

REAL ESTATE EXCISE TAX AFFIDAVIT

This form is your receipt when stamped by cashier.

CHAPTER 82.45 RCW - CHAPTER 458-61A WAC
THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED
Only for sales in a single location code on or after January 1, 2020.

Check box if the sale occurred in more than one location code.

PLEASE TYPE OR PRINT

Check box if partial sale, indicate % sold. List percentage of ownership acquired next to each name.

SELLER GRANTOR	1 Name <u>Gary S. Manus and Beverly M. Manus</u>	BUYER GRANTEE	2 Name <u>Beverly M. Manus</u>
	husband and wife		a widow
	Mailing Address <u>1655 6th Avenue</u>		Mailing Address <u>1655 6th Avenue</u>
	City/State/Zip <u>Clarkston, WA 99403</u>		City/State/Zip <u>Clarkston, WA 99403</u>
	Phone No. (including area code) <u>(509) 751-8722</u>		Phone No. (including area code) <u>(509) 751-8722</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		1-139-02-036-0000-0000	<input type="checkbox"/> 135,700 0.00
Mailing Address			<input type="checkbox"/> 0.00
City/State/Zip			<input type="checkbox"/> 0.00
Phone No. (including area code)			<input type="checkbox"/> 0.00

Street address of property: 1655 6th Avenue, Clarkston, WA

This property is located in 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.

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

Lot 36 of Rankin Hill Second Addition, according to the Official Plat thereof, filed in Book D of Plats at Page 26.

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)? YES NO

Is this property predominantly used for timber (as classified under RCW 84.34 and 84.33) or agriculture (as classified under RCW 84.34.020)? See ETA 3215 YES NO

6 YES NO

Is this property designated as forest land per chapter 84.33 RCW? YES NO

Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34 RCW? YES NO

Is this property receiving special valuation as historical property per chapter 84.26 RCW? YES NO

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) NEW 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) 458-61A-202 (2)(i)

Reason for exemption _____

Inheritance _____

Type of Document Lack of Probate Affidavit

Date of Document 6/12/2020

Gross Selling Price \$	0.00
Personal Property (deduct) \$	0.00
Exemption Claimed (deduct) \$	0.00
Taxable Selling Price \$	0.00
Excise Tax: State	
Less than \$500,000.01 at 1.1%	0.00
From \$500,000.01 to \$1,500,000 at 1.28%	0.00
From \$1,500,000.01 to \$3,000,000 at 2.75%	0.00
Above \$3,000,000 at 3.0%	0.00
Agricultural and timberland at 1.28%	0.00
Total Excise Tax: State \$	0.00
<u>0.0025</u> Local \$	0.00
*Delinquent Interest: State \$	0.00
Local \$	0.00
*Delinquent Penalty \$	0.00
Subtotal \$	0.00
*State Technology Fee \$	5.00
affidavit Processing Fee \$	5.00
Total Due \$	10.00

PAID

JUN 15 2020

ASOT IN COUNTY
TREASURER

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 Beverly Manus Signature of Grantee or Grantee's Agent Beverly Manus

Name (print) Beverly M. Manus Name (print) Beverly M. Manus

Date & city of signing 6/12/20; Lewiston, ID Date & city of signing 6/12/20; Lewiston, ID

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)).

Cox & Wagner CLK# 692984

053204

Return to:

Steve R. Cox
Cox & Wagner, PLLC
Attorneys at Law
Post Office Box 446
Lewiston, ID 83501

Lack of Probate Affidavit

Reference numbers of related documents:

Grantor: GARY S. MANUS, deceased

Grantee: BEVERLY M. MANUS, a widow

Legal Description:

Lot 36 of Rankin Hill Second Addition, according to the Official Plat thereof, filed in Book D of Plats at Page 26 official records of Asotin County, Washington.

