

Real Estate Excise Tax Affidavit (RCW 82.45 WAC 458-61A)

Only for sales in a single location code on or after January 1, 2023.
This affidavit will not be accepted unless all areas on all pages are fully and accurately completed.
This form is your receipt when stamped by cashier. Please type or print.

Form 84 0001a

Check box if partial sale, indicate % _____ sold.

List percentage of ownership acquired next to each name.

1 Seller/Grantor

Name Estates of Jerold R. Bartlett & Glenda A. Bartlett

Mailing address Jerry Allen, PR
PO Box 348

City/state/zip Clarkston, Washington 99403

Phone (including area code) _____

2 Buyer/Grantee

Name Bartlett Family, LLC

c/o Julie Etheridge, Manager

Mailing address 3717 14th St. C

City/state/zip Lewiston, ID 83501

Phone (including area code) (208) 790-2940

3 Send all property tax correspondence to: Same as Buyer/Grantee

Name _____

Mailing address _____

City/state/zip _____

List all real and personal property tax parcel account numbers	Personal property?	Assessed value(s)
<u>1-004-26-006-0004-0000</u>	<input type="checkbox"/>	<u>\$ 50,200.00</u>
<u>1-004-27-006-0004-0000</u>	<input type="checkbox"/>	<u>\$ 58,400.00</u>
<u>1-004-26-005-0007-0000</u>	<input type="checkbox"/>	<u>\$ 120,800.00</u>
<u>1-004-27-006-0003-0000</u>		<u>\$ 19,500.00</u>

4 Street address of property 1422, 1424, 1426, 1428, & 1430 16th Ave, Clarkston, WA 99403

This property is located in Asotin County (for unincorporated locations please select your county)

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 you need more space, attach a separate sheet to each page of the affidavit).

See attached legal description, Exhibit A.

5 11 - Household, single family units

Enter any additional codes _____
(see back of last page for instructions)

Was the seller receiving a property tax exemption or deferral under RCW 84.36, 84.37, or 84.38 (nonprofit org., senior citizen or disabled person, homeowner with limited income)? Yes No

Is this property predominately used for timber (as classified under RCW 84.34 and 84.33) or agriculture (as classified under RCW 84.34.020) and will continue in it's current use? If yes and the transfer involves multiple parcels with different classifications, complete the predominate use calculator (see instructions) Yes No

6 Is this property designated as forest land per RCW 84.33? Yes No

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

Is this property receiving special valuation as historical property per RCW 84.26? 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 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 signature _____ 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) doesn't wish to continue, all additional tax calculated pursuant to RCW 84.26, shall be due and payable by the seller or transferor at the time of sale.

(3) NEW OWNER(S) SIGNATURE

Signature _____ Signature _____

Print name _____ Print name _____

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

Signature of grantor or agent Jerry Allen

Name (print) Jerry I. Allen, Personal Representative

Date & city of signing 2-3-23

Signature of grantee or agent Julie Etheridge

Name (print) Julie Etheridge, Manager, Bartlett Family, LLC

Date & city of signing 2-3-23

Perjury in the second degree is a class C felony which is punishable by confinement in a state correctional institution for a maximum term of five years, or by a fine in an amount fixed by the court of not more than \$10,000, or by both such confinement and fine (RCW 9A.72.030 and RCW 9A.20.021(1)(c)).

To ask about the availability of this publication in an alternate format for the visually impaired, please call 360-705-6705. Teletype (TTY) users may use the WA Relay Service by calling 711.

