



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.

Form sections 1 and 2: Seller/Grantor (Trudi Knopes) and Buyer/Grantee (QiMei Zeng) with addresses and contact information.

Form section 3: Tax correspondence information for QiMei Zeng, including mailing address and phone number.

Form section 4: Property address (1640 8th Street and 924 16th Avenue, Clarkston, WA) and location details.

Form section 5: Land Use Code (11 Household, single family units) and exemption questions.

Form section 6: Continuation and compliance notices, owner signature line, and deputy assessor information.

Form section 7: Personal property included in selling price and tax calculation table showing Gross Selling Price of \$262,000.00 and Total Due of \$3,542.00.

Form section 8: Certifications and signatures of Grantor (Trudi Knopes) and Grantee (QiMei Zeng) dated 03-01-2021.

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)).

REV 84 0001a (6/26/14)

THIS SPACE - TREASURER'S USE ONLY

COUNTY TREASURER

DATE 03/04/2021 - RECEIPT No. 53987 - Alliance Title - Clarkston

EXHIBIT "A"

532725

PARCEL I:

A part of Lot 14 in Block 'V' of Vineland, according to plat recorded in Book A of Plats at Page(s) 45 Records of Asotin County, Washington, more particularly described as follows:

Beginning at a stone monument at the Southeast corner of Lot 14, Block "V" of Vineland, said point being at the intersection of the centerlines of South 8th Street and 15th Avenue East; thence Northerly along the East boundary line of Lot 14 a distance of 224.8 feet; thence deflect left 87°49' a distance of 198.4 feet to the West boundary line of Lot 14; thence deflect left 90°00' a distance of 313.19 feet along the West boundary line to the Southwest corner of said Lot 14; thence deflect left 113°10' a distance of 225.12 feet along the South Boundary line of Lot 14 to The Place of Beginning.

EXCEPTING THEREFROM that part of Lot 14 of Block "V" of Vineland, described as follows: Commencing at the Southeast corner of said Lot 14, said point being the intersection of the centerlines of 16th Avenue and South 8th Street; thence Northerly along the East line of said Lot 14 a distance of 101.81 feet; thence deflect left 90°00' a distance of 35.00 feet; thence deflect left 90°00' a distance of 28.53 feet; thence deflect right 38°01' a distance of 60.11 feet; thence deflect right 31°00' a distance of 145.75 feet to a point on the West line of said Lot 14; thence deflect left 66°50' a distance of 54.38 feet to a point on the centerline of said 16th Avenue; thence deflect left 113° 10' along said centerline a distance of 225.12 feet to The Point of Beginning.

ALSO EXCEPTING THEREFROM All that portion of the hereinabove described Parcel I lying Southwesterly of a line beginning at a point opposite station 51+96.39 on the Fleshman Way line Survey of the Fleshman Way/15th Street project and 65.00 feet Northeasterly therefrom; thence Southeasterly to a point opposite Station 61+55.14 on said Fleshamn Way line survey and 60.00 feet Northeasterly therefrom; thence Southwesterly to a point opposite Station 61+53.49 on said Fleshman Way line survey and 53.00 feet Northeasterly therefrom; thence Southeasterly parallel with said Fleshman Way line survey to a point opposite Station 62+49.69; thence Southeasterly to a point opposite station 63+33.31 on said Fleshman Way line survey and 70.71 feet Northeasterly therefrom; thence Southeasterly to a point opposite Station 64+00.28 on said Flesham Way line survey and 73.52 feet Northeasterly therefrom and the end of this line description.

PARCEL II:

That part of Lot 13 of Block "V" of Vineland according to the plat recorded in Book A of Plats, Page 45, Records of Asotin County, Washington, described as follows:

Commencing at the intersection of 8th Street and Fleshman Way, said point being Station 63+54.38 on the Fleshman way right of way plans on file in the Asotin County Engineers office; thence North 67°11'42" West along the centerline of Fleshman Way for a distance of 184.07-feet to a point of curve; thence proceed around a curve to the right with a central angle of 1°05'11" and a radius of 800.00 feet, for a distance of 15.17 feet to a point, said point being Station 61+55.14 on the centerline of Fleshman Way; thence deflect right 90°00' for a distance of 65.00 feet to a point on the North right of way line of Fleshman Way, said point being the True Point of Beginning; thence North 36°42'41" East for a distance of 135.48 feet; thence North 53°17'19" West for a distance of 91.50 feet; thence South 36°42'41" West for a distance of 150.44 feet to a point on the North right of way line of Fleshman Way; thence deflect left 95°35'16" and proceed around a curve to the left with a central angle of 7°13'56" and a radius of 735.00 feet for a distance of 92.78 feet to a point, said point being the True Point of Beginning.

53987

Return Address
 Trudi Knopes
 25207 Serinty Lane
 Lepai, ID 83540
Trudi

Please print or type information

Document Title(s) (or transactions contained therein): 1. Affidavit (Lack of Probate) 2. 3. 4.
Grantor(s) (Last name first, then first name and initials): 1. Knopes, Randaolph Leslie 2. 3. 4. <input type="checkbox"/> Additional names on page __ of document.
Grantee(s) (Last name first, then first name and initials): 1. To The Public 2. 3. 4. <input type="checkbox"/> Additional names on page __ of document.
Legal description (abbreviated: i.e. lot, block, plat or sections, township, range, qtr/rtr.) <input type="checkbox"/> Additional legal is on page __ of document.
Reference Number(s) of Documents assigned or released: <input type="checkbox"/> Additional numbers on page __ of document.
Assessor's Property Tax Parcel/Account Number <input type="checkbox"/> Property Tax Parcel ID is not yet assigned <input type="checkbox"/> Additional parcel numbers on page __ of document
The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information.



