



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.

Form sections 1-3: Seller/Grantor and Buyer/Grantee information, including names, addresses, and tax correspondence details.

Form section 4: Property address and location details, including street address and county.

Form sections 5-6: Land use codes, exemptions, and notices of continuance/compliance.

Form section 7: Personal property included in selling price and tax calculation table.

Form section 8: Signature lines for Grantor and Grantee.

Perjury: Perjury is a class C felony which is punishable by imprisonment in the State Penitentiary 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...

Handwritten note: Kinsley Law Office, CK # 4371, (VW)

PAID stamp: OCT 04 2016 ASOTIN COUNTY TREASURER

Handwritten number: 49706

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2015-033470

LOCAL FILE NUMBER: 503

DATE ISSUED: 11/25/2015

FEE NUMBER: 3815081122

GIVEN NAMES: ELDRED WAYNE  
LAST NAME: CHRISTIAN

COUNTY OF DEATH: WHITMAN  
DATE OF DEATH: NOVEMBER 23, 2015  
HOUR OF DEATH: 10:10 P.M.  
SEX: MALE  
AGE: 85 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT HISPANIC  
RACE: WHITE

BIRTHDATE: AUGUST 16, 1930  
BIRTHPLACE: PULLMAN, WASHINGTON

MARITAL STATUS: MARRIED  
SPOUSE: SANDRA LAGE

OCCUPATION: HEAVY EQUIPMENT OPERATOR  
INDUSTRY: WHITMAN COUNTY  
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED  
US ARMED FORCES? YES

INFORMANT: SANDRA CHRISTIAN  
RELATIONSHIP: WIFE  
ADDRESS: 2232 THIRD AVE, CLARKSTON, WASHINGTON, 99403

PLACE OF DEATH: NURSING HOME / LONG TERM CARE FACILITY  
FACILITY OR ADDRESS: MEMORY VILLAS AT BISHOP PLACE  
CITY, STATE, ZIP: PULLMAN, WASHINGTON 99163

RESIDENCE STREET: 2232 THIRD AVE  
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403  
INSIDE CITY LIMITS? YES  
COUNTY: ASOTIN  
TRIBAL RESERVATION: NOT APPLICABLE  
LENGTH OF TIME AT RESIDENCE: 8 YEARS

FATHER: IRA CHRISTIAN  
MOTHER: DESSIE HATLEY

METHOD OF DISPOSITION: BURIAL  
PLACE OF DISPOSITION: PULLMAN CITY CEMETERY  
CITY, STATE: PULLMAN, WA  
DISPOSITION DATE: NOVEMBER 30, 2015

FUNERAL FACILITY: KIMBALL FUNERAL HOME  
ADDRESS: 905 SOUTH GRAND AVENUE  
CITY, STATE, ZIP: PULLMAN WA 99163  
FUNERAL DIRECTOR: ROBERT K. WARNOCK

CAUSE OF DEATH:

A. SEPSIS FROM URINARY TRACT INFECTION  
INTERVAL: 4 DAY ONSET NOV 20

B. INTERVAL:

C. INTERVAL:

D. INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:  
CONGESTIVE HEART FAILURE, FALLS, HYPERTENSION

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

LOCATION OF INJURY:

CITY, STATE, ZIP:  
COUNTY:

DESCRIBE HOW INJURY OCCURRED:

MANNER OF DEATH: NATURAL  
AUTOPSY: NO

AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE  
DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN  
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: ANMOL KAHLOH MD  
TITLE: PHYSICIAN  
CERTIFIER  
ADDRESS: 825 SE BISHOP BLVD  
CITY, STATE, ZIP: PULLMAN WA 99163  
DATE SIGNED: NOVEMBER 25, 2015

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:  
NOT APPLICABLE

ITEM(S) AMENDED: NONE

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

CASE REFERRED TO ME/CORONER: YES  
FILE NUMBER: 15-WC107  
ATTENDING PHYSICIAN:  
ANMOL KAHLOH MD

LOCAL DEPUTY REGISTRAR:  
VICKY COCHRAN  
DATE RECEIVED: NOVEMBER 25, 2015

CERTIFIED

FILED

2016 JAN -5 A 11:46

SPRING GEGGART  
CLERK  
LEWISTON, WA

SUPERIOR COURT OF WASHINGTON  
FOR ASOTIN COUNTY

In re the Estate of:

) CASE NO.:

16 - 4 - 00001 - 3

ELDRED W. CHRISTIAN,

) LETTERS TESTAMENTARY

Deceased.

WHEREAS, the Last Will of the above named decedent having been proven and recorded in this Court on January 5, 2016.

NOW THEREFORE, know all men by these presents: That SANDRA K. CHRISTIAN is hereby appointed and qualified as Personal Representative of said estate, and that we do hereby authorize the above named to execute said Will according to law.

DATED this 5<sup>th</sup> day of January, 2016.

Tici Jarris, Deputy  
CLERK

RISLEY LAW OFFICE, PLLC  
LEWISTON, IDAHO

49706

CERTIFICATE

I, MARIE EGGART, Clerk of the Asotin County Superior Court, certify that the above and foregoing is a true and correct copy of the Letters Testamentary in the above-named case and were entered on January 5, 2016.

I further certify that these Letters are now in full force and effect.

DATED this 6<sup>th</sup> day January, 2016.

CLERK OF THE SUPERIOR COURT

By *Traci Jarris*  
Deputy



49706