



MOBILE HOME REAL ESTATE EXCISE TAX AFFIDAVIT

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

Chapter 82.45 RCW Chapter 458-61A WAC

This form is your receipt when stamped by cashier.

FOR USE WHEN TRANSFERRING TITLE TO MOBILE HOME ONLY

PLEASE TYPE OR PRINT INCOMPLETE AFFIDAVITS WILL NOT BE ACCEPTED

REGISTERED OWNER: Name: Glenn Lewis, Linda Miller, Richard Broemeling; Mike Broemeling; Street: 1432 12th St.; City: Lewiston; State: ID; Zip Code: 83501

LOCATION OF MOBILE HOME: Name: Sonary Crest; Street: 2015 6th Ave. #149; City: Clarkston; State: WA; Zip Code: 99403

NEW REGISTERED OWNER: Name: Larry Bearden; Terri Bearden; Street: 2015 6th Ave. #149; City: Clarkston; State: WA; Zip Code: 99403

LEGAL OWNER: Name: Larry Bearden; Terri Bearden; Street: 2015 6th Ave. #149; City: Clarkston; State: WA; Zip Code: 99403

PERSONAL PROPERTY PARCEL or ACCOUNT NO. 5-041-35-002-0002-1490 LIST ASSESSED VALUE(S): \$ 6,000.00

REAL PROPERTY PARCEL or ACCOUNT NO. LIST ASSESSED VALUE(S): \$

Table with 6 columns: MAKE, YEAR, MODEL, SIZE, SERIAL NO. or I.D., REVENUE TAX CODE NO. Row 1: GENTRY, 1975, 68/14, n5161s5880, 23P

Date of Sale: 12/01/2016; Taxable Sale Price: \$ 21,250.00; Excise Tax: State \$ 272.00, Local \$ 53.13; Delinquent Interest: State \$, Local \$ 0.0025; Delinquent Penalty: \$; Subtotal: \$ 325.13; State Technology Fee: \$ 5.00; Affidavit Processing Fee: \$; Total Due: \$ 330.13; WAC No. (Sec/Sub); WAC Title; A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX.

Asotin

AFFIDAVIT: I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. Signature of Grantor/Agent: Richard Broemeling; Date and Place of Signing: 12/1/2016 - Clarkston, WA; Signature of Grantee/Agent: Larry Bearden; Date & Place of Signing: 12/1/2016 - Clarkston, WA

TREASURER'S CERTIFICATE: I hereby certify that property taxes due Asotin County on the mobile home described hereon have been paid to and including the year 2016. Date: 12/5/16. County Treasurer or Deputy: R. Allen

If, in selling (or otherwise transferring ownership of) a mobile home which possesses a tax lien, the seller does not inform the buyer (new owner) of such a lien, the seller is guilty of deliberate deception as it applies to Fraud and/or Theft as defined in Title 9 and 9A RCW (RCW 9.45.060, RCW 9A.56.010 (4d), and RCW 9A.56.020).

THIS SPACE - TREASURER'S USE ONLY

REV 84 0003e (4/9/08) COUNTY TREASURER

ATEC CK #17942

PAID

DEC 05 2016

ASOTIN COUNTY TREASURER

45896

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2016-037280

LOCAL FILE NUMBER: 3419

DATE ISSUED: 09/19/2016

FEE NUMBER: 0003201071

GIVEN NAMES: ROBERTA ANNE
LAST NAME: LIGHT

COUNTY OF DEATH: SPOKANE
DATE OF DEATH: SEPTEMBER 12, 2016
HOUR OF DEATH: 06:40 P.M.
SEX: FEMALE
AGE: 84 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: JULY 24, 1932
BIRTHPLACE: CODELL, ROOKS CNTY, KANSAS

MARITAL STATUS: DIVORCED
SPOUSE:

