor or Grantor's Agent *Richard Tetrick*
Name (print) **Richard Tetrick, Manager**
Date & city of signing: **12/5/12, Pomeroy**

Signature of Grantee or Grantee's Agent *Richard Tetrick*
Name (print) **Richard Tetrick, Manager**
Date & city of signing: **12/5/12, Pomeroy**

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 (1C)).

REAL ESTATE EXCISE TAX AFFIDAVIT

CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

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PLEASE TYPE OR PRINT

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 percentage of ownership next to name.

1 SELLER GRANTOR	Name <u>JAMES TARDIF</u>	2 BUYER GRANTEE	Name <u>WILLIAM C. GERBER</u>
	Mailing Address <u>48 Montgomery Street</u>		Mailing Address <u>P.O. Box 782</u>
	City/State/Zip <u>Pomeroy WA 99347</u>		City/State/Zip <u>Pomeroy WA 99347</u>
	Phone No. (including area code) <u>(509) 843-1450</u>		Phone No. (including area code) <u>(208) 750-6661</u>
3 Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee Name _____ Mailing Address _____ City/State/Zip _____ Phone No. (including area code) _____		List all real and personal property tax parcel account numbers – check box if personal property <u>2-066-07-004-1510</u> <input checked="" type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/>	
		List assessed value(s) _____ _____ _____	

4 Street address of property: _____
 This property is located in Garfield County
☐ Check box if any of the listed parcels are being segregated from another 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)
The West 45 feet of Lot 4 and the East 50 feet of Lot 5 in Block 7 of Pataha City

<p>5 Select Land Use Code(s): <u>11 - Household, single family units</u> enter any additional codes: _____ (See back of last page for instructions)</p> <p>Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>6</p> <p>Is this property designated as forest land per chapter 84.33 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> Is this property receiving special valuation as historical property per chapter 84.26 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If any answers are yes, complete as instructed below. (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, 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. 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 your local county assessor for more information. This land <input type="checkbox"/> does <input type="checkbox"/> does not qualify for continuance.</p> <p>DEPUTY ASSESSOR _____ DATE _____</p> <p>(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 and payable by the seller or transferor at the time of sale.</p> <p>(3) OWNER(S) SIGNATURE _____ PRINT NAME</p>	<p>7 List all personal property (tangible and intangible) included in selling price. _____</p> <p>If claiming an exemption, list WAC number and reason for exemption: WAC No. (Section/Subsection) _____ Reason for exemption _____</p> <p>Type of Document <u>Quit Claim Deed</u> Date of Document <u>12/21/12</u></p> <table> <tr> <td>Gross Selling Price \$</td> <td>1,625.00</td> </tr> <tr> <td>*Personal Property (deduct) \$</td> <td></td> </tr> <tr> <td>Exemption Claimed (deduct) \$</td> <td></td> </tr> <tr> <td>Taxable Selling Price \$</td> <td>1,625.00</td> </tr> <tr> <td>Excise Tax : State \$</td> <td>20.80</td> </tr> <tr> <td><u>0.0025</u> Local \$</td> <td>4.06</td> </tr> <tr> <td>*Delinquent Interest: State \$</td> <td></td> </tr> <tr> <td>Local \$</td> <td></td> </tr> <tr> <td>*Delinquent Penalty \$</td> <td></td> </tr> <tr> <td>Subtotal \$</td> <td>24.86</td> </tr> <tr> <td>*State Technology Fee \$</td> <td>5.00</td> </tr> <tr> <td>*Affidavit Processing Fee \$</td> <td></td> </tr> <tr> <td>Total Due \$</td> <td>29.86</td> </tr> </table> <p>A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX *SEE INSTRUCTIONS</p>	Gross Selling Price \$	1,625.00	*Personal Property (deduct) \$		Exemption Claimed (deduct) \$		Taxable Selling Price \$	1,625.00	Excise Tax : State \$	20.80	<u>0.0025</u> Local \$	4.06	*Delinquent Interest: State \$		Local \$		*Delinquent Penalty \$		Subtotal \$	24.86	*State Technology Fee \$	5.00	*Affidavit Processing Fee \$		Total Due \$	29.86
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Total Due \$	29.86																										

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Signature of Grantor or Grantor's Agent <u>James Tardif</u>	Signature of Grantee or Grantee's Agent <u>William C Gerber</u>
Name (print) <u>JAMES TARDIF</u>	Name (print) <u>WILLIAM C. GERBER</u>
Date & city of signing: <u>12/21/12 POMEROY</u>	Date & city of signing: <u>12/21/12 POMEROY</u>

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 (1C)).

