



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.

Form sections 1-3: Seller/Grantor (Kathleen Biggers) and Buyer/Grantee (Richard L. Adams, Karen F. Adams) information, including addresses and tax correspondence details.

Section 4: Street address of property (2702 9th Avenue, Clarkston, WA) and location details (unincorporated Asotin County).

Section 5: Land Use Code (11 Household, single family units) and exemption questions.

Section 6: Questions regarding forest land, current use, and special valuation.

Sections (1) and (2): Notices of Continuation and Compliance, and Owner Signature area.

Section 7: Personal property included in selling price.

Section 7 (continued): Exemption details, Type of Document (Statutory Warranty Deed), Date of Document (07/23/15), and Tax Summary table.

Section 8: Certifications and signatures of Grantor (Kathleen Biggers) and Grantee (Richard L. Adams).

Perjury: Perjury is a class C felony which is punishable by imprisonment in the state correctional institution...

REV 84 0001a (6/26/14) THIS SPACE - TREASURER'S USE ONLY COUNTY TREASURER

Handwritten notes: ATEC CK# 12329, Ya

PAID JUL 24 2015 ASOTIN COUNTY TREASURER

Handwritten numbers: 10598, 48598

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFIED COPY
FOR VA USE ONLY

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2014-022110

DATE ISSUED: 10/01/2014

FEE NUMBER: 0000190492

GIVEN NAMES: DWIGHT L
LAST NAME: BIGGERS

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: SEPTEMBER 29, 2014
HOUR OF DEATH: 06:15 P.M.
SEX: MALE
AGE: 70 YEARS

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 2702 9TH AVE
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403

RESIDENCE STREET: 2702 9TH AVE
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403
INSIDE CITY LIMITS? NO

SOCIAL SECURITY NUMBER: [REDACTED]

COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 10 YEARS

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

FATHER: CLARENCE BIGGERS
MOTHER: LENA CHILCOT

BIRTHDATE: OCTOBER 04, 1943
BIRTHPLACE: EMMETT, GEN. CNTY., IDAHO

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MOUNTAIN VIEW CREMATORY
CITY, STATE: LEWISTON, ID
DISPOSITION DATE: OCTOBER 01, 2014

MARITAL STATUS: MARRIED
SPOUSE: KATHLEEN WILLIS

FUNERAL FACILITY: MERCHANT RICHARDSON BROWN FUNERAL HOMES LLC
ADDRESS: PO. BOX 107
CITY, STATE, ZIP: CLARKSTON WA 99403
FUNERAL DIRECTOR: RICHARD LASSITER

OCCUPATION: IRON WORKER
INDUSTRY: CONSTRUCTION
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES: YES

INFORMANT: KATHLEEN BIGGERS
RELATIONSHIP: SPOUSE
ADDRESS: 2702 9TH AVE, CLARKSTON WA, 99403

CAUSE OF DEATH:
A. METASTATIC NON-SMALL CELL LUNG CARCINOMA
INTERVAL: 1 YEAR 10 MONTHS

B. INTERVAL:

C. INTERVAL:

D. INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

MANNER OF DEATH: NATURAL
AGTOPSV: NO
AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH? YES
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK?
PLACE OF INJURY:

CERTIFIER NAME: KATRINA ROLEN MD
TITLE: PHYSICIAN
ADDRESS: 1250 IDAHO ST
CITY, STATE, ZIP: LEWISTON ID 83501
DATE SIGNED: SEPTEMBER 30, 2014

LOCATION OF INJURY:
CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

STATUS OF DECEDENT, LAST TRANSPORTATION INJURY:
NOT APPLICABLE



EMERGENCY: NONE

NUMBER OF HOME:
NUMBER OF HOME:

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE

ATTENDING PHYSICIAN:
KATRINA ROLEN MD

LOCAL DEPUTY REGISTRAR:
SANDIE HOFFMAN
DATE RECEIVED: OCTOBER 01, 2014