

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.

SELLER GRANTOR	1 Name <u>JoAnn Boyd, individually and as successor in interest to George I. Boyd, Deceased</u>	BUYER GRANTEE	2 Name <u>JoAnn Boyd, an unmarried person</u>
	Mailing Address <u>2343 Valleyview Drive</u>		Mailing Address <u>2343 Valleyview Drive</u>
	City/State/Zip <u>Clarkston, WA 99403</u>		City/State/Zip <u>Clarkston, WA 99403</u>
	Phone No. (including area code) <u>(509) 758-8341</u>		Phone No. (including area code) <u>(509) 758-8341</u>
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 _____		1 128 00 002 0000 0000 <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)	
		<u>\$178,200.00</u>	

4 Street address of property: 2343 Valleyview Drive, Clarkston, WA 99403

This property is located in Clarkston

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 Two (2), Block One (1) of Westward Ho Addition, a subdivision of parts of Lots 1, 2, 3 and 4 of Block C-2, Clarkston Heights, Asotin County, Washington.

5 Select Land Use Code(s):

11 - Household, single family units

enter any additional codes: _____

(See back of last page for instructions)

Was the seller receiving a property tax exemption or deferral under chapters 84.36, 84.37, or 84.38 RCW (nonprofit organization, senior citizen, or disabled person, homeowner with limited income)?

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 RCW? YES NO

Is this property receiving special valuation as historical property per chapter 84.26 RCW? YES NO

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.

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 _____

PRINT NAME _____

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

none

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

WAC No. (Section/Subsection) 458-61A-202

Reason for exemption Inheritance

Type of Document Affidavit in Lieu of Probate and Quitclaim Deed

Date of Document 1/21/16

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 \$	
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 JoAnn Boyd Signature of Grantee or Grantee's Agent JoAnn Boyd

Name (print) JoAnn Boyd Name (print) JoAnn Boyd

Date & city of signing: January 21, 2016, Lewiston, ID Date & city of signing: January 21, 2016, Lewiston, ID

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

REV 84 0001a (09/22/15) THIS SPACE - TREASURER'S USE ONLY COUNTY TREASURER

Creason, Moore, Dopken, & Seidl
Chk # 11206
(VW)

PAID
FEB 08 2016
ASOTIN COUNTY
TREASURER

40089
49089

AFTER RECORDING, RETURN TO:

Christopher J. Moore
Creason, Moore, Dokken & Geidl, PLLC
P. O. Drawer 835
Lewiston ID 83501

**AFFIDAVIT OF JOANN BOYD
LACK OF PROBATE – REAL PROPERTY**

Reference Numbers of Related Documents: N/A

Grantor: Boyd, JoAnn, individually and as a
successor in interest to George I. Boyd

Grantee: Boyd, JoAnn

Legal Description:

1. Real property located in Asotin County, Washington, described as follows:

Lot Two (2), Block One (1) of Westward Ho Addition, a subdivision of parts of Lots 1, 2, 3 and 4 of Block C-2, Clarkston Heights, Asotin County, Washington.
2. Additional legal description is included in the Affidavit of JoAnn Boyd Lack of Probate-Real Property.
3. Assessor's Parcel Number: APN: 1 128 00 002 0000 0000

49089

AFTER RECORDING MAIL TO:

Christopher J. Moore
P. O. Drawer 835
Lewiston, ID 83501

**AFFIDAVIT OF JOANN BOYD
LACK OF PROBATE - REAL PROPERTY**

STATE OF IDAHO)
 : ss.
County of Nez Perce)

JoAnn Boyd, being first duly sworn, deposes and says:

Affiant is the lawful surviving spouse of George I. Boyd, who died on May 15, 1995, at Spokane, Spokane County, Washington, then being a resident of Clarkston, Asotin County, Washington. A copy of the Certificate of Death is attached hereto.

Affiant has hereinbelow identified each and all of the heirs at law of decedent, including but not limited to his children, adopted children and the issue of any predeceased child or adopted child.

