

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>Daryl Click by Tonyia Pinney Attorney-In-Fact</u> | BUYER GRANTEE | 2 Name <u>Ray H. Blankenship, Jr.</u> |
| | Mailing Address <u>17610 N. Singing Hills Dr</u> | | <u>Dana Blankenship</u> |
| | City/State/Zip <u>Newman Lake, WA 99025</u> | | Mailing Address <u>1335 PEASLEE AVE.</u> |
| | Phone No. (including area code) | | City/State/Zip <u>CLARKSTON, WA 99403</u> |
| 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>Ray H. Blankenship, Jr. and Dana Blankenship</u> | | 10043000400070000 <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) 242,800.00 | |

4 Street address of property: 1335 Peaslee Ave

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.

The South 151 feet of the East 366.5 feet of Lot 4 in Block OO of Vineland, according to the official plat thereof, filed in Book B of Plats at Page(s) 47, records of Asotin County, Washington.

5 Select Land Use Code(s):
11 Household, single family units

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 | <u>Statutory Warranty Deed (SWD)</u> | |
| Date of Document | <u>12/11/18</u> | |
| Gross Selling Price | \$ | <u>255,000.00</u> |
| *Personal Property (deduct) | \$ | <u>0.00</u> |
| Exemption Claimed (deduct) | \$ | <u>0.00</u> |
| Taxable Selling Price | \$ | <u>255,000.00</u> |
| Excise Tax : State | \$ | <u>3,264.00</u> |
| Local | \$ | <u>637.50</u> |
| *Delinquent Interest: State | \$ | <u>0.00</u> |
| Local | \$ | <u>0.00</u> |
| *Delinquent Penalty | \$ | <u>0.00</u> |
| Subtotal | \$ | <u>3,901.50</u> |
| *State Technology Fee | \$ | <u>5.00</u> <u>5.00</u> |
| *Affidavit Processing Fee | \$ | <u>0.00</u> |
| Total Due | \$ | <u>3,906.50</u> |

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

| | |
|---|--|
| Signature of Grantor or Grantor's Agent <u>[Signature]</u> | Signature of Grantee or Grantee's Agent <u>[Signature]</u> |
| Name (print) <u>Daryl Click by Tonyia Pinney Attorney-In-Fact</u> | Name (print) <u>Ray H. Blankenship, Jr.</u> |
| Date & city of signing: <u>12-14-18 Clarkston</u> | Date & city of signing: <u>12-17-18 Clarkston</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)).



I-15 CP
Pgs=6 Fee:\$77.00
CREASON MOORE DOKKEN

AFTER RECORDING, RETURN TO:

**COMMUNITY PROPERTY AGREEMENT
WITH TRANSMUTATION AT DEATH**

This agreement is made between Daryl Ray Click ("Husband") and Marilyn Marie Click ("Wife"), husband and wife, who were married on April 9, 1966, in Fairfield, Washington, and who are currently domiciled within the State of Washington. In consideration of their mutual promises and covenants set forth below, the parties agree as follows:

1. **Property Covered:** This agreement shall apply to the following described property now owned or hereafter acquired by Husband and Wife even though some items may have been purchased or acquired by one or the other alone or may be registered in the name of one or the other or both:

A. **Residence.** 1335 Peaslee Avenue, Clarkston, Asotin County, Washington more particularly described as follows:

The South 151 feet of the East 366.5 feet of Lot Four (4), Block "OO", Vineland, Asotin County, Washington.

TOGETHER with an Easement for roadway and utility purposes over and across the East 15 feet of the North 416.2 feet of Lot 4, Block "OO" of Vineland, according to plat recorded in Book B of Plats, page 47, in Asotin County, Washington.

B. Rental. 613 14th Street, Clarkston, Asotin County, Washington, more particularly described as follows:

South 60' feet of the North 270' of the West 125' of Lot 25, Block "GG" of Vineland, Asotin County, Washington, according to the recorded plat thereof, measurements being from the centerlines of adjacent streets.

APN: 1 004 22 025 0003 0000

C. Vacant Land. Five-acre parcel of property located in Asotin County, Washington, to-wit:

That part of Section 31 of Township 11 North, Range 46 East, W.M., Asotin Washington, more particularly described as follows:

Commencing at the monument at the intersection of Critchfield Road and 6th Avenue; thence North 89°04'44" West along the centerline of 6th Avenue for a distance of 1815.0 feet to the true place of beginning; thence continue North 89°04'44" West along said centerline for a distance of 330.0 feet; thence South 0°55'16" West for a distance of 660.0 feet; thence South 89°04'44" East a distance of 330.0 feet; thence North 0°55'16" East for a distance of 660.00 feet to the true place of beginning.

