

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>Denene Banger & Philip D. Corlis, Trustees</u> <u>Robert D. & Myrla P. Corlis Survivors Trust A</u>	BUYER GRANTEE	2 Name <u>Kory J. Hendrickson</u> <u>Molly J. Hendrickson</u>
	Mailing Address <u>4940 N. Anne Street</u>		Mailing Address <u>1939 Golfview Drive</u>
	City/State/Zip <u>Coeur D' Alene ID 83815</u>		City/State/Zip <u>Clarkston WA 99403</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>Kory J. Hendrickson Molly J. Hendrickson</u>	<u>10043801000030000</u> <input type="checkbox"/>		<u>60,000.00</u>
Mailing Address <u>1939 Golfview Drive</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: Land Only (1930 Coulter Lane), Clarkston, WA

This property is located in unincorporated Asotin County OR within city of Unincorp

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.

see attached legal description

5 Select Land Use Code(s):
91 Undeveloped land (land only)

enter any additional codes: _____

(See back of last page for instructions)

	YES	NO
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)?	<input type="checkbox"/>	<input checked="" 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 RCW?	<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 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.

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

WAC No. (Section/Subsection) _____

Reason for exemption _____

Type of Document Statutory Warranty Deed (SWD)

Date of Document 07/25/17

Gross Selling Price \$	<u>79,000.00</u>
*Personal Property (deduct) \$	<u>0.00</u>
Exemption Claimed (deduct) \$	<u>0.00</u>
Taxable Selling Price \$	<u>79,000.00</u>
Excise Tax : State \$	<u>1,011.20</u>
Local \$	<u>197.50</u>
*Delinquent Interest: State \$	<u>0.00</u>
Local \$	<u>0.00</u>
*Delinquent Penalty \$	<u>0.00</u>
Subtotal \$	<u>1,208.70</u>
*State Technology Fee \$	<u>5.00 5.00</u>
*Affidavit Processing Fee \$	<u>0.00</u>
Total Due \$	<u>1,213.70</u>

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>Denene Banger</u>	Signature of Grantee or Grantee's Agent <u>Kory J. Hendrickson</u>
Name (print) <u>Denene Banger & Philip D. Corlis Trustees</u>	Name (print) <u>Kory J. Hendrickson</u>
Date & city of signing: <u>7.28.17, Clarkston, WA</u>	Date & city of signing: <u>7.28.17, 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)).

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

ATEC CK# 20197
JUL 28 2017
ASOTIN COUNTY TREASURER
50443

EXHIBIT "A"

6683

at part of Lot 10 in Block "BBB" of Vineland, according to the official plat thereof, filed in Book C of Plats at Page(s) 3, records of Asotin County, Washington, more particularly described as follows: Beginning at the Southeast corner of said Lot 10; thence North 80°51' West along the South line of said Lot 10 a distance of 90.0 feet; thence North 85°10' West along said South line a distance of 62.0 feet; thence North 64°45' West along said South line a distance of 309.91 feet; thence North 39°04' East a distance of 141.69 feet; thence South 73°56' East a distance of 185.85 feet to a point on the East line of said Lot 10; thence South 0°27' West along said East line a distance of 162.99 feet to the Place of Beginning.

TOGETHER WITH AN EASEMENT FOR INGRESS EGRESS AND UTILITIES

at part of Lot 8 in Block "BBB" of Vineland, according to the official plat thereof, filed in Book C of Plats at Page(s) 3, records of Asotin County, Washington, more particularly described as follows:

Beginning at the Southwest corner of said Lot 8; thence South 80°51' East along the South line of said Lot 8 a distance of 67.99 feet to a point on the Westerly right-of-way lien of Coulter Street; thence deflect left and continue along said right-of-way lien around a curve to the right with a radius of 173.5 feet for a distance of 9.97 feet; thence North 54°60' West a distance of 100.00 feet to a point on the West line of said Lot 8; thence South 0°27' West along said West line a distance of 50.00 feet to the Point of Beginning.