That the heirs of law of decedent are:

**AFFIDAVIT OF JOANN BOYD
LACK OF PROBATE – REAL PROPERTY - 1**

Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston ID 83501
(208)743-1516; Fax(208)746-2231

49089

NAME AND ADDRESS	RELATIONSHIP
JoAnn Boyd 2343 Valleyview Drive Clarkston, WA 99403	Wife Adult
Donald Alan Boyd 1017 12 th Street Clarkston, WA 99403	Son Adult
Gail Jean Heinz 733 E. Old Mesquite Street Kuna, ID 83634	Daughter Adult
Becky Jo Grinolds 2362 Rolling Hills Drive Clarkston, WA 99403	Daughter Adult

That affiant knows of her own knowledge, and so states, that each and all of the obligations against the marital community and against the estate of the decedent (including but not limited to: all the debts of decedent, all of the expenses of decedent's last illness, funeral and burial, promissory notes, installment contracts and mortgages, state and federal succession taxes upon decedent's estate, if applicable) have been paid in full.

A copy of the decedent's Last Will and Testament dated May 10, 1990, is attached hereto. Affiant is the sole distributee of decedent's estate.

This affidavit is made solely to transfer the Estate's interest in real property commonly referred to as 2343 Valleyview Drive, Clarkston, Asotin County, Washington, and more particularly described as follows:

Lot Two (2), Block One (1) of Westward Ho Addition, a subdivision of parts of Lots 1, 2, 3 and 4 of Block C-2, Clarkston Heights, Asotin County, Washington.

APN: 1 128 00 002 0000 0000

AFFIDAVIT OF JOANN BOYD
LACK OF PROBATE – REAL PROPERTY - 2

Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston ID 83501
(208)743-1516; Fax(208)746-2231

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Affiant hereby agrees to indemnify and hold harmless any person or entity who is damaged economically as the result of transferring or accepting title in reliance upon the representations in this document.

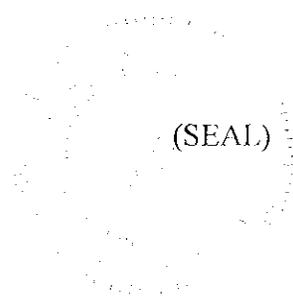
DATED This 21 day of January, 2016.

JoAnn Boyd
JoAnn Boyd
2343 Valleyview Drive
Clarkston, WA 99403

STATE OF IDAHO)
 : ss.
County of Nez Perce)

On this 21 day of January, 2016, before me, the undersigned, a notary public in and for said state, personally appeared JoAnn Boyd, known or identified to me to be the individual described in and who executed the foregoing instrument and acknowledged that she signed and sealed the same as her own free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN UNDER MY HAND AND OFFICIAL SEAL the day and year in this certificate first above written.



Sharon Kachmirew
Notary Public in and for said state,
residing at or employed in Lewiston.
My Commission Expires: 3/19/16

AFFIDAVIT OF JOANN BOYD
LACK OF PROBATE – REAL PROPERTY - 3

Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston ID 83501
(208)743-1516; Fax(208)746-2231

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STATE OF WASHINGTON
DEPARTMENT OF HEALTH