RESERVING from the above described tract for road and utility easements that portion lying in the right-of-way of 6th Avenue; the South 25 feet thereof and a strip of land 50 feet in width being 25 feet on either side of the described centerline: Commencing at the Northeast corner of the above-described tract; thence North 89°04'44" West for a distance of 165.0 feet to the true place of beginning; thence South 0°55'16" West for a distance of 660.0 feet to the point of terminus of the above described centerline.

APN: 1 132 00 184 0000 0000

COMMUNITY PROPERTY AGREEMENT - 2

Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston ID 83501
(208)743-1516; Fax(208)746-2231

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D. Newman Lake Property. Real property located in the County of Spokane, State of Washington, to-wit:

A portion of the Southwest quarter of Section 22, Township 27 North, Range 45 East, W.M., and further described as follows:

COMMENCING at the West quarter corner of said Section 22; thence South 00°42'02" East, along the West line of said Southwest quarter, a distance of 386.59 feet to a point; thence North 89°17'41" East, a distance of 748.10 feet to the true Point of Beginning; thence South a distance of 304.58 feet to a point; thence North 89°17'41" East, a distance of 780.56 feet to a point near the West line of a 60.00 feet Easement; thence North 89°17'41" East, a distance of 35.18 feet to a point on the centerline of said easement; thence along said centerline the following courses; around a curve left through a central angle of 62°07'47" an arc distance of 271.09 feet, a chord bearing of North 10°36'44" West, a distance of 258.00 feet to a point of tangent; thence North 41°40'37" West, a distance of 143.49 feet to a point of curve; thence around a curve right through a central angle of 71°08'25", an arc distance of 124.16 feet a chord bearing of North 06°06'25" West, a distance of 116.34 feet to a point; thence leaving said centerline North 02°14'07" East, a distance of 150.72 feet to a point; thence South 89°17'41" West, a distance of 508.49 feet to a point; thence South 25°48'50" West, a distance of 362.41 feet to the Point of Beginning;

SUBJECT TO:

- Title Notice recorded February 26, 1997, under recording no. 4079834.
- Matters set forth by survey recorded August 25, 1997, under recording no. 4034253.
- Easement recorded January 8, 1998, under recording no. 4176408.
- Agreement recorded April 9, 1998, under recording no. 4207635.

APN: 57223.9049

E. All tangible personal property and financial assets now owned or hereafter acquired, including without limitation, household items, tools, firearms, vehicles, art

COMMUNITY PROPERTY AGREEMENT - 3

Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston ID 83501
(208)743-1516; Fax(208)746-2231

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objects, ownership and debt interests in business entities, accounts and notes receivable, and all financial accounts of every nature.

The above-described property shall be transmuted at death into and declared to be the community property of the parties and is referred to in this agreement as the "described community property."

2. ***Vesting at Death of a Spouse:*** If Husband dies and Wife survives him, all of the described community property and/or separate property shall vest in Wife as of the moment of Husband's death. If Wife dies and Husband survives her, all of the described community property and or separate property shall vest in Husband as of the moment of Wife's death.

3. ***Disclaimer:*** Upon the death of either spouse, the surviving spouse may disclaim any interest passing under the agreement in whole or in part, or with reference to specific parts, shares or assets thereof, in which event the interest disclaimed shall pass as if the provisions of paragraph 2 had been revoked as to such interest with the surviving spouse entitled to the benefits provided by any alternate disposition.

4. ***Automatic Revocation:*** The provisions of paragraph 2 shall be automatically revoked:

- (a) Upon the filing by either party of a petition, complaint or other pleading for separation, dissolution, or divorce; or
- (b) Immediately prior to death, if the order of death cannot be ascertained, or if both parties hereto die within ninety (90) days of one another.