CREASON, MOORE,
DOLAN & GIDL
CK# 146012

FEB - 7 2023
ASOTIN COUNTY
TREASURER

55842

EXHIBIT "A"

Parcel 1:

That part of the East half of Lot 6, Block K K, VINELAND, according to the plat recorded in Book A of Plats, page 15, records of Asotin County, Washington, lying South of the following described parcel:

That part of Lot 6 of Block K K of Vineland, Asotin County, Washington, more particularly described as follows: Commencing at the Southeast corner of said Lot 6; thence North 141.77 feet to the True Place of Beginning; thence continue North 194.72 feet to a point on the South right-of-way line of the Fleshman Way line survey of the Fleshman Way/15th Street Project, said point lying 123.36 feet Southerly of Station 19+88.74; thence North 51°59'08" West along said right-of-way line 107.39 feet to a point lying 60 feet Southerly of Station 19+00.00, said point being a point on a curve; thence deflect left and continue along said right-of-way line around a curve to the left with a radius of 3940.00 feet for a distance of 80.40 feet to a point on the West line of the East half of said Lot 6; thence South along said West line 261.75 feet; thence East 165.00 feet to the true place of beginning.

1-004-26-006-0004-0000

Parcel 2:

That portion of Lot 6 of Block L L of VINELAND according to the recorded plat thereof, more particularly described as follows:

Beginning at the Southwest corner of the East half of Lot 6 of Block K K of Vineland, and extending said Lot line Southerly a distance of 281.67 feet to the center of 16th Avenue (Pomeroy Road); thence Northeasterly along the center of said road a distance of 180.85 feet; thence Northerly a distance of 178.14 feet to the Southeast corner of the East half of Lot 6 of Block K K of Vineland; thence Westerly a distance of 165 feet to the place of beginning.

EXCEPTING THEREFROM any portion lying within 16th Avenue adjacent thereto.

1-004-27-006-0004-0000

Parcel 3 and 4:

That part of Lot 5 of Block K K and of Lot 6 of Block L L of Vineland, Asotin County, Washington, more particularly described as follows:

Beginning at the Southwest corner of said Lot 5; thence North 141.77 feet; thence East 155.00 feet; thence South 240.93 feet to a point on the centerline of 16th Avenue; thence South 63°00' West along said centerline a distance of 173.96 feet; thence North 178.14 feet to the place of beginning.

1-004-26-005-0007-0000 and 1-004-27-006-0003-0000

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After recording return to:

David A. Gittins
843 7th Street
P.O. Box 191
Clarkston, WA 99403

Asotin County, WA
Darla McKay Auditor

341809

08/25/2014 03:34 PM



I-127 LOP
Pgs=3 Fee:\$74.00
DAVID A GITTINS

Document Title(s) or transactions contained therein:

1. Affidavit (Lack of Probate)

Court Cause Number(s) under which Documents were filed:

(on page 1 of document)

Affiant

1. Allen, Jerry I.

55842

AFFIDAVIT
(Lack of Probate)

STATE OF WASHINGTON)
 : ss.
County of Asotin)

Jerry I. Allen, being first duly sworn on oath, deposes and says:

1 That your affiant is the Personal Representative of the Estate of Glenda A. Bartlett, who died on August 2, 2012 in Asotin County, Washington, then being a resident of Asotin County, Washington.

2. At the time of her death, Glenda A. Bartlett was a widow. Her husband was Jerrold R. Bartlett. Jerrold R. Bartlett passed away on January 27, 2012, a resident of Asotin County, Washington. Jerrold R. Bartlett's Last Will and Testament was executed on May 10, 1982, the original of which was filed with the Asotin County Superior Court clerk on March 13, 2014, under File No. 14-4-00020-3. The Will was filed pursuant to RCW 11.20.010 and 11.20.050.

3. Glenda A. Bartlett's Will was admitted to probate in the Asotin County Superior Court under Cause No. 12-4-00068-1 on September 28, 2012. Jerry I. Allen, your affiant, was appointed as her Personal Representative.

4. Affiant knows of his own knowledge that all of the obligations against the marital community and against both Glenda A. Bartlett and her deceased husband, Jerrold R. Bartlett, have been paid in full.

5. Under the terms of Jerrold R. Bartlett's Last Will and Testament, Paragraph Sixth, all of Jerrold R. Bartlett's assets, including real property, were to be distributed to his wife, Glenda A. Bartlett.

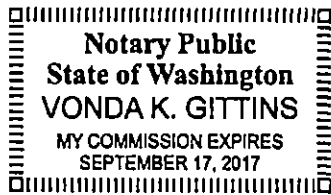
6. This affidavit is made solely to induce the title company to insure title to real property in which Jerrold R. Bartlett held an interest at the time of his death.