State of Washington
 Department of Revenue
 Special Programs Division
 Miscellaneous Tax
 PO Box 47477
 Olympia WA 98504-7477

AFFIDAVIT (LACK OF PROBATE)

Trudi Knopes, being first duly sworn, deposes and says:

The undersigned affiant is the rightful heir to the real property described below, and is spouse

(relationship to decedent) of Randolph Leslie Knopes (decedent), who died on (date)

June 17, 2020, at

Clarkston Asotin Washington
City County State

*** A CERTIFIED COPY OF THE DEATH CERTIFICATE MUST BE PRESENTED. PLEASE NOTE: A copy may be used for recording at the discretion of the county.

REGARDING DISPOSITION OF REAL PROPERTY:

Attach the full legal description of the property with county and parcel number being transferred which is located at a commonly recognized address of:

Street

City State Zip Code

Decedent left no Last Will and Testament and/or Community Property Agreement; OR Decedent left a Community Property Agreement in favor of surviving spouse (A COPY OF WHICH IS ATTACHED for review), or has been recorded under _____ County recording number _____; OR

Decedent left a Last Will and Testament which HAS NOT been Probated or Revoked (A COPY OF WHICH IS ATTACHED for review)

"Heirs at law" includes surviving spouse, children, adopted children, issue of predeceased child or adopted child, parents, brothers and sisters of the decedent. Affiant hereby identifies all heirs at law of the decedent: (use additional pages if necessary)

Trudi Knopes, spouse
25207 Serenity Ln, Lapwai, ID 83540

Full name, age, relationship, address
Randi Leigh Knopes, child

Lapwai Wa
Full name, age, relationship, address
Zoe Knopes, child

Lapwai Id
Full name, age, relationship, address
Christina R. Tanner, step-child

Lewis and Id
Full name, age, relationship, address

(Continued on next page)

Shannon Chollett, step-child

Bellevue, CO
Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Dated: February 24, 2020

Trudi Knopes
Affiant's full name

509-552-1876
Telephone number

25207 Serenity Lane

Lapwal	Street	ID	83540
City		State	Zip Code
<u>Trudi Knopes</u>			
Signature		<u>2-24-2021</u>	Date

State of Washington County of Asotin

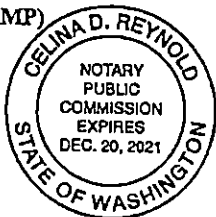
I know or have satisfactory evidence that Trudi Knopes
(name of person)

is the person who appeared before me, and said person acknowledged that (he/she) signed this affidavit and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this affidavit.

Dated: 02, 24, 2021

[Signature]
Signature of Notary Public

(SEAL OR STAMP)



Residing at: Walla Walla, WA

Notary Public in and for the State of WA

My appointment expires: 12, 20, 2021

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2020-027785

DATE ISSUED: 06/23/2020
FEE NUMBER:

FIRST AND MIDDLE NAME(S): RANDOLPH LESLIE
LAST NAME(S): KNOPE
AKA: SANDY KNOPE

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: JUNE 17, 2020
HOUR OF DEATH: 07:00 AM
SEX: MALE AGE: 64 YEARS
SOCIAL SECURITY NUMBER: 518-74-1340

HISPANIC ORIGIN: NO; NOT SPANISH, HISPANIC/LATINO
RACE: WHITE

BIRTH DATE: FEBRUARY 19, 1956
BIRTH PLACE: CLARKSTON, WA

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: TRUDI JO CHOLLET

OCCUPATION: PAINTER
INDUSTRY: COMMERCIAL PAINTING
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES: NO

INFORMANT: TRUDI JO KNOPE
RELATIONSHIP: WIFE
ADDRESS: 826 16TH AVE, CLARKSTON WA, 99403

CAUSE OF DEATH:
A: METASTATIC THYROID SARCOMA
INTERVAL: 6 MONTHS

B: INTERVAL

C: INTERVAL

D: INTERVAL

OTHER CONDITIONS CONTRIBUTING TO DEATH: HYPERTENSION

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

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:

DESCRIBE HOW INJURY OCCURRED:

IS TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 826 16TH AVE
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403

RESIDENCE STREET: 826 16TH AVE
CITY, STATE, ZIP: CLARKSTON, WA 99403
INSIDE CITY LIMITS: YES COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 13 YEARS

FATHER: JACK KNOPE
MOTHER: PATRICIA GAMET

METHOD OF DISPOSITION: REMOVAL FROM STATE
PLACE OF DISPOSITION: MOUNTAIN VIEW CREMATORY

CITY, STATE: LEWISTON, IDAHO
DISPOSITION DATE: JUNE 19, 2020

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

MANNER OF DEATH: NATURAL
AUTOPSY: NO
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE:
CAUSE OF DEATH: NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH: UNKNOWN
PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: ELIZABETH N. BLACK, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 1271 HIGHLAND AVE STE B
CITY, STATE, ZIP: CLARKSTON, WA 99403
DATE SIGNED: JUNE 17, 2020

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

LOCAL DEPUTY REGISTRAR: MAURINE L. NICHOLSON
DATE RECEIVED: JUNE 18, 2020



Affidavit for Correction

Mail to: 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
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Required information must match current information on record

Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution (Divorce)				
1. Name on Record:			2. Date of Event:	3. Place of Event:
First	Middle	Last	MM/DD/YYYY	City, State, Zip
4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution)			5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution)	
First	Middle	Last/Guardian	First	Middle
6. Name of Person Requesting Correction: Relationship to Person on Record: <input type="checkbox"/> Self <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Hospital <input type="checkbox"/> Parent(s) <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (specify)				

7. Return Mailing Address:

PO