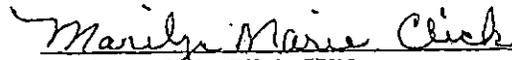
5. ***Optional Revocation by One Party:*** If either party becomes incapacitated, the other party shall have the power to terminate the provisions of paragraph 2 and each party designates the other as attorney-in-fact to become effective upon incapacity to exercise such power. The termination shall be effective upon the delivery of written notice thereof to the incapacitated spouse and to the guardian(s), if any, of the person and of the estate of the incapacitated person. For the purposes of this paragraph, a spouse shall be deemed incapacitated if a person duly licensed to practice medicine signs a statement declaring that the person is unable to manage his or her own financial affairs.

6. **Powers of Appointment:** This agreement shall not affect any power of appointment now held by or hereafter given to Husband or Wife or both of them, nor shall it obligate Husband or Wife or both of them, to exercise any such power of appointment in any way.

7. **Revocation of Inconsistent Agreements:** To the extent this agreement is inconsistent with any provisions of any community property agreement or other arrangement previously made by the parties that affects the described community property, the terms of this agreement shall be deemed to revoke such prior provisions to the extent of the inconsistency.

IN WITNESS WHEREOF, the parties, Daryl Ray Click and Marilyn Marie Click, have hereunto set their signatures this 14th day of May, 2014.

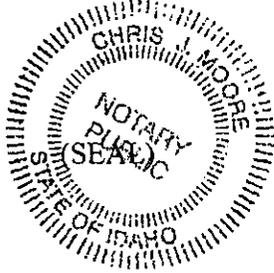

Daryl Ray Click, Husband


Marilyn Marie Click, Wife

STATE OF IDAHO)
 : ss.
County of Nez Perce)

On this day personally appeared before me, Daryl Ray Click, to me known to be the individual described in and who executed the within and foregoing Community Property Agreement, and acknowledged that he signed the same as his free and voluntary act and deed for the uses and purposes therein mentioned.

Given under my hand and official seal on this ^{22ND} ~~14~~ day of May, 2014.



Chris Moore
Notary Public in and for said State,
residing at or employed in Lewiston.
My Commission Expires: 11-17-2019

STATE OF IDAHO)
 : ss.
County of Nez Perce)

On this day personally appeared before me, Marilyn Marie Click, to me known to be the individual described in and who executed the within and foregoing Community Property Agreement, 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 on this 14th day of May, 2014.



Chris Moore
Notary Public in and for said State,
residing at or employed in Lewiston.
My Commission Expires: 11-17-2019

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2014-016471

DATE ISSUED: 08/19/2014

FEE NUMBER: 0000190365

GIVEN NAMES: MARLYN M
LAST NAME: CLICK

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: AUGUST 14, 2014
HOUR OF DEATH: 07:05 P.M.
SEX: FEMALE
AGE: 76 YEARS

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 1335 PEASLEE AVE
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403

SOCIAL SECURITY NUMBER:

RESIDENCE STREET: 1335 PEASLEE AVE
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403
INSIDE CITY LIMITS? NO
COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 47 YEARS

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

FATHER: WALLACE MCCLELLAN
MOTHER: BERTHA ENZELER

BIRTHDATE:
BIRTHPLACE: INGLEWOOD, LOS ANGELES CNTY, CALIFORNIA

MARITAL STATUS: MARRIED
SPOUSE: DARYL R CLICK

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MOUNTAIN VIEW CREMATORY
CITY, STATE, ZIP: LEWISTON, ID
DISPOSITION DATE: AUGUST 21, 2014

OCCUPATION: LABORATORY TECH
INDUSTRY: HEALTH CARE
EDUCATION: BACHELOR'S DEGREE
US ARMED FORCES? NO

FUNERAL FACILITY: MERCHANT RICHARDSON BROWN FUNERAL HOMES LLC
ADDRESS: PO BOX 107
CITY, STATE, ZIP: CLARKSTON WA 99403
FUNERAL DIRECTOR: RICHARD LASSITER

INFORMANT: DARYL CLICK
RELATIONSHIP: HUSBAND
ADDRESS: 1335 PEASLEE AVE, CLARKSTON WA, 99403

Asotin County, WA 342035
Daria McKay Auditor 09/15/2014 11:15 AM

CAUSE OF DEATH:
A. METASTATIC CHOLANGIOCARCINOMA
INTERVAL: 7 MONTHS



B. INTERVAL:
C. INTERVAL:
D. INTERVAL:

I-131 DC
Pgs=2 Fee:\$33.00
CREASON MOORE DOKKEN

OTHER CONDITIONS CONTRIBUTING TO DEATH:

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

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

LOCATION OF INJURY:

CERTIFIER NAME: KATRINA ROLEN MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 1250 IDAHO STREET
CITY, STATE, ZIP: LEWISTON ID 83501
DATE SIGNED: AUGUST 19, 2014

CITY, STATE, ZIP:
COUNTY:

DESCRIBE HOW INJURY OCCURRED:

STATUS OF DECEDENT: IF A TRANSPORTATION INJURY:
NOT APPLICABLE

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

ITEM(S) AMENDED: NONE

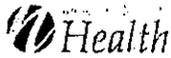
ATTENDING PHYSICIAN:
KATRINA ROLEN MD

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

LOCAL DEPUTY REGISTRAR:
BRADY WOODSBURY
DATE RECEIVED: AUGUST 19, 2014



51819



Affidavit for Correction

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 |
|-------------------|------------|----------|------|------------------|

Use the section below for requesting any changes on the record.

Record Type: Birth Death Marriage Dissolution

1. Name on record: _____ 2. Date of Event: _____ 3. Place of Event: (City or County) _____

4. Father's Full Name (the name of persons for Marriages or Dissolutions): _____ 5. Mother's Full Maiden Name (For Birth): (Wife for Marriage or Dissolution) _____

The Record is Incorrect or Incomplete as follows:

| | |
|--------------------------|----------------------|
| 6. The Record now shows: | 7. The True fact is: |
| 8. | 9. |
| 10. | 11. |
| 12. | 13. |

14. I represent the person as: Self Parent Guardian Informant Funeral Director Other (Specify) _____ Telephone Number: _____

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

15. Signature: _____ 16. Date: _____ 17. Address: _____

All vital records are registered and indexed.

Most changes must be substantiated by documentary proof submitted with the affidavit

Examples of documents:

| | | | |
|-------------------------|--------------------------|--|--|
| Birth Certificate | Marriage License | Marriage Report (Social Security Administration) | School Transcripts (Official) |
| Hospital Birth Record | Military Record (DD-214) | Birth Record | Voter's Registration Card (if it bears an effective date) |
| Life Insurance Policy | Passport | Record of Birth | Alien Registration Card (front and back) |
| Memorial Service Record | Record of Birth | Record of Birth | We do not accept Driver's License, Social Security card or a hospital issued decorative birth certificate. |

Birth Certificates

- Only the parent(s) of the person named on the birth certificate (if 18 or older) may change the birth certificate.
- The proof of the name of the person named on the affidavit says the name is Mary Ann Doe, then the proof must show the name is Mary Ann Doe.
- Child (under 18)**
 - Only the parent(s) of the person named on the birth certificate may change the birth certificate.
 - Characteristics of the person named on the birth certificate must be established.
 - Up to a maximum of three pieces of documentary proof are required.
 - To correct birth date, place of birth or parent's information, one documentary proof is required.
 - Proof must be five (or more) years old or have been established within five years of birth.
- Adult (18 years or older)**
 - Only the adult, themselves can change the birth certificate.
 - If the first or middle name is absent, three pieces of documentary proof are required.
 - If the first and/or middle name is misspelled, two pieces of documentary proof are required.
 - To correct birth date, place of birth or parent's information, one documentary proof is required.
 - Proof must be five (or more) years old or have been established within five years of birth.

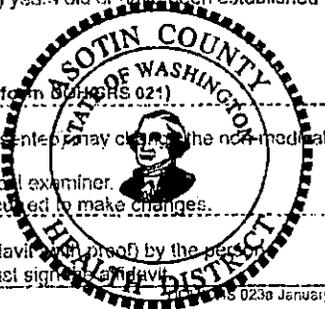
4. This affidavit can be used to change the birth certificate or use the paternity acknowledgment - form BIRTHRS 021

Death Certificates

- Only the informant, the spouse, next of kin, administrator (if evidence confirming such position is presented) may change the non-medical information.
- The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.
- If it is less than sixty days from the proceeding, contact the county health department where the death occurred to make changes.

Marriage/Dissolution (Divorce) Certificates

- Personal fact(s) (minor spelling changes in name, date, or place of birth or residence) may be changed by affidavit with proof by the person.
- To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must sign the affidavit.



Lawrence M. Garges, M.D.
Lawrence M. Garges, M.D.
Health Officer

AUG 19 2014

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