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

(See back of last page for instructions)

☐ Check box if partial sale of property

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

1 SELLER GRANTOR	Name <u>ESTATE OF PATRICIA CLINE</u>	2 BUYER GRANTEE	Name <u>ARDELL & VONDA CATHERS</u>
	Mailing Address <u>C/O PO BOX 820</u>		Mailing Address <u>89 10th St.</u>
	City/State/Zip <u>POMEROY WA 99347</u>		City/State/Zip <u>POMEROY, WA 99347</u>
	Phone No. (including area code) _____		Phone No. (including area code) _____
3	Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee	List all real and personal property tax parcel account numbers – check box if personal property	
Name _____		1-052-05-006-1440 <input type="checkbox"/>	
Mailing Address _____		<input type="checkbox"/>	
City/State/Zip _____		<input type="checkbox"/>	
Phone No. (including area code) _____		<input type="checkbox"/>	
		List assessed value(s)	

4 Street address of property: _____

This property is located in Pomeroy

☐ Check box if any of the listed parcels are being segregated from another 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)

LOT 6 IN BLK 5 OF v ADDITION TO THE CITY OF POMEROY
Pomeroy

5 Select Land Use Code(s): <u>11 - Household, single family units</u> enter any additional codes: _____ (See back of last page for instructions)	7 List all personal property (tangible and intangible) included in selling price.																										
<p>Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)?</p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>	<p>If claiming an exemption, list WAC number and reason for exemption:</p> <p>WAC No. (Section/Subsection) _____</p> <p>Reason for exemption _____</p>																										
<p>6</p> <p>Is this property designated as forest land per chapter 84.33 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>Is this property receiving special valuation as historical property per chapter 84.26 RCW? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>If any answers are yes, complete as instructed below.</p> <p>(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, 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. 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 your local county assessor for more information.</p> <p>This land <input type="checkbox"/> does <input type="checkbox"/> does not qualify for continuance.</p>																											
<p>DEPUTY ASSESSOR _____ DATE _____</p> <p>(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 and payable by the seller or transferor at the time of sale.</p> <p>(3) OWNER(S) SIGNATURE</p> <p>PRINT NAME _____</p>																											
<p>8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.</p> <p>Signature of Grantor or Grantor's Agent <u>[Signature]</u></p> <p>Name (print) <u>RICH BURNS</u></p> <p>Date & city of signing: <u>12/21/12 POMEROY</u></p>																											
<p>Type of Document <u>MEMORANDUM OF CONTRACT</u></p> <p>Date of Document <u>11/30/12</u></p> <table border="0"> <tr> <td>Gross Selling Price \$</td> <td>60,000.00</td> </tr> <tr> <td>*Personal Property (deduct) \$</td> <td></td> </tr> <tr> <td>Exemption Claimed (deduct) \$</td> <td></td> </tr> <tr> <td>Taxable Selling Price \$</td> <td>60,000.00</td> </tr> <tr> <td>Excise Tax : State \$</td> <td>768.00</td> </tr> <tr> <td><u>0.0025</u> Local \$</td> <td>150.00</td> </tr> <tr> <td>*Delinquent Interest: State \$</td> <td></td> </tr> <tr> <td>Local \$</td> <td></td> </tr> <tr> <td>*Delinquent Penalty \$</td> <td></td> </tr> <tr> <td>Subtotal \$</td> <td>918.00</td> </tr> <tr> <td>*State Technology Fee \$</td> <td>5.00</td> </tr> <tr> <td>*Affidavit Processing Fee \$</td> <td></td> </tr> <tr> <td>Total Due \$</td> <td>923.00</td> </tr> </table> <p>A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX *SEE INSTRUCTIONS</p>		Gross Selling Price \$	60,000.00	*Personal Property (deduct) \$		Exemption Claimed (deduct) \$		Taxable Selling Price \$	60,000.00	Excise Tax : State \$	768.00	<u>0.0025</u> Local \$	150.00	*Delinquent Interest: State \$		Local \$		*Delinquent Penalty \$		Subtotal \$	918.00	*State Technology Fee \$	5.00	*Affidavit Processing Fee \$		Total Due \$	923.00
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REAL ESTATE EXCISE TAX AFFIDAVIT
CHAPTER 82.45 RCW – CHAPTER 458-61A WAC