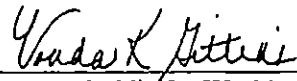
Dated this 17 day of March, 2014.



Jerry I. Allen

Signed and sworn to before me this 17 day of March, 2014.





Notary Public for Washington
Residing at Clarkston
My appointment expires: 9-17-2017

After recording return to:

David A. Gittins
843 7th Street
P.O. Box 191
Clarkston, WA 99403

Asotin County, WA
Darla McKay Auditor

341810
08/25/2014 03:35 PM



00002899201403418100030038

I-131 DC
Pgs=3 Fee:\$34.00
DAVID A GITTINS

Document Title(s) or transactions contained therein:	
1. Certificate of Death	
Document Number: (on page 1 of document)	341810 ASOTIN COUNTY, WA 08/25/2014 03:35 PM
Decedent	00002899201403418100030038
1. Bartlett, Jerrold Roscoe	

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STATE OF WASHINGTON
DEPARTMENT OF HEALTH

Local File Number: 134 Washington State Certificate of Death State File Number: 2012 40025

1. Legal Name (Last, First, Middle, Last, Suffix): Jerrold Roscoe Bartlett Death Date: Jan. 27, 2012

3. Sex (M/F): Male 4a. Age at Last Birthday: 78 4b. Under 1 Year: Months 5. Social Security Number: [REDACTED] 8. County of Death: Asotin

7. Birthdate: July 20, 1933 8a. Birthplace (City, Town, or County): Plainfield 8b. (State or Foreign Country): Vermont 9. Decedent's Education: High School Graduate

10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify: No 11. Decedent's Race(s): White 12. Was Decedent ever in U.S. Armed Forces? No

13a. Residence: Number and Street (e.g., 624 SE 5th St.) (Include Apt. No.): 1430 16th Ave. 13b. City or Town: Clarkston

13c. Residence: County: Asotin 13d. Tribal Reservation Name (if applicable): N/A 13e. State or Foreign Country: Washington 13f. Zip Code + 4: 99403 13g. Inside City Limits? Yes No Unk

14. Estimated length of time at residence: 39 years 15. Marital Status at Time of Death: Married 16. Surviving Spouse's or Domestic Partner's Name (Give name prior to first marriage): Glenda Ann Pitts

17. Usual Occupation (Indicate type of work done during most of working life. Do not use retired): Heavy Equipment Operator 18. Kind of Business/Industry (Do not use Company Name): Road Construction

19. Father's Name (First, Middle, Last, Suffix): Leland H. Bartlett 20. Mother's Name Before First Marriage (First, Middle, Last): Violet M. Rushlow

21. Informant's Name: Glenda Bartlett 22. Relationship to Decedent: Wife 23. Mailing Address: Number and Street or RFD No., City or Town, State, Zip: 1430 16th Ave., Clarkston, Washington 99403

24. Place of Death, if Death Occurred in a Hospital: Home 24b. Place of Death, if Death Occurred Somewhere Other than a Hospital: Home

25. Facility Name (If not a facility, give number & street or location): 1430 16th Ave. 26a. City, Town, or Location of Death: Clarkston 26b. State: WA 27. Zip Code: 99403

28. Method of Disposition: Cremation 29. Place of Final Disposition (Name of cemetery, crematory, other place): Mountain View Crematory 30. Location: City/Town, and State: Lewiston, Idaho 83501

31. Name and Complete Address of Funeral Facility: Merchant Funeral Home - 1000 7th St - Clarkston, WA 99403 32. Date of Disposition: January 31, 2012

33. Funeral Director Signature: [Signature]

34. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Add additional lines if necessary.