1485

LOCAL FILE NUMBER



CERTIFICATE OF DEATH

146

STATE FILE NUMBER

1 NAME First: George, Middle: I., Last: BOYD			2 SEX (M / F) M	3 DEATH DATE (Mo. Day, Yr) MAY 15, 1995	
4 AGE LAST BIRTH DAY (Yrs) 61	5 UNDER 1 YEAR MOS DAYS	6 UNDER 1 DAY HOURS MINS	7 BIRTHDATE (Mo. Day, Yr) MAY 01, 1934		8 BIRTHPLACE (City, State or Foreign Country) Rainier, OR
11 CITY, TOWN OR LOCATION OF DEATH Spokane			9 WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes / No) No		10 COUNTY OF DEATH Spokane
14 MARITAL STATUS—Married, Never Married, Widowed, Divorced (Specify) Married			15 SURVIVING SPOUSE (If wife, give maiden name) JoAnn Cone		16 SOCIAL SECURITY NO. [REDACTED]
17 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) 12			13 SMOKING IN LAST 15 YEARS? (Yes / No) No		
18 USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED) Laborer		19 KIND OF BUSINESS OR INDUSTRY Paper Products		20 Was Decedent of Hispanic origin or descent? (Ancestry) (Specify Yes or No. If Yes, specify Cuban, Mexican, Puerto Rican, etc.) (Yes / No) Specify: NO	
21 RACE (Specify) White		22 RESIDENCE—NUMBER AND STREET 1265 Elm #17			
23 CITY/TOWN, OR LOCATION Clarkston		24 INSIDE CITY LIMITS? (Yes / No) Yes	25A COUNTY Asotin	25B LENGTH OF RES. IN CO. 32yrs	26 STATE WA
27 ZIP CODE 99403		28 FATHER'S NAME—FIRST, MIDDLE, LAST Gene M. Boyd			
29 MOTHER'S NAME—FIRST, MIDDLE, MAIDEN SURNAME Lola G. Vassar		30 INFORMANT—NAME JoAnn Boyd			
31 MAILING ADDRESS 1265 Elm #17 - Clarkston, WA 99403		32 BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation			
33 DATE (Mo. Day, Yr) May 19, 1995		34 CEMETERY/CREMATORY—NAME Mt. View Crematory		35 LOCATION—CITY/TOWN, STATE Lewiston, ID	
36 FUNERAL DIRECTOR SIGNATURE [Signature]		37 NAME OF FACILITY Mt. View Funeral Home		38 ADDRESS OF FACILITY 83501 P.O. Box 664 Lewiston, Id	
39 TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED. SIGNATURE AND TITLE X M. Vishwanath			43 ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION, IN MY OPINION DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED. SIGNATURE AND TITLE X		
40 DATE SIGNED (Mo., Day, Yr) May 18, 1995		41 HOUR OF DEATH (24 Hrs.) 2016		44 DATE SIGNED (Mo., Day, Yr)	
42 NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		46 PRONOUNCED DEAD (Mo., Day, Yr)		45 HOUR OF DEATH (24 Hrs.)	
47 HOUR PRONOUNCED DEAD (24 Hrs.)		48 NAME AND ADDRESS OF CERTIFIER—PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print) Mandya Vishwanath MD 801 W. 5th #304 Spokane, WA 99204			
49 ME/CORONER FILE NUMBER		50 ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH:			
IMMEDIATE CAUSE (Final disease or condition resulting in death)		A CORONARY ART DISEASE / MYOCARDIAL INFARCTION		INTERVAL BETWEEN ONSET AND DEATH	
DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST.		B DUE TO, OR AS A CONSEQUENCE OF:		INTERVAL BETWEEN ONSET AND DEATH	
		C DUE TO, OR AS A CONSEQUENCE OF:		INTERVAL BETWEEN ONSET AND DEATH	
		D DUE TO, OR AS A CONSEQUENCE OF:		INTERVAL BETWEEN ONSET AND DEATH	
51 OTHER SIGNIFICANT CONDITIONS—CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN ABOVE.			52 AUTOPSY? (Yes / No) No		53 WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes / No) NO
54 ACC. SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		55 INJURY DATE (Mo. Day, Yr)		56 HOUR OF INJURY (24 Hrs)	
57 DESCRIBE HOW INJURY OCCURRED:		58 INJURY AT WORK? (Yes / No)			
59 PLACE OF INJURY—AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG, ETC. (Specify)		60 LOCATION—STREET OR RFD NO., CITY/TOWN, STATE			
61 RECORD AMENDMENT (Registrar use only) ITEM DOCUMENTARY EVIDENCE REVIEWED BY DATE #3. Affid by FH. LSM 10-2-95		62 REGISTRAR SIGNATURE [Signature]		63 DATE RECEIVED (Mo., Day, Yr) MAY 19 1995	

