

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 Claudia P. Guest

Mailing address 257 Island Drive

City/state/zip Hendersonville TN 37075

Phone (including area code) _____

2 Buyer/Grantee

Name Ramon Muro-Escalante

Mailing address 737 2nd St.

City/state/zip Clarkston WA 99403

Phone (including area code) _____

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

Name Ramon Muro-Escalante

Mailing address _____

City/state/zip _____

List all real and personal property tax parcel account numbers

10011502300010000

Personal property?

Assessed value(s)

148,000.00

4 Street address of property 737 2nd Street, Clarkston, WA 99403

This property is located in Asotin Clarkston (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).

Lot 22 and the North 30 feet of Lot 23 in Block 15 of Clarkston, according to the official plat thereof, filed in Book B of Plats at Page(s) 6,

records of Asotin County, Washington.

5 Land use code 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 (non-profit 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 its 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.

(3) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE) NEW OWNER(S): To continue the current designation as forest land or reclassification 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

continuanace.

Deputy assessor signature _____ Date _____

(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) NEW OWNER(S): To continue special valuation as histeric 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 0202

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

Signature of grantor or agent Claudia P. Guest Signature of grantee or agent Ramon Muro-Escalante

Name (print) Claudia P. Guest Name (print) Ramon Muro-Escalante

Date & city of signing 3-15-23, Hendersonville TN Date & city of signing 3-14-23, Clarkston, WA

7 List all personal property (tangible and intangible) included in selling price.

If claiming an exemption, list WAC number and reason for exemption. WAC number (section/subsection) _____ Reason for exemption _____

Type of document Statutory Warranty Deed (SWD)

Date of document 03/10/23

Gross selling price 250,000.00

*Personal property (deduct) 0.00

Exemption claimed (deduct) 0.00

Taxable selling price 250,000.00

Excise tax: state 2,750.00

Less than \$525,000.01 at 1.1% 0.00

From \$525,000.01 to \$1,525,000 at 1.28% 0.00

From \$1,525,000.01 to \$3,025,000 at 2.75% 0.00

Above \$3,025,000 at 9% 0.00

Agricultural and timberland at 1.28% 0.00

Total excise tax: state 2,750.00

Local 625.00

*Delinquent interest: state 0.00

Local 0.00

*Delinquent penalty 0.00

Subtotal 3,375.00

*State technology fee 5.00

Affidavit processing fee 0.00

Total due 3,380.00

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

*SEE INSTRUCTIONS

To ask about the availability of this publication, or for more information, please call 360-705-6705. Teletype

REV 84 0001a (09/08/22)

THIS SPACE TREASURER'S USE ONLY

COUNTY TREASURER

DATE 03/15/2023 - RECEIPT No. 55913 - Alliance Title - Clarkston

Print on legal size paper Page 1 of

EFT

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

Title Insurance Commitment No: 631365

STATE OF Washington)
) SS:
COUNTY OF Asotin)

(herein, "Affiant"), being first duly sworn, on oath deposes and says:

That Affiant is (check one):

- the lawful surviving spouse of the Decedent
 Surviving child of the Decedent
 Registered domestic partner of the Decedent
 One of the joint tenants named in that certain instrument creating a joint tenancy with a right of survivorship identified in that certain deed recorded on _____ [mm/dd/yyyy], under Recording No. _____, in _____ County, Washington,
 other (identify): _____

All with respect to the estate of Vernon N. Gillet, Jr. (herein "Decedent"), who died on 05/10/2022, in the County of Sumner, State of TN, then being a resident of the City of Hendersonville, County of Sumner, State of TN. (A copy of the death certificate is attached hereto.)

That Affiant has herein below identified each and all of the heirs at law and next of kin of decedent, including but not limited to children, adopted children, the issue of any predeceased child or adopted child (if decedent left no surviving children, then Affiant has listed below all of the surviving parents, brothers and sisters of decedent), spouse, registered domestic partner, and including all parties who would have 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):

55913

Name & relationship Claudia Guest Spouse
Address: 257 Island Dr, Hendersonville, TN 37075
Name & relationship _____
Address: _____
Name & relationship _____
Address: _____
Name & relationship _____
Address: _____

That among items of real property owned by the Decedent at the time of death was real estate located in
Asotin County, Washington, and described in the above referenced Title Insurance
Commitment.

As to the Decedent, said real estate was [check one]

- Community property
 Separate property
 Joint tenancy property

CHECK ALL BOXES WHICH APPLY IN EACH SECTION:

1. That on the date the real property was purchased the Decedent was:
 married to Vernor West Jr
 unmarried, not a registered domestic partner
 unmarried, a registered domestic partner of _____
2. That on the date of death the Decedent was
 married to SLZ
 unmarried, not a registered domestic partner
 unmarried, a registered domestic partner of _____
3. That the decedent left a Will, a copy of which is attached hereto.
 That the decedent left no Will.
 That the decedent executed a Community Property Agreement. It was recorded under _____
County recording number _____ (if unrecorded, attach a copy)
4. That the decedent's estate is not being probated.