IMMEDIATE CAUSE (Final disease or condition resulting in death): Right middle cerebral stroke Interval between Onset & Death: 2 yrs

Due to (or as a consequence of): Stroke Interval between Onset & Death: 2 yrs

UNDERLYING CAUSE (disease or injury that initiated the events resulting in death): Stroke Interval between Onset & Death: 2 yrs

35. Other significant conditions contributing to death but not resulting in the underlying cause given above: Diabetes Type II, atherosclerotic vascular disease

36. Manner of Death: Natural Homicide Accident Undetermined Suicide Pending

39. If female: Not pregnant within past year Not pregnant, but pregnant within 42 days before death Pregnant at time of death Not pregnant, but pregnant 43 days to 1 year before death Unknown if pregnant within the past year

40. Did tobacco use contribute to death? Yes Probably No Unknown

41. Date of Injury: 01/27/12 42. Hour of Injury (24hrs): 01:30 43. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area): Home 44. Injury at Work? Yes No Unk

45. Location of Injury: Number & Street: 1430 16th Ave. Apt. No.: City or Town: Clarkston County: Asotin State: WA Zip Code + 4: 99403

46. Describe how injury occurred: Stroke

47. Transportation Injury, specify: Driver/Operator Pedestrian Passenger Other (Specify):

48a. Certifying Physician: To the best of my knowledge, death occurred at the time, date, and place and due to the cause(s) and manner stated. [Signature]

48b. Medical Examiner/Coroner: On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated. [Signature]

49. Name and Address of Certifier, Physician, Medical Examiner or Coroner (Type or Print): Harold L. Ellison, M.D. 1207 Evergreen St. Clarkston, WA

50. Hour of Death (24hrs): 2330

51. Name and Title of Attending Physician (if other than Certifier) (Type or Print): [Signature]

52. Date Signed (month/year/day): 01-30-2012

53. Title of Certifier: Medical Doctor 54. License Number: MD 0002309 55. Registration Fee Number:

56. Was case referred to ME/Coroner? Yes No

57. Registrar Signature: [Signature] 58. Date Received (month/year/day): JAN 31 2012

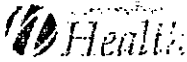
59. Amendments:



DOH 3400 Rev 07/2007
DOH 01-003 (6/10)

THIS IS A CERTIFIED COPY OF THE RECORD ON FILE WITH CENTER FOR HEALTH STATISTICS. CERTIFIED COPIES MUST HAVE THE OFFICIAL SEAL.

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Affidavit for Correction

Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
(360) 256-4300

This is a legal document. Complete in ink and do not alter.

STATE OFFICE USE ONLY

State File Number	Date	Affidavit Number
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Use the section below for requesting any changes on the record.

Record Type: Birth Death Marriage Dissolution

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

4. Father's Full Name (Include maiden name if married and also listed) _____ 5. Mother's Full Name (For Birth) (Wife for Marriage or Dissolution) _____

If the record is incorrect or incomplete as follows:

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

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

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

15. Signature: _____ Title: _____ Address: _____ on the record of _____

All other records are registered as follows:

All changes must be substantiated by documentary proof furnished with the affidavit.

State and Washington Birth	Marriage Record	Death Record
Washington Birth	Washington Marriage	Washington Death
Washington Birth	Washington Marriage	Washington Death

Other records include: School Transcripts, Voter's Registration Card (if it bears an effective date), Motor Registration Card (front and back). We do not accept Driver's License, Social Security card or a hospital issued decorative birth certificate.

1. Copy of the birth certificate if the child is under 18, or a valid marriage or divorce record if the child is 18 or older, may change the birth certificate.
2. The procedure for changing the name of a child is as follows: For example, if the affidavit says the name is Mary Ann Doe, then the proof must show the name to be changed to Bob Mary Ann Doe or John Doe does not put a name like Mary Ann Doe.
3. Proof must be filed for name change within five years of birth.
4. If a name change is pending or in progress, any change to a child's last name with an affidavit for correction, provided:
 - his/her name only change - show any change on affidavit a certified copy of a court ordered name change.
 - the name change may include a combined name or last name to be present on the certificate) or any combination of the two.
 After the name change is complete, the certified copy of a court ordered name change. Minor spelling changes may be made with an affidavit and declare any proof.
5. Parent(s) may change the name of a child with the name change on record on the affidavit for correction (until their child's 18th birthday).
6. This affidavit must be submitted to the State Office of Health Statistics, Olympia, WA 98504-7814, form DOH/CHS 021.