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

49089

Last Will and Testament of

GEORGE I. BOYD

KNOW ALL PERSONS BY THESE PRESENTS:

That I, GEORGE I. BOYD, residing at Clarkston, Asotin County, Washington, being of sound mind and memory, and not acting under duress, fraud, or undue influence of any person whomsoever, and being of legal age, do hereby make, publish, and declare this my LAST WILL AND TESTAMENT, as follows:

I

I hereby declare that I am married; that my wife's name is JO ANN BOYD; and, that I have three (3) children of my issue, namely: DONALD ALAN BOYD, of Hampton, Virginia; GAIL JEAN HEINZ, of Clarkston, Washington; and BECKY JO GRINOLDS, of Clarkston, Washington, all of legal age.

II

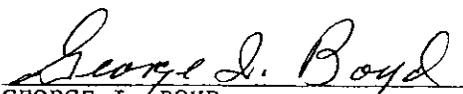
I hereby revoke any and all Wills and Codicils previously made by me, and declare this my LAST WILL AND TESTAMENT.

III

I hereby direct and order that all of my legally due debts, expenses of my last illness and funeral, the costs and charges of the administration of my estate, and any and all estate, inheritance, or transfer taxes and other taxes due thereon or therefrom be paid as soon after my death as is practical; PROVIDED, HOWEVER, that this direction shall not authorize any creditor to require payment of any debt or obligation prior to its normal maturity in due course.

IV

I hereby declare that my wife, JO ANN BOYD, and I have herewith entered into a Community Property Agreement. Therefore, if I predecease my said spouse, I direct that all of my property shall pass to her in accordance with said Community Property Agreement.


GEORGE I. BOYD
LAST WILL AND TESTAMENT

-1-

LAW OFFICE OF
WILLIAM D. ACEY
733 FIFTH STREET, SUITE M
CLARKSTON, WASHINGTON 99403
(509) 758-4545

49089

V

In the event my wife, JO ANN BOYD, should predecease me or we die in a common disaster, or under such circumstances as to render it difficult to determine which of us died first, then I give, devise, and bequeath all the rest, residue, and remainder of my estate, to my three children above-named, in equal shares, share and share alike.

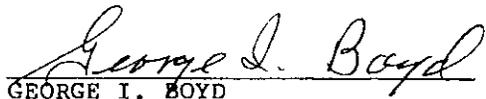
In the event any of my children above named should predecease both my wife and me, then I give, devise, and bequeath their share of my estate to their child or children who survive, in equal shares, share and share alike.

VI

I have prepared, dated, and signed a list of specific bequests of personal property which is attached to this, my Last Will and Testament, and have indicated thereon my desires as to distribution of items after my death. I trust my Personal Representative will honor this list, without making a reduction from the respective beneficiary's share. It is possible that the respective value or dollar amount of these items may not necessarily be equal; however, this shall have no effect on the balance of the provisions in this Will.

VII

I nominate and appoint my wife, JO ANN BOYD, as Personal Representative of my estate, to act without bond and without the intervention of any court to the fullest extent allowed by law, and I hereby direct that my Personal Representative shall settle my estate in such a manner as shall seem best and most convenient to her, and I hereby empower my Personal Representative to mortgage, lease, sell, exchange, or convey the personal or real property of my estate without an order of court for these purposes, and in all other respects to administer and settle my estate without the intervention of any court. If for any reason my said named Personal Representative is unwilling or unable to act as such, or predeceases me, then as alternate, I nominate and appoint BECKY JO GRINOLDS as alternate Personal Representative with like powers and privileges.