That the decedent's estate is subject to probate proceedings in _____ County, State of _____, under Probate No. _____

5. That the estate of the decedent is exempt from State and/or Federal succession or inheritance taxes.
- That State and/or Federal succession or inheritance taxes in the amount of \$ _____ have been paid. Copies of the release/discharge are attached hereto.
- That State and/or Federal succession or inheritance taxes are due, but have not been paid.
5. That the decedent has not received assistance from the State of Washington for medical care.
- That the decedent has received assistance from the State of Washington for medical care.
- That the State of Washington has been fully reimbursed for assistance for medical care.

That, with respect to the property, if any, owned by the Decedent in joint tenancy as described above, at all times from the time of the execution of the instrument by which the joint tenancy was created to the death of the Decedent, each of the joint tenants recognized that the above described joint tenancy property was held in joint tenancy, and that the interest of no one or more of said joint tenants has ever been conveyed, encumbered or otherwise separated from the interest of the other joint tenant(s), either voluntarily or involuntarily, whether by specific act or by operation of law; and that said joint tenancy continued in full force until the death of the Decedent with respect to the interest of the Decedent and, if there are two or more surviving joint tenants, including the Affiant, the joint tenancy continues with respect to the interests of the said surviving joint tenants.

That Affiant knows of the Affiant's own knowledge, and so states, that each and all of the obligations against the estate of said 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, except as follows (use reverse side or attach a list if necessary): _____

That the value of the Decedent's estate at date of death, including all real and personal property, was approximately \$ 500,000, including the value of community property of Decedent and Decedent's surviving spouse, if any, of approximately \$ _____, and including the value of Decedent's separate property, if any, of approximately \$ _____ and including the full value of all other property, if any, held by the Decedent in joint tenancy of approximately \$ _____.

This affidavit is made to induce Chicago TITLE INSURANCE COMPANY (the Company) to insure real property covered by the Company's order number set forth above, in which Decedent held an interest at the time of the Decedent's death. Affiant urges the Company to issue its policy of title insurance in full reliance upon the representations set forth herein. The Affiant, for the Affiant and for the Affiant's heirs, executors and administrators, covenants to indemnify said Company or any other person, including a purchaser of said real estate, for any loss arising from reliance on any misstatement of fact herein.

DATED: 3.13., 20 23

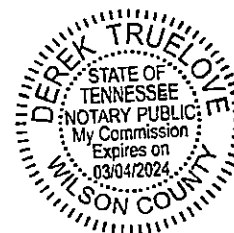
Claudia Guert
(Signature)

Clara Guert
(Print or type Affiant's full name)

257 Island Dr
(Full address and telephone number)
Hendersonville, TN 37075

SUBSCRIBED and SWORN TO before me this 13 day of March, 20 23

Notary Public in and for the State of TN
Tennessee, residing at Kelso TN



55912

CERTIFICATION OF VITAL RECORD



Date Issued: Mar-10-2023

Edward G. Bishop III
Ralph A. Alvarado, MD, FACP
Commissioner
State Registrar



14742165

Tennessee Code Annotated 68-3-101, as amended by the Tennessee Code Annotated Act of 1977, provides that this document is prohibited from being altered, amended, or otherwise changed in any way. Any alteration, amendment, or other change to this document is prohibited. This certified copy is valid only when printed on security paper showing the red embossed seal of the Tennessee Department of Health. Any other copy is void. This certification, reproduction, or use of this document is prohibited.

1. Decedent's Legal Name: VERNON WALTER GUEST SR.
 2. Decedent's Maiden Name: BETTY DUNHAM
 3. Date of Birth: 05/22/1941
 4. Place of Birth: MERCED, CA
 5. Sex: M
 6. Race: WHITE
 7. Decedent's Education: NO COLLEGE DEGREE, BUT NO DEGREE
 8. Marital Status: MARRIED
 9. Spouse's Name: CLAUDIA GUEST
 10. Spouse's Maiden Name: CLAUDIA GUEST
 11. Spouse's Date of Birth: 05/13/2022
 12. Spouse's Place of Birth: NASHVILLE, TN
 13. Decedent's Social Security Number: SPINNER
 14. Decedent's Driver's License Number: SPINNER
 15. Decedent's State of Residence: TENNESSEE
 16. Decedent's County of Residence: SPINNER
 17. Decedent's City of Residence: HENDERSONVILLE
 18. Decedent's Zip Code: 37075
 19. Decedent's Country of Residence: YES
 20. Decedent's Country of Birth: YES
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 100. Decedent's Country of Birth: YES

STATE OF TENNESSEE
Office of Vital Records
CERTIFICATE OF DEATH
STATE NUMBER 2022-032743



55913