

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>Janet Peacock</u>	BUYER GRANTEE	2 Name <u>Tammy Lynne Butler</u>
	Mailing Address <u>730 Park Avenue</u>		Mailing Address <u>914 6th St, Clarkston, WA 99403</u>
	City/State/Zip <u>Lewiston ID 83501</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	
Name <u>Tammy Lynne Butler</u>		1001060160000000 <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>79,200.00</u>	

4 Street address of property: 914 6th Street, Clarkston, WA

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

Lot 16 in Block 6 of Clarkston, according to the official plat thereof, filed in Book A of Plats at Page(s) 18, records of Asotin County, Washington.

5 Select Land Use Code(s):
63 Business Services

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 09/14/18

Gross Selling Price \$	<u>134,700.00</u>
*Personal Property (deduct) \$	<u>0.00</u>
Exemption Claimed (deduct) \$	<u>- 0.00</u>
Taxable Selling Price \$	<u>134,700.00</u>
Excise Tax : State \$	<u>1,724.16</u>
Local \$	<u>336.75</u>
*Delinquent Interest: State \$	<u>0.00</u>
Local \$	<u>0.00</u>
*Delinquent Penalty \$	<u>0.00</u>
Subtotal \$	<u>2,060.91</u>
*State Technology Fee \$	<u>5.00 5.00</u>
*Affidavit Processing Fee \$	<u>0.00</u>
Total Due \$	<u>2,065.91</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>Janet Peacock</u>	Signature of Grantee or Grantee's Agent <u>Tammy Lynne Butler</u>
Name (print) <u>Janet Peacock</u>	Name (print) <u>Tammy Lynne Butler</u>
Date & city of signing: <u>9.17.18, Clarkston, WA</u>	Date & city of signing: <u>9.17.18, 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 - TREASURER'S USE ONLY COUNTY TREASURER

A TEC CK# 25079

PAID
SEP 18 2018
ASOTIN COUNTY
TREASURER

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5. All of the property owned by John C. Peacock and Janet I. Peacock was community property, including the following described real property:

Lot 16 in Block 6 of Clarkston, according to the official plat thereof, filed in Book A of Plats at Page 18, Official Records of Asotin County, Washington.

Tax Parcel No. 1-001-06-016-0000-0000

6. Janet I. Peacock is the rightful heir and owner of the real property described above.

7. A certified copy of John C. Peacock's death certificate is attached to this affidavit.

8. This affidavit is made solely to induce the title company to insure title to real property in which decedent held an interest at the time of his death and to comply with WAC 458-61A-202(6)(i).

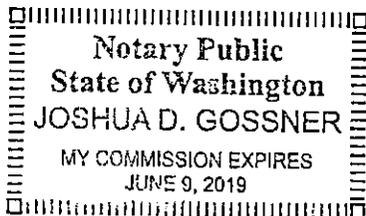
Dated this 17th day of August, 2018.

Janet I. Peacock
Janet I. Peacock

STATE OF WASHINGTON)
 :SS
County of Asotin)

On this day personally appeared before me Janet I. Peacock, to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that she signed the same as her free and voluntary act and deed, for the uses and purposes therein mentioned.

Given under my hand and official seal this 17th day of August, 2018.



Joshua D. Gossner
Notary Public for Washington
Residing at Clarkston
My appointment expires: June 9, 2019