- Death Certificates**
1. Once an affidavit is filed at the State Office of Health Statistics, if the information is available confirming such provision is presented) may change the non-medical information.
 2. The medical information on the death certificate may be changed only by the attending physician or the coroner/medical examiner.
 3. The affidavit must be filed at the State Office of Health Statistics, Olympia, WA 98504-7814, or the department where the death occurred to make changes.

- Marriage/Dissolution (Divorce) Certificates**
1. Divorce (or annulment) may be changed by affidavit (with proof) by the person.
 2. To change the date of divorce or annulment, the affidavit (dissolution) must sign the affidavit.



DOH/CHS 023a 2/14/11

VV00323349

APR 04 2012

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CERTIFIED

FILED

2012 OCT -1 A 11:29

MARIE J. EGGART
COUNTY CLERK
ASOTIN COUNTY, WA

SUPERIOR COURT OF WASHINGTON FOR ASOTIN COUNTY

In re the Estate of:

GLEND A. BARTLETT,

Deceased.

No. 12-4-00068-1
LETTERS TESTAMENTARY
WITH NONINTERVENTION
POWERS

WHEREAS, the Last Will and Testament of Glenda A. Bartlett, deceased, was on the 15th day of October, 2012, duly exhibited, proven, and recorded in our said Superior Court;

WHEREAS, Jerry I. Allen is the person nominated as Personal Representative in said Will;

WHEREAS, Jerry I. Allen has petitioned this court to be appointed Personal Representative thereof; and

WHEREAS, this court has entered an order granting nonintervention powers to the Personal Representative,

NOW, THEREFORE, know all men by these presents, that we do hereby authorize the said Jerry I. Allen to execute the terms of the Will with nonintervention powers according to law.

LETTERS TESTAMENTARY WITH
NONINTERVENTION POWERS

Law Office of
David A. Gittins
843 Seventh Street
Clarkston, WA 99403
(509)758-2501
Facsimile: (509)758-3576

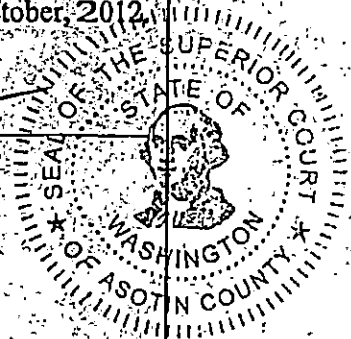
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WITNESS, William D. Acey, Judge of our Superior Court, and the seal of said Court hereto affixed this 1st day of October, 2012.

William D. Acey
Clerk of the Superior Court

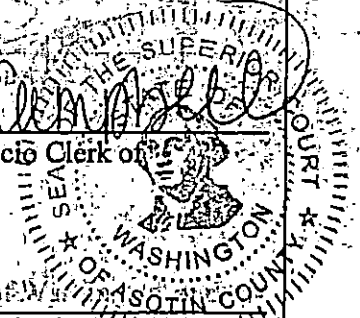


STATE OF WASHINGTON)
) ss.
County of Asotin)

I, *Mckenzie Campbell*, County Clerk of the County of Asotin, State of Washington, and ex-officio Clerk of the Superior Court of the State of Washington for Asotin County, do hereby certify that the within and foregoing is a full, true, and correct copy of the Letters Testamentary and of the whole thereof, as the same are now on file and of record in the above entitled cause in my office and custody. Said Letters have never been revoked and are still in Full Force and Effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of said Superior Court this 31st day of *January, 2013*

Mckenzie Campbell
County Clerk & Ex-Officio Clerk of the Superior Court



By *[Signature]* Deputy County Clerk
Deputy County Clerk of the Superior Court

Law Office of
David A. Gittins
843 Seventh Street
Clarkston, WA 99403
(509) 758-2501
Facsimile: (509) 758-3576

LETTERS TESTAMENTARY WITH
NONINTERVENTION POWERS

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