2280

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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

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

SELLER GRANTOR	Name <u>Michael J. Wolf and Alberta L. Wolf, husband and wife who acquired title as Michael J.*</u>	BUYER GRANTEE	Name <u>Michael J. Wolf and Alberta L. Wolf, husband and wife</u>
	Mailing Address <u>2891 Peola Road</u>		Mailing Address <u>2891 Peola Road</u>
	City/State/Zip <u>Pomeroy WA 99347</u>		City/State/Zip <u>Pomeroy WA 99347</u>
	Phone No. (including area code) _____		Phone No. (including area code) _____
Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee Name <u>Michael J. Wolf and Alberta L. Wolf, husband</u>		List all real and personal property tax parcel account numbers – check box if personal property <u>2 010 43 032 1010</u> <input type="checkbox"/>	
Mailing Address <u>2891 Peola Road</u>		<input type="checkbox"/>	
City/State/Zip <u>Pomeroy WA 99347</u>		<input type="checkbox"/>	
Phone No. (including area code) _____		<input type="checkbox"/>	
		List assessed value(s) <u>209,308</u>	

1 Street address of property: 2891 Peola Road, Pomeroy, WA 99347
This property is located in ☒ unincorporated Garfield County OR within ☐ city of Unincorp

☐ 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)

All that part of Northeast quarter Section 32, Township 10 North, Range 43 E.W.M. lying North of the Peola Road right of way. *Wolf, a single person and Alberta L. Wolf, a single person, as joint tenants, with rights of survivorship

5 Select Land Use Code(s): <u>94 Open space land classified under chapter</u> enter any additional codes: _____ (See back of last page for instructions)	6 YES NO Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)? <input type="checkbox"/> <input checked="" type="checkbox"/>	List all personal property (tangible and intangible) included in selling price. _____ _____ _____ _____
YES NO Is this property designated as forest land per chapter 84.33 RCW? <input type="checkbox"/> <input checked="" type="checkbox"/>	If claiming an exemption, list WAC number and reason for exemption: WAC No. (Section/Subsection) <u>458-61A-215(1)</u> Reason for exemption <u>Clearing title- from individuals to community property</u>	
YES NO Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34? <input checked="" type="checkbox"/> <input type="checkbox"/>		
YES NO Is this property receiving special valuation as historical property per chapter 84.26 RCW? <input type="checkbox"/> <input checked="" type="checkbox"/>		
If any answers are yes, complete as instructed below. (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, 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. 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 your local county assessor for more information. This land <input checked="" type="checkbox"/> does <input type="checkbox"/> does not qualify for continuance. <u>Laura Amick</u> <u>12/26/12</u> DEPUTY ASSESSOR DATE		Type of Document <u>Quit Claim Deed</u> Date of Document <u>12/20/12</u>
(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 and payable by the seller or transferor at the time of sale.		Gross Selling Price \$ <u>0.00</u> *Personal Property (deduct) \$ <u>0.00</u> Exemption Claimed (deduct) \$ <u>0.00</u> Taxable Selling Price \$ <u>0.00</u> Excise Tax : State \$ <u>0.00</u> Local \$ <u>0.00</u> *Delinquent Interest: State \$ <u>0.00</u> Local \$ <u>0.00</u> *Delinquent Penalty \$ <u>0.00</u> Subtotal \$ <u>0.00</u> *State Technology Fee \$ <u>5.00</u> <u>5.00</u> *Affidavit Processing Fee \$ <u>5.00</u> Total Due \$ <u>10.00</u> <u>CK</u>
(3) OWNER(S) SIGNATURE <u>Michael J. Wolf</u> <u>Alberta L. Wolf</u> PRINT NAME <u>Michael J. Wolf</u> <u>Alberta L. Wolf</u>		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 CORRECT.

Signature of Grantor or Grantor's Agent Michael J. Wolf
Name (print) Michael J. Wolf and Alberta L. Wolf, husband
Date & city of signing: 12-20-12 Clarkston

Signature of Grantee or Grantee's Agent Alberta L. Wolf
Name (print) Michael J. Wolf and Alberta L. Wolf,
Date & city of signing: 12-20-12 Clarkston

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PAID
DEC 26 2012

Treasurer

2280

the