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
CERTIFICATE OF DEATH

Date Filed DECEMBER 15, 2015

State File No. 2015-12169

DECEDENT - LEGAL NAME JOHN CHARLES PEACOCK			
SEX MALE	SOCIAL SECURITY NUMBER ██████████	AGE 67 YEARS	DATE OF BIRTH JANUARY 13, 1948
BIRTH-PLACE PORTLAND, OREGON		PLACE OF RESIDENCE LEWISTON, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED		NAME OF SURVIVING SPOUSE (if wife, maiden name) JANET ISABEL GILMOUR	WAS DECEDENT EVER IN U.S. ARMED FORCES? NO
FATHER - NAME JOHN JAMES PEACOCK		BIRTH-PLACE ILLINOIS	
MOTHER - MAIDEN NAME MARIE HAYES		BIRTH-PLACE IDAHO	
METHOD OF DISPOSITION CRÉMATION		FUNERAL SERVICE LICENSEE DENNIS W. HASTINGS	
NAME AND ADDRESS OF FUNERAL FACILITY VASSAR-RAWLS FUNERAL HOME, LEWISTON, IDAHO			
DATE OF DEATH DEC. 09, 2015	TIME OF DEATH 9:10 P.M.	CITY, TOWN OR LOCATION OF DEATH LEWISTON, IDAHO	COUNTY OF DEATH NEZ PERCE
CAUSE OF DEATH (underlying cause last) a. PROGRESSIVE METASTATIC COLON CANCER			Approximate Interval Between Onset and Death MONTHS
b. FUNCTIONAL DECLINE DUE TO CANCER			WEEKS
c. _____			
d. _____			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE STATED			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL	NAME OF CERTIFIER SUSHMA PANT, M.D.	TITLE PHYSICIAN	
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

AUGUST 08, 2018

DATE ISSUED:

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR

This copy not valid unless prepared on engraved border displaying state seal and signature of the Registrar.



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Last Will and Testament

OF

JOHN CHARLES PEACOCK

KNOW ALL MEN BY THESE PRESENTS: That I, JOHN CHARLES PEACOCK, a resident of Nezperce County, State of Idaho, being of sound and disposing mind and memory and not acting under duress, menace, fraud, or undue influence of any person whomsoever, do make, publish and declare this, my Last Will and Testament, and do hereby expressly revoke all other and former Wills and Codicils to Wills made by me.

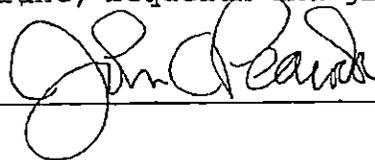
FIRST: I hereby direct my Personal Representative and/or Executrix, hereinafter named, to pay all my just debts and funeral expenses as soon after my demise as can be conveniently and lawfully done.

SECOND: I hereby state that I am a married man, and my wife's name is JANET I. PEACOCK, and that one (1) child has been born as issue of our marriage, namely, JOHN I. PEACOCK I have other children by a previous marriage, however, I intentionally omit any provisions for those children.

THIRD: I hereby give, devise and bequeath to my beloved wife, JANET I. PEACOCK, all of my estate whether real, personal or mixed, of whatsoever character and wherever situated, or to which I may be entitled at the time of my death and I give the same to her absolutely and forever.

FOURTH: In the event my wife shall predecease me or if her death should occur simultaneously with mine causing any doubt which of us survives the other, or if she does not survive me by thirty (30) days, then I hereby grant, bequeath and give all of my

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property, real, personal or mixed, wheresoever situated of which I may be entitled at the time of my death and which is subject to my testament, disposition or control to the trustee(s) named herein, in trust for the child named in Second above.

The Trustee(s) shall hold, manage and control the property comprising the trust estate, collect the income therefrom, and out of the same shall pay all taxes and other incidental expenses of the trust, including commissions, and shall hold the same for the benefit of said child.