OCCUPATION: SECRETARY
INDUSTRY: TRUCKING COMPANY
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES? NO

INFORMANT: MICHAEL J. BROEMELING
RELATIONSHIP: SON
ADDRESS: 13612 NORTH STONE LANE, SPOKANE, WA 99208

PLACE OF DEATH: HOSPITAL
FACILITY OR ADDRESS: PROVIDENCE HOLY FAMILY HOSPITAL
CITY, STATE, ZIP: SPOKANE, WASHINGTON 99208

RESIDENCE STREET: 302 EAST WEDGEWOOD AVENUE 239
CITY, STATE, ZIP: SPOKANE, WASHINGTON 99208
INSIDE CITY LIMITS? YES
COUNTY: SPOKANE
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 3 MONTHS

FATHER/PARENT: FORREST H SIDWELL
MOTHER/PARENT: VERNEDA ZEIGLER

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: BALL & DODD FUNERAL HOME & CRE
CITY, STATE: SPOKANE, WA
DISPOSITION DATE: SEPTEMBER 16, 2016

FUNERAL FACILITY: NEPTUNE SOCIETY - SPOKANE
ADDRESS: 222 EAST FRANCIS AVENUE
CITY, STATE, ZIP: SPOKANE WA 99208
FUNERAL DIRECTOR: CHARLES S WETMORE

CAUSE OF DEATH:

- A. ACUTE RESPIRATORY FAILURE WITH HYPOXEMIA
INTERVAL: DAYS
- B. ACUTE CONGESTIVE HEART FAILURE
INTERVAL: DAYS
- C. SEVERE CHRONIC OBSTRUCTIVE PULMONARY DISEASE
INTERVAL: YEARS
- D. ATRIAL FIBRILLATION WITH RAPID VENTRICULAR RESPONSE
INTERVAL: DAYS

OTHER CONDITIONS CONTRIBUTING TO DEATH:

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? NO
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: JEREMY M. COPE, MD

TITLE: PHYSICIAN

CERTIFIER

ADDRESS: 5633 N. LIDGERWOOD STREET

CITY, STATE, ZIP: SPOKANE WA 99220

DATE SIGNED: SEPTEMBER 14, 2016

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

ITEM(S) AMENDED: NONE

NUMBER(S): NONE

DATE(S): NONE



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

LOCAL DEPUTY REGISTRAR:
SANDRA HUNS
DATE RECEIVED: SEPTEMBER 15, 2016

49896

DOH 01-003 (10/15)

Affidavit of Inheritance / Litigation

License Plate/Registration Number @75692	Year 1975	Make GENTRY	Series/Body Style 68/14
Vehicle Identification Number (VIN) OR Vessel Hull Identification Number (HIN) N5161S5880			

INHERITANCE

NOTE: This affidavit is to be used when no executor or administrator is appointed.

I, being duly sworn, depose and say that Roberta Light, who is the registered owner of this vehicle/vessel, died on the 12th day of September, 2016

That the deceased left no estate necessitating administration, and no letters of administration or letters testamentary have been issued to any persons; that said vehicle/vessel has not been bequeathed by will to anyone other than

the undersigned; that the undersigned is Son of the deceased; that no relative who would have prior right, except Linda Miller, Mike Broemeling, and Richard Broemeling survives said deceased,

and that provision has been made for payment of debts of the deceased. **SEE BELOW FOR NOTARY/CERTIFICATION OF SIGNATURE.**

Glenn Lewis

Printed Name

[Signature]
Signature

COUNTY CLERK CERTIFICATE FOR TRANSFER OF VEHICLE/VESSEL IN LITIGATION

This certificate, properly completed, will serve instead of all other court papers. Section 1 will suffice for all cases where an order of the court is entered transferring title to a motor vehicle/vessel. This may be used in divorce cases as well as probates.

I certify that in the superior court of the State of Washington for the County of _____:

1. An order transferring title to this vehicle/vessel to: _____

at _____ was duly entered in _____

_____ on the _____ day of _____, _____

For those cases in which the estate executor or administrator transfers title.