GEORGE I. BOYD

LAST WILL AND TESTAMENT

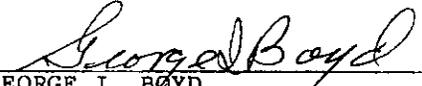
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VIII

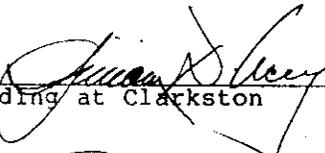
To any other person not named as a beneficiary herein who can prove in a court of competent jurisdiction that he/she is entitled to inherit from my estate, I give and devise the sum of Five Dollars (\$5.00) and no more.

IN WITNESS WHEREOF, I have hereunto set my hand at Clarkston, Washington, this 10th day of May, 1990.

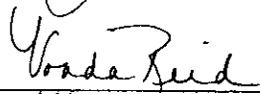


GEORGE I. BOYD

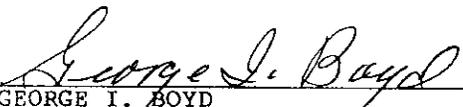
The foregoing instrument consisting of three (3) type-written pages, including the one on which this attestation clause is written, was by GEORGE I. BOYD signed, sealed and published by him to be his LAST WILL AND TESTAMENT in the presence of us and each of us, at Clarkston, Washington, who at his request and in his presence have hereunto subscribed our names as witnesses, and at the time of the execution hereof by him, he was of sound and disposing mind and memory and not acting under any duress or undue influence and each page of this Will bears the signature of the said testator.



Residing at Clarkston



Residing at Clarkston



GEORGE I. BOYD
LAST WILL AND TESTAMENT

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AFFIDAVIT OF ATTESTING WITNESSES

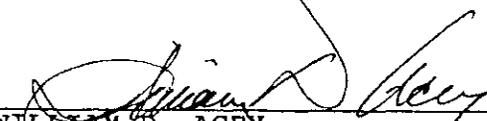
STATE OF WASHINGTON)
 : ss
County of Asotin)

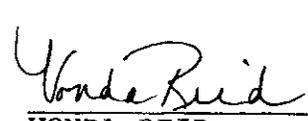
We, the undersigned, being first duly sworn upon oath, depose and say:

That we and each of us reside in the County of Asotin, State of Washington, and are over the age of 18 years; that we each knew GEORGE I. BOYD, the testator, on the 10th day of May, 1990, the date of that certain instrument attached to this affidavit purporting to be the LAST WILL AND TESTAMENT of said testator. The said instrument was signed and executed by the said testator at Clarkston, in Asotin County, Washington, on the said day it bears date, in our presence, and the said testator thereupon published the said instrument as, and declared the same to be, his LAST WILL AND TESTAMENT, and requested us in attestation thereof to subscribe our names as witnesses thereto; and we then and there in the presence of the said testator and at his request, and in the presence of each other, subscribed our names as witnesses to the said instrument and to this Affidavit.

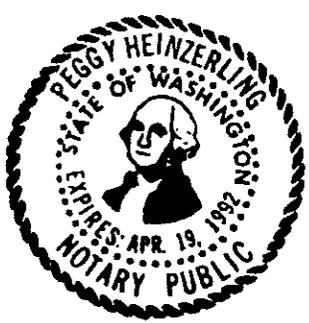
At the time of the execution of said instrument and this Affidavit, the said testator was of the age of majority and appeared to be of sound and disposing mind, and not acting under duress, menace, fraud, undue influence, or misrepresentation.

This Affidavit is made at the request of the Testator, pursuant to the provisions of RCW 11.20.020(2), who signed the instrument to which this Affidavit is attached.


WILLIAM D. ACEY
2758 Florence Court
Clarkston, WA 99403


VONDA REID
1337 Seventh Street
Clarkston, WA 99403

SIGNED AND SWORN TO before me by WILLIAM D. ACEY and VONDA REID on May 10, 1990.




Notary Public in and for the
State of Washington
Residing at Lewiston, Idaho
My appointment expires: 4-19-92

LAW OFFICE OF
WILLIAM D. ACEY
733 FIFTH STREET, SUITE M
CLARKSTON, WASHINGTON 99403
(509) 758-4545

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