1. The Trustee(s) shall invest my estate in such a manner as to realize the best income therefrom in the most prudent and reasonable way, at their discretion, with authorization to convert, buy, sell, liquidate, exchange, transfer, or invade any part of the corpus, subject only to the laws that may apply.
2. The Trustee(s) shall pay to the Guardian of the person of my child so long as there is a Guardian of the person of said child, and if not, then directly to said child, the income from the corpus of said trust in amounts sufficient in their discretion for payment of necessary support, health, education and welfare of said child allowing said Guardian, if any, such expenses as may be reasonably incurred arising out of such guardianship, taking into consideration such other sums as may be due and payable to said child at my demise. Any income not so distributed shall be accumulated and added to the principal.
3. The Trustee(s) may at their discretion, invade the corpus of the trust fund at any time they deem it necessary to see to the overall health, education and welfare of said child.
4. When the child reaches the age of 25 years or shall have graduated from an institution of higher learning, whichever shall first occur, one-half ($\frac{1}{2}$) of the funds then in the trust, including the income therefrom, shall be disbursed to said child, unless my child is physically or mentally unable to care for him or herself: when the child shall reach the age of 30 years the funds then remaining in the trust, including the income therefrom, shall be disbursed to said child and this trust shall terminate.

2. LAST WILL AND TESTAMENT OF



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5. In the event said child, upon reaching the age of 30 years, is physically or mentally unable to care for himself or herself, the trust shall not terminate but shall continue for his/her health, education and welfare.
6. In the event this trust is administered under the laws of any state which does not require an annual accounting to a Court of jurisdiction, the Trustee(s) shall account, at least annually, to the Guardian of the person of my child and the Trustee(s)'s fee or commission shall not be paid until such account is rendered and without giving at least fifteen (15) days notice to said Guardian of the fee or commission to be paid before payment of the same.

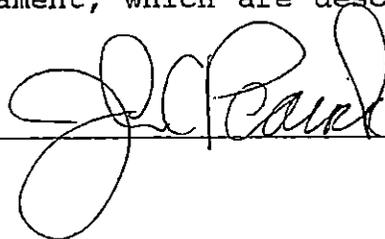
In the event my child shall predecease me or die during the existence of the trust herein before created, leaving issue of body or adopted child or children, my bequest to him/her shall lapse and I hereby give, devise and bequeath his share of my estate to the issue of his body or adopted child or children, as the case maybe, share and share alike.

FIFTH: I hereby nominate and appoint MICHAEL F. PEACOCK, as Trustee of the hereinbefore created trust. In the event of his death, disability, incapacity or refusal to serve such appointment, I hereby nominate, constitute and appoint CAMPBELL M. GILMOUR as Trustee of the hereinbefore created trust.

SIXTH: In the event my wife shall predecease me and I die before my child reaches the age of majority making it necessary to appoint a guardian of the person of my child it is my desire and I hereby nominate and appoint MICHAEL F. PEACOCK, as the Guardian of the person of my child. In the event of his death, disability, incapacity or refusal to serve such appointment, I hereby nominate, constitute and appoint CAMPBELL M. GILMOUR as Guardian of the person of my child.

SEVENTH: To the extent permitted under the provisions of Section 15-2-513, Idaho Code, I give and bequeath those items of tangible personal property not otherwise specifically disposed of by this, my Last Will and Testament, which are described in any

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written statement or list which is either in my handwriting or is signed by me, and which is in existence at the time of my death, to those persons named in such written statement or list and in the manner set forth in such statement or list.

EIGHTH: I hereby nominate, constitute and appoint my wife, JANET I. PEACOCK as the Executrix of this my Last Will and Testament and the Personal Representative of my estate to serve without bond. In the event of her death, disability, incapacity or refusal to serve such appointment, I hereby nominate, constitute and appoint MICHAEL F. PEACOCK, as Executor of this Will and Personal Representative of my estate, to serve without bond.

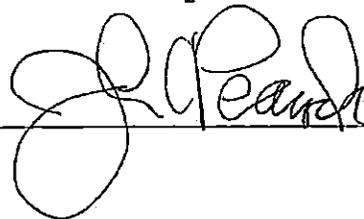
NINTH: I hereby authorize and empower my Personal Representative to lease, encumber, sell, exchange or otherwise deal with or dispose of all my property, real or personal, or any part thereof in such manner, at such times and upon such terms and conditions as he deems to be in the best interest of my estate. Such sale or other disposition to be made at public or private sale in the discretion of my Personal Representative and without any reference to the order of disposition of real and personal property and without any petition, citation, hearing, order, notice of sale, return of sale or any other action being required.