Tax Parcel No. 1-139-02-036-0000-0000

REAL ESTATE EXCISE TAX

PAID \$ 0 DATE 10/15/20

RECEIPT No. 53204

ASOTIN COUNTY TREASURER

By [Signature]

SALE PRICE 0

53204

**LACK OF PROBATE AFFIDAVIT (STATE OF WASHINGTON)
FOR SEPARATE PROPERTY, COMMUNITY PROPERTY, OR JOINT TENANCY PROPERTY**

STATE OF IDAHO)
 : SS
COUNTY OF NEZ PERCE)

The undersigned, **BEVERLY MANUS a/k/a BEVERLY M. MANUS**, executes this affidavit relating to the estate of **GARY S. MANUS** (herein "Decedent"), who died on December 6, 2018, in the County of Nez Perce, State of Idaho, then being a resident of the County of Asotin, State of Washington.

(A copy of the death certificate is attached hereto.)

That the undersigned is:

The lawful surviving spouse of the Decedent.

That the undersigned has listed below all of the heirs at law and next of kin of Decedent, including but not limited to:

- 1) Spouse or registered domestic partner; and
- 2) children, adopted children, the issue of any predeceased child or adopted child (if Decedent left no surviving children, then the undersigned has listed below all of the surviving parents, brothers and sisters of Decedent); and
- 3) all parties who would have been heirs at law if the Decedent had not been married or a registered domestic partner on the date of death:

That the heirs at law and next of kin of the Decedent are (list all parties, using the reverse side or attaching a list if necessary):

Name & Relationship: **BEVERLY M. MANUS, spouse**
Address: **1655 6th Avenue**
 Clarkston, WA 99403

Name & Relationship: MICHELE MANUS, daughter
Address: 1655 6th Avenue
Clarkston, WA 99403

Name & Relationship: KIMBERLY BENSON, daughter
Address: 6762 Colburn Colver Road
Sandpoint, ID 83864

That immediately prior to the date of death of the Decedent was an owner of the real estate more particularly described as follows, to-wit:

Lot 36 of Rankin Hill Second Addition, according to the Official Plat thereof, filed in Book D of Plats at Page 26 official records of Asotin County, Washington.

Parcel No. 1-139-02-036-0000-0000

and that the Decedent's ownership interest was:

Community Property

THE UNDERSIGNED FURTHER STATES THE FOLLOWING:

1. That on the date the Real Estate was purchased the Decedent was:
Married to BEVERLY M. MANUS
2. That on the date of the death the Decedent was:
Married to BEVERLY M. MANUS
3. That the Decedent left a Will, a copy of which is attached hereto.
4. That the Decedent's estate is not being probated.
5. That the estate of the Decedent is exempt from State and/or Federal succession or inheritance taxes.

6. That the Decedent has not received assistance from the State of Washington for medical care.

That the undersigned knows of his own knowledge, and so states, that each and all of the obligations against the estate of the Decedent (including, but not limited to: all the debts of Decedent; all of the expenses of Decedent's last illness, funeral and burial; promissory notes; installment contracts and mortgages; and state and federal succession taxes upon Decedent's estate, if applicable) have been paid in full.

That the value of the Decedent's estate at date of death, including all real and personal property, as approximately \$300,000.00, including the value of community property of Decedent and Decedent's surviving spouse or domestic partner, if any, of approximately \$150,000.00, and including the value of Decedent's separate property, if any, of approximately zero, and including the full value of all other property, if any, held by the Decedent in joint tenancy of approximately zero.

DATED this 12th day of June, 2020.

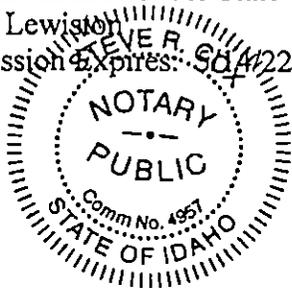
Beverly Manus

BEVERLY M. MANUS
1655 6th Avenue
Clarkston, WA 99403
(509) 751-8722

SUBSCRIBED and SWORN TO before me this 12th day of June, 2020.