2. _____ was duly appointed under the nonintervention will

of _____; that they are qualified to act as such, and that a

decree of solvency has been entered. _____

	NOTARIZATION / CERTIFICATION	
	State of Washington <u>Georgia</u> County of <u>Hall</u>	Signed or attested before me on <u>11-30-2016</u>
	by <u>Glenn Lewis</u> Printed Name of Person Signing Document	Signature <u>[Signature]</u> Notary / Agent Signature
	Notary's Name (PRINTED or STAMPED) <u>Anita Sweet</u>	
Title _____ Notary / Agent	Dealer No. OR _____ AND: County / Office No. OR _____	Notary Expiration Date _____

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-3600 or TTY (360) 664-8885.

49896

Affidavit of Inheritance / Litigation

License Plate/Registration Number <u>@75692</u>	Year <u>1975</u>	Make <u>GENTRY</u>	Series/Body Style <u>68/14</u>
Vehicle Identification Number (VIN) OR Vessel Hull Identification Number (HIN) <u>N5161S5880</u>			

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Linda Miller X Linda Miller

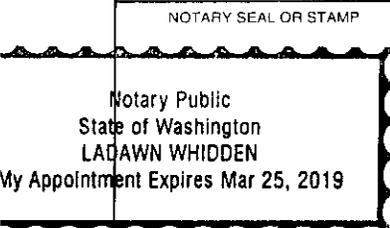
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I certify that in the superior court of the State of Washington for the County of _____:

1. An order transferring title to this vehicle/vessel to: _____ at _____ was duly entered in _____ on the _____ day of _____, X

For those cases in which the estate executor or administrator transfers title. 2. _____ was duly appointed under the nonintervention will of _____; that they are qualified to act as such, and that a decree of solvency has been entered. X



NOTARIZATION / CERTIFICATION

State of Washington County of Columbia Signed or attested before me on December 15th, 2016

by Linda Miller Signature Linda Miller

Notary's Name (PRINTED or STAMPED) Linda Miller

Title notary public AND: County / Office No. OR March 25th, 2019

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the undersigned; that the undersigned is Son of the deceased; that no relative who would have prior right, except Richard Broemeling, and Glenn Lewis, and Linda Miller survives said deceased,

and that provision has been made for payment of debts of the deceased. **SEE BELOW FOR NOTARY/CERTIFICATION OF SIGNATURE.**

Mike Broemeling Printed Name X [Signature] Signature

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I certify that in the superior court of the State of Washington for the County of: _____:

1. An order transferring title to this vehicle/vessel to: _____ at _____ was duly entered in _____ on the _____ day of _____, X _____.

For those cases in which the estate executor or administrator transfers title. 2. _____ was duly appointed under the nonintervention will of _____; that they are qualified to act as such, and that a decree of solvency has been entered. X _____



NOTARIZATION / CERTIFICATION

State of Washington County of Snohomish Signed or attested before me on 11-29-16

by Mike Broemeling Signature [Signature]
Printed Name of Person Signing Document Notary / Agent Signature

Notary's Name (PRINTED or STAMPED) Travis R Greer

Title Notary Public AND: County / Office No. OR 413012020
Notary / Agent Notary Expiration Date

Affidavit of Inheritance / Litigation

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Richard Broemeling X [Signature]

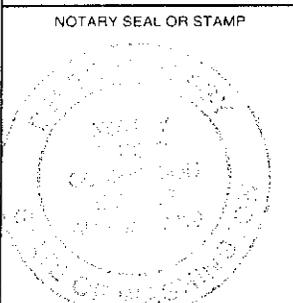
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For those cases in which the estate executor or administrator transfers title. 2. _____ was duly appointed under the nonintervention will of _____; that they are qualified to act as such, and that a decree of solvency has been entered. _____



NOTARIZATION / CERTIFICATION

State of Washington County of Asotin Signed or attested before me on 12/1/2016

by Richard Broemeling Signature [Signature]

Notary's Name (PRINTED or STAMPED) Debbie C. Heagy

Title Notary AND: County / Office No. OR 8/26/2019

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