TENTH: The fair market value of my estate at this time does not exceed an amount necessary to create a taxable estate under current federal estate and gift tax regulations.

ELEVENTH: Despite any resemblance of this Will to any which my wife has or may make, this Will has not and shall not be deemed to have been made pursuant to any agreement, express or implied, between my wife and myself concerning the disposition of our property or any separate property of either.

TWELFTH: In the event this Will is probated in a State which recognizes non-intervention Wills, I hereby declare this to be a non-intervention Will, subject to the provisions of the codes

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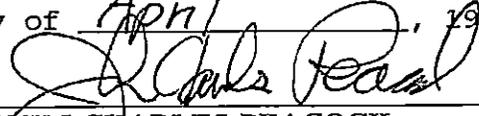
A handwritten signature in dark ink, appearing to read 'J. Peacock', is written over a horizontal line. The signature is stylized and cursive.

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of such State; and further, in the event it is subjected to the jurisdiction of a State not recognizing the appointment of a Personal Representative, then the above named appointee or alternate may be appointed Executor, to serve without bond.

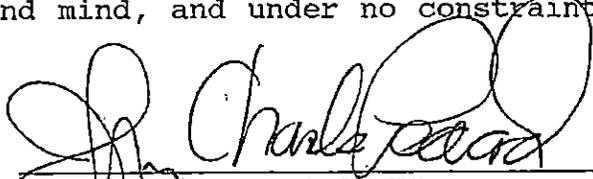
THIRTEENTH: I have carefully read this Will and I understand all of its terms and provisions. It was prepared in accordance with my wishes and directions and includes all gifts and beneficiaries which I intend to make and benefit by my Will at this time.

IN WITNESS WHEREOF, I have hereunto, subscribed my name at Clarkston, Wa ~~Kellogg, Idaho~~, this 5 day of April, 1996.



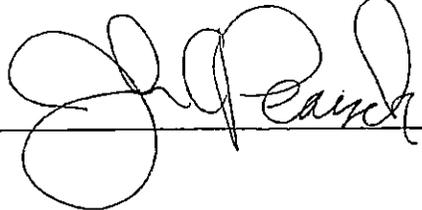
JOHN CHARLES PEACOCK

I, JOHN CHARLES PEACOCK, the testator, sign my name to this instrument this 5 day of April, 1996 and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my last will and that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed and that I am eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.



JOHN CHARLES PEACOCK

We, Barbara A. Bird and Michell Bergitt, the witnesses, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the

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testator signs and executes the instrument as his Last Will and that he signs it willingly and that each of us, in the presence and hearing of the testator hereby signs this Will as witness to the testator's signing, and that to the best of our knowledge the testator is eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.

Barbara A. Bird
Witness

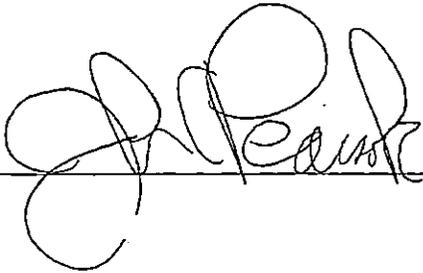
Michelle Bergett
Witness

* * * * *

STATE OF ^{Washington} ~~Idaho~~)
County of ^{Asotin} ~~Nezperce~~) : ss

SUBSCRIBED, SWORN TO and ACKNOWLEDGED before me by JOHN CHARLES PEACOCK, the testator and subscribed and sworn to before me by Barbara A. Bird and Michelle Bergett witnesses, this 5th day of April, 1996.

Donald W. Vaughn
Notary Public, State of ~~Idaho~~ ^{Washington}
Residing at Clarkston
My commission expires: 2-10-98

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