KJH MJH

EXHIBIT "A"

356683

That part of Lot 10 in Block "BBB" of Vineland, according to the official plat thereof, filed in Book C of Plats at Page(s) 3, records of Asotin County, Washington, more particularly described as follows: Beginning at the Southeast corner of said Lot 10; thence North 80°51' West along the South line of said Lot 10 a distance of 90.0 feet; thence North 85°10' West along said South line a distance of 62.0 feet; thence North 64°45' West along said South line a distance of 309.91 feet; thence North 39°04' East a distance of 141.69 feet; thence South 73°56' East a distance of 356.85 feet to a point on the East line of said Lot 10; thence South 0°27' West along said East line a distance of 162.99 feet to the Place of Beginning.

TOGETHER WITH AN EASEMENT FOR INGRESS EGRESS AND UTILITIES

That part of Lot 8 in Block "BBB" of Vineland, according to the official plat thereof, filed in Book C of Plats at Page(s) 3, records of Asotin County, Washington, more particularly described as follows:

Beginning at the Southwest corner of said Lot 8; thence South 80°51' East along the South line of said Lot 8 a distance of 67.99 feet to a point on the Westerly right-of-way lien of Coulter Lane; thence deflect left and continue along said right-of-way lien around a curve to the right with a radius of 173.5 feet for a distance of 9.97 feet; thence North 54°60' West a distance of 89.45 feet to a point on the West line of said Lot 8; thence South 0°27' West along said West line a distance of 50.00 feet to the Point of Beginning.

KTH MJH

50443

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



DATE ISSUED: 03/30/2017
FEE NUMBER:

CERTIFICATE NUMBER: 2017-014800

FIRST AND MIDDLE NAME(S): MYRLA
LAST NAME(S): CORLIS

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: MARCH 27, 2017
HOUR OF DEATH: 04:20 AM
SEX: FEMALE AGE: 92 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO
RACE: WHITE

BIRTH DATE: DECEMBER 09, 1924
BIRTHPLACE: HENEFER, SUMMIT COUNTY, UTAH

MARITAL STATUS: WIDOWED
SPOUSE: NOT APPLICABLE

OCCUPATION: REGISTERED NURSE
INDUSTRY: MEDICAL
EDUCATION: ASSOCIATE DEGREE
US ARMED FORCES: NO

INFORMANT: DENENE BANGER
RELATIONSHIP: DAUGHTER
ADDRESS: 4940 N. ANNE STREET, COEUR D'ALENE, IDAHO 83815

CAUSE OF DEATH:
A: BRAIN HERNIATION
INTERVAL: DAYS
B: INTRA CRANIAL HEMORRHAGE
INTERVAL: DAYS
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

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

LOCATION OF INJURY:

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

IF TRANSPORTATION INJURY SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOSPITAL
FACILITY OR ADDRESS: TRI-STATE MEMORIAL HOSPITAL, INC.
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403

RESIDENCE STREET: 1920 COULTER LANE
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403
INSIDE CITY LIMITS: NO COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 50 YEARS

FATHER/PARENT: HOWARD PHILIP PASKETT
MOTHER/PARENT: MARGUERITE REISER

METHOD OF DISPOSITION: BURIAL
PLACE OF DISPOSITION: VINELAND CEMETERY

CITY, STATE: CLARKSTON, WASHINGTON
DISPOSITION DATE: APRIL 08, 2017

FUNERAL FACILITY: VASSAR-RAWLS FUNERAL HOME

ADDRESS: 920 21ST AVENUE
CITY, STATE, ZIP: LEWISTON, IDAHO 83501
FUNERAL DIRECTOR: DENNIS W. HASTINGS

MANNER OF DEATH: NATURAL
AUTOPSY: NO
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE
CAUSE OF DEATH: NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH: NO
PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: ANUPAM ARORA, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 1221 HIGHLAND AVE
CITY, STATE, ZIP: CLARKSTON, WA 99403
DATE SIGNED: MARCH 27, 2017

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

LOCAL DEPUTY REGISTRAR: BRADY WOODBURY
DATE RECEIVED: MARCH 29, 2017

50443



Affidavit for Correction

Mail to: Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
360-236-4300

This is a legal document. Complete in ink and do not alter.

STATE OFFICE USE ONLY

State File Number	Fee Number	Initials	Date	Affidavit Number
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Required information must match current information on record

Record Type: Birth Death Marriage Dissolution (Divorce)

1. Name on Record: First Middle Last 2. Date of Event: MM/DD/YYYY 3. Place of Event: City or County

4. Father/Parent Full Legal Name (Spouse A for Marriage or Dissolution) 5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution)

6. Name of Person Requesting Correction: Relationship to Person on Record: Self Guardian Informant Hospital Parent(s) Funeral Director Other (specify)

7. Return Mailing Address: P.O. Box or Street Address City State Zip

Telephone Number: Email Address:

Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:

The record now shows:	The true fact is:
8.	9.
10.	11.
12.	13.
14.	15.

I declare under penalty of perjury under the laws of the State of Washington that the forgoing is true and correct

16a. Signature: 16b. Signature of 2nd parent (if required):

Printed name: Date: Printed name: Date:

INSTRUCTIONS – go to www.doh.wa.gov for more information

Driver's license, Social Security card or hospital decorative birth certificate cannot be used as proof

Required documentary proof must be submitted with the affidavit and include full name and birth date. Examples of documentary proof include:

- Birth/Marriage/Divorce record
- Military record (DD-214)
- School transcripts
- Social Security Numident Report
- Certificate of Naturalization
- Hospital/medical record
- Passport
- Green/Permanent Resident card (I-551)

Birth Certificates

1. Only a parent(s), legal guardian (if the child is under 18), or the named individual (if 18 or older) may change the birth certificate.

2. The proof(s) must match the asserted fact(s). For example, if the affidavit says the name should be Mary Ann Doe, the proof must show the name to be Mary Ann Doe.

3. Documentary proof must be five or more years old or established within five years of birth.

Child under 18

- If legal guardian(s), include certified court order proving guardianship
- Up to age one, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names)*
- After age one, a court order is required to change the last name
- No proof is required to change the first or middle name*
- To correct parent's information, one documentary proof is required.
- To correct the sex of the child, one documentary proof from a medical provider is required

Adult (18 years or older)

- Only the adult can change his or her birth certificate
- If the first or middle name is missing, three pieces of documentary proof are required
- If the first, middle and/or last name is misspelled, or date of birth is incorrect, two pieces of documentary proof are required
- To correct parent's birth date, place of birth, or name, one documentary proof is required

*To change any part of the name of a child, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate with request.

This affidavit cannot be used to add a father to a birth certificate (use paternity acknowledgment form DOH 42-032)

Death Certificates

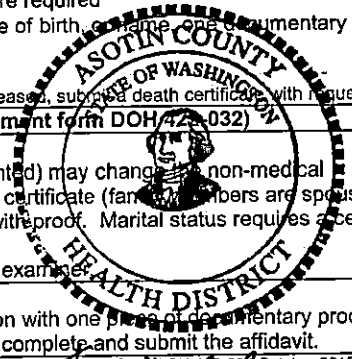
1. Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change non-medical information. Proof is required to make changes if requested by a family member not listed as the informant on the certificate (family members are spouse or registered domestic partner, parent, sibling or adult child or stepchild). The informant may change marital status with proof. Marital status requires a certified copy of a court order if someone other than the informant is requesting the change.

2. The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

1. Personal facts (minor spelling changes in name, date or place of birth or residence) may be changed by the person with one piece of documentary proof.

2. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.



Joel McCullough, M.D., MPH, MS
Health Officer

MAR 30 2017



0 1 2 5 1 0 8 6

Certificate not valid unless the Seal of the State of Washington changes color when heat applied.

50443

SECOND AMENDMENT TO
ROBERT D. CORLIS AND MYRLA P. CORLIS TRUST
DATED DECEMBER 10, 1998

THIS SECOND AMENDMENT TO THE ROBERT D. CORLIS AND MYRLA P. CORLIS TRUST DATED DECEMBER 10, 1998, is made and entered into this 31st day of March, 2010, by and between MYRLA P. CORLIS, of Clarkston, Washington, as the Surviving TRUSTOR and MYRLA P. CORLIS, DENENE BANGER and PHILIP D. CORLIS, as the TRUSTEES.

ROBERT D. CORLIS is now deceased and the ROBERT D. CORLIS AND MYRLA P. CORLIS TRUST DATED DECEMBER 10, 1998, was divided into a Survivor's Trust "A" and a Family Trust "B" after the death of ROBERT D. CORLIS.

The TRUSTOR, pursuant to the authority reserved to her under Article XIII, does hereby amend Article VIII as such Article pertains to the Survivor's Trust "A" by the addition of the following language.

VIII
Disposition of Death of Surviving TRUSTOR

3. In the event DENENE BANGER shall predecease the surviving TRUSTOR, then the one-half (1/2) share of the Survivor's Trust "A" that would have been distributed to DENENE BANGER provided she had survived the surviving TRUSTOR shall be distributed WILLIAM JOSEPH BANGER provided the following conditions have been met:

a. WILLIAM JOSEPH BANGER has survived DENENE BANGER and the surviving TRUSTOR.

b. That WILLIAM JOSEPH BANGER was married to DENENE BANGER at the time of death of DENENE BANGER.

c. That at the time of the death of DENENE BANGER there was no divorce proceeding or separation proceeding pending.

In the event WILLIAM JOSEPH BANGER shall fail to satisfy all of the conditions set forth above, then the one-half (1/2) share of the Survivor's Trust "A" that would have been distributed to DENENE BANGER provided she had survived the surviving TRUSTOR shall be distributed one-half (1/2) to CURTIS WILLIAM BANGER and one-half (1/2) to MATTHEW CORLIS BANGER, in equal shares, share and share alike.

4. In the event PHILIP D. CORLIS shall predecease the surviving TRUSTOR, then the one-half (1/2) share of the Survivor's Trust "A" that would have been distributed to PHILIP D. CORLIS provided he had survived the surviving TRUSTOR shall be distributed KIMBERLY ANN CORLIS provided the following conditions have been met:

a. KIMBERLY ANN CORLIS has survived PHILIP D. CORLIS and the surviving TRUSTOR.

b. That KIMBERLY ANN CORLIS was married to PHILIP D. CORLIS at the time of death of PHILIP D. CORLIS.

c. That at the time of the death of PHILIP D. CORLIS there was no divorce proceeding or separation proceeding pending.

In the event KIMBERLY ANN CORLIS shall fail to satisfy all of the conditions set forth above, then the one-half (1/2) share of the Survivor's Trust "A" that would have been distributed to PHILIP.D. CORLIS provided he had survived the surviving TRUSTOR shall be distributed one-half (1/2) to BRIANNA CHRISTINE WILLIAMS and one-half (1/2) to SCOTT ROBERT ROZELL, in equal shares, share and share alike.

Except as herein amended the provisions of the ROBERT D. CORLIS AND MYRLA P. CORLIS TRUST DATED DECEMBER 10, 1998, shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have set their hands and seals the day and year hereinabove first written.

Myrla P. Corlis
MYRLA P. CORLIS

"SURVIVING TRUSTOR"

Myrla P. Corlis
MYRLA P. CORLIS

Denene Banger
DENENE BANGER

Philip D. Corlis
PHILIP D. CORLIS

"TRUSTEES"

