

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 (Seller)

Name: Marcella O'Rourke
Street: 1445 Elm St #4
City: Clarkston State: WA Zip code: 99403
Phone number: _____

NEW REGISTERED OWNER (Buyer)

Name: Jody Lauzon
Street: 1480 Sycamore St
City: Clarkston State: WA Zip code: 99403
Phone number: 203-305-6311

LOCATION OF MOBILE HOME

Name: _____
Street: 1445 Elm St #4
City: Clarkston State: WA Zip code: 99403

LEGAL OWNER

Name: _____
Street: _____
City: _____ State: _____ Zip code: _____

PERSONAL PROPERTY PARCEL or ACCOUNT NO. 5-004-23-012-0003-0041
LIST ASSESSED VALUE(S): \$ 4600 0041

REAL PROPERTY PARCEL or ACCOUNT NO. 5-004-23-012-0003-0041
LIST ASSESSED VALUE(S): \$ _____

MAKE	YEAR	MODEL	SIZE	SERIAL NO. or I.D.	REVENUE TAX CODE NO.
<u>Ponderosa</u>	<u>1973</u>		<u>14x68</u>	<u>5252</u>	

Date of Sale: 7-15-19

Taxable Sale Price \$ 0

Excise Tax: State \$ 0.00

Select Location Local \$ 0.00

Delinquent Interest: State \$ 0

Local \$ 0

Delinquent Penalty \$ 0

Subtotal \$ 0.00

State Technology Fee \$ 5.00

Affidavit Processing Fee \$ 5.00

Total Due \$ 10.00

If exemption claimed, WAC number & title:
WAC No. (Sec/Sub) 458-61A-202(6)(i)
WAC Title Inheritance, non-probated will

A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX.

AFFIDAVIT

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

Signature of Seller/Agent: Jody Lauzon
Name (print): Jody Lauzon
Date and Place of Signing: 7/15/2019
Asotin WA

Signature of Buyer/Agent: Jody Lauzon
Name (print): Jody Lauzon
Date & Place of Signing: 7/15/2019
Asotin 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 2018
7-15-19
Date Rethany Frost
County Treasurer or Deputy

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).

CK1685 Jody Lauzon BF **PAID** THIS SPACE - TREASURER'S USE ONLY

Affidavit of Inheritance/Litigation

Use this form if you have inherited a vehicle or vessel or were awarded one through litigation. To find out if you need additional documents, contact a vehicle licensing office or call (360) 902-3770, option 5.

License plate/Registration number	Year <u>1973</u>	Make <u>Ponderosa</u>	Series/Body style <u>single wide</u>
Vehicle Identification Number (VIN) or Vessel Hull Identification Number (HIN) <u>5252</u>			

Inheritance—This affidavit is used when no executor or administrator is appointed for the deceased.

Submit this form with the vehicle or vessel title and a copy of the death certificate. An Odometer Disclosure Statement or a Release of Interest may be required.

I certify that Marcella A. O'Rourke, the registered owner of this vehicle/vessel, died on the 20 day of May, 2019.

The deceased left no estate necessitating administration, and no letters of administration or letters testamentary have been issued to any persons. The vehicle/vessel has not been bequeathed by will to anyone other than the person signing below who is daughter of the deceased. No relative who would have prior right, except Danny Rathbun survives the deceased, and provision has been made for payment of debts of the deceased. Signature must be notarized or certified below.

Jody Lauzon Jody Lauzon 7/15/2019

Printed name Signature Date

County clerk certificate for transfer of vehicle or vessel in litigation

This certificate, properly completed, will serve instead of all other court papers.

Submit this form with a Title Application and an Odometer Disclosure Statement (if applicable).

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

1. For orders of the court transferring title (including divorce and probate):

An order transferring title to this vehicle/vessel to _____ at _____ was duly entered in _____

_____ on the _____ day of _____, _____

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

_____ was duly appointed under the nonintervention will of _____ and is qualified to act as such, and that a decree of solvency has been entered.

Executor/Administrator signature Date

County Clerk signature Date

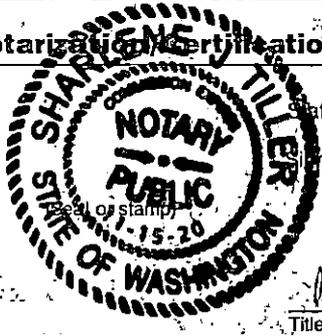
Notarization Certification

State of Washington, County of Asotin

Shed or attested before me on 7-15-19 by Marcella A. O'Rourke

Sharlene Tiller
Signature
Sharlene Tiller
Printed or stamped name
11-15-20
Dealer or county/office number or notary expiration date

Notary
Title



52366

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2016-021637

DATE ISSUED: 06/03/2016

FEE NUMBER: 0000046579

GIVEN NAMES: MARCELLA ANN
LAST NAME: O'ROURKE

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: MAY 20, 2016
HOUR OF DEATH: 08:30 A.M.
SEX: FEMALE
AGE: 74 YEARS
SOCIAL SECURITY NUMBER: 537-40-9704

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 1480 SYCAMORE ST.
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403

RESIDENCE STREET: 1445 ELM ST. 4
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403
INSIDE CITY LIMITS? NO
COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 25 YEARS

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

FATHER/PARENT: MART W. GUMAER
MOTHER/PARENT: ROWANNA BLANTON

BIRTHDATE: JULY 29, 1941
BIRTHPLACE: NEWPORT, WASHINGTON

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MOUNTAIN VIEW CREMATORY
CITY, STATE: LEWISTON, ID
DISPOSITION DATE: MAY 26, 2016

MARITAL STATUS: DIVORCED
SPOUSE:

FUNERAL FACILITY: MOUNTAIN VIEW FUNERAL HOME
ADDRESS: 3521 7TH STREET
CITY, STATE, ZIP: LEWISTON ID 83501
FUNERAL DIRECTOR: RICHARD LASSITER

OCCUPATION: BEAUTICIAN
INDUSTRY: SALON
EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE
US ARMED FORCES? NO

INFORMANT: JODY LAUZON
RELATIONSHIP: DAUGHTER
ADDRESS: 1480 SYCAMORE ST, CLARKSTON WA, 99403

- CAUSE OF DEATH:
- A. METASTATIC ADENOCARCINOMA OF THE LUNG
INTERVAL: 2.5 MONTHS
 - B. INTERVAL:
 - C. INTERVAL:
 - D. INTERVAL:

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? YES
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: GERARDO WIDENCE MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 1250 IDAHO STREET
CITY, STATE, ZIP: LEWISTON ID 83501
DATE SIGNED: MAY 25, 2016

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

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

ITEM(S) AMENDED: NONE
NUMBER(S): NONE
DATE(S): NONE

LOCAL DEPUTY REGISTRAR:
BRADY WOODBURY
DATE RECEIVED: MAY 25, 2016



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Last Will and Testament

OF

MARCELLA A. O'ROURKE

I, MARCELLA A. O'ROURKE, of Lacrosse, Whitman County, Washington, do hereby make, publish and declare this instrument to be my Last Will and Testament in the following manner, to-wit:

I.

I hereby direct my Personal Representative hereinafter named, as soon as there are sufficient funds on hand after my demise, to pay my funeral expenses, expenses of last illness, costs of administration and all of my just debts.

II.

I hereby declare that I am a single woman, and that two children have been born as issue of a prior marriage to KENNETH E. RATHBUN, who has predeceased me, to-wit: DANNY LEE RATHBUN and JODY LYNN RATHBUN.

III.

I hereby give, devise and bequeath all property owned by me, whether real or personal, and wheresoever situate, to my aforesaid children, DANNY LEE RATHBUN and JODY LYNN RATHBUN, in equal shares. In this respect, however, it is my will and desire that at the time my estate is settled, my said children shall each be given the equivalent of one-tenth of the net distributable value of my estate, and the remaining eight-tenths to be converted to cash and placed into savings accounts, one in the name of each of my said children, to be held in said accounts, including interest accruing thereon, and to be distributed to said child as and when he reaches the age of twenty-five years.

IV.

In the event that either of my said children, DANNY LEE RATHBUN or JODY LYNN RATHBUN should predecease me leaving no issue,

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