

**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.

1 SELLER GRANTOR	Name <u>KELLY + JULIE JACKSON</u>	2 BUYER GRANTEE	Name <u>CADNA 4 LIFE LLC</u>
	Mailing Address <u>1045 LIBERTY DR</u>		Mailing Address <u>PO Box 37</u>
	City/State/Zip <u>CLARKSTON WA 99403</u>		City/State/Zip <u>CLARKSTON WA 99403</u>
	Phone No. (including area code)		Phone No. (including area code) <u>(509) 295 8218</u>
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 _____		1-001-19-033-0000-0000	
Mailing Address _____		List assessed value(s) <u>215400</u>	
City/State/Zip _____		_____	
Phone No. (including area code) _____		_____	

Street address of property: 721 SIXTH STREET

This property is located in  unincorporated \_\_\_\_\_ County OR within  city of CLARKSTON

Check box if any of the listed parcels are being segregated from a larger parcel.

Legal description of property (if more space is needed, you may attach a separate sheet to each page of the affidavit)

1075 32 + 33 IN BLOCK 19 OF CLARKSTON

Select Land Use Code(s):

53

enter any additional codes: \_\_\_\_\_

(See back of last page for instructions)

	YES	NO
Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	YES	NO
Is this property designated as forest land per chapter 84.33 RCW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	YES	NO
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

	YES	NO
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:

N/A

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

WAC No. (Section/Subsection) 458-61A-211(1)  
Reason for exemption Transfer Family Corp.

Type of Document QUIT CLAIM DEED

Date of Document 10/18/2017

Gross Selling Price \$	<u>0.00</u>
*Personal Property (deduct) \$	_____
Exemption Claimed (deduct) \$	_____
Taxable Selling Price \$	_____
Excise Tax : State \$	_____
Local \$	_____
*Delinquent Interest: State \$	_____
Local \$	_____
*Delinquent Penalty \$	_____
Subtotal \$	_____
*State Technology Fee \$	<u>5.00</u>
*Affidavit Processing Fee \$	<u>5.00</u>
Total Due \$	<u>10.00</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 [Signature]  
Name (print) KELLY JACKSON  
Date & city of signing: 10/18/17 ASOTIN

Signature of Grantee or Grantee's Agent [Signature]  
Name (print) JULIE JACKSON  
Date & city of signing: 10/18/17 ASOTIN

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

Cash 10.00  
(10)

OCT 18 2017

50600

ASOTIN COUNTY  
TREASURER

COUNTY TREASURER