Steve R. Sumner

Notary Public in and for the State of Idaho
Residing at Lewiston
My Commission Expires: 06/30/22



Lack of Probate Affidavit – State of Washington (5/08)
(Community Property, Separate Property, Joint Tenancy Property)

Page 3 of 3

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LAST WILL AND TESTAMENT
OF
GARY S. MANUS

BE IT KNOWN that I, Mary S. Manus, a resident of Asotin
Washington, County of Asotin, in the State of
Washington, being of sound mind, do make and declare this to be my Last Will
and Testament expressly revoking all my prior Wills and Codicils at any time made.

I. PERSONAL REPRESENTATIVE:

I appoint Beverly M. Manus of Asotin, Washington
as Personal Representative of this my Last Will and Testament and provide if
this Personal Representative is unable or unwilling to serve then I appoint Coexecutors Michelle
Manus and Kimberly Manus of Lewiston, Idaho
as alternate Personal Representative. My Personal Representative shall be authorized to carry out all
provisions of this Will and pay my just debts, obligations and funeral expenses. I further provide my
Personal Representative shall not be required to post surety bond in this or any other jurisdiction, and
direct that no expert appraisal be made of my estate unless required by law. If either of my
daughters as named in my will is unable or unwilling
to do so to act, the other shall act as sole executor of
my estate. If both of them shall be unable or un-
willing so to act, I appoint La Dena Davidson
of Spokane, Washington as my executor.

II. GUARDIAN: NONE

In the event I shall die as the sole parent of minor children, then I appoint N/A
as Guardian of said minor children. If this named
Guardian is unable or unwilling to serve, then I appoint N/A
as alternate Guardian.

Mary S. Manus
Testator's Initials

Execute and attest before a notary.

Caution: Louisiana residents should consult an attorney before preparing a will.

This product does not constitute the rendering of legal advice or services. This product is intended for informational use only and is not a substitute for legal advice. State laws vary, so consult an attorney on all legal matters. This product was not prepared by a person licensed to practice law in this state.

III. BEQUESTS:

I direct that after payment of all my just debts, my property be bequeathed in the manner following: to my spouse Beverly M. Manus the entirety of my estate. If she should predecease me then I direct the entirety of my estate be divided equally between my daughter Michelle D. Manus, born October 18, 1969 and Kimberly R. Manus, born September 16, 1976 and no other, except ~~their~~ direct descendants by birth or adoption. If there should be a total failure in that the named beneficiaries named herein predecease me then I direct that my estate be divided between my niece and nephews.

Gary D Manus
Testator's Initials

IN WITNESS WHEREOF, I have hereunto set my hand this 11TH day of December, 2000 (year), to this my Last Will and Testament.

Gary S. Manus
Testator Signature

IV. WITNESSED:

The testator has signed this will at the end and on each other separate page, and has declared or signified in our presence that it is his/her last will and testament, and in the presence of the testator and each other we have hereunto subscribed our names this _____ day of _____ (year).

Charlotte K. Hart
Witness Signature

1002 Cedar Ave, Peurston Id. 83501
Address

Kelly C. Van Buren
Witness Signature

1377 Jamman, Crt. Rd. Lewiston, Id 83501
Address

Vonda Campbell
Witness Signature

3334 Bryden Cr. Lewiston, Id 83501
Address

ACKNOWLEDGMENT

State of Washington }
County of Asotin }

We, Charlotte K. Hart, Kelly Van Buren,
Vonda Campbell, and Gary S. Manus

the testator and the witnesses, respectively, whose names are signed to the attached and foregoing instrument, were sworn and declared to the undersigned that the testator signed the instrument as his/her Last Will and Testament and that each of the witnesses, in the presence of the testator and each other, signed the will as witnesses.

Testator: Gary S. Manus

Witness: Charlotte K. Hart
Witness: Kelly C. Van Buren
Witness: Vonda Campbell

On December 11, 2000 before me, Ethel L. Kimbler-Ellis,
appeared Gary S. Manus
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature Ethel L. Kimbler-Ellis

Affiant Known Produced ID
Type of ID _____

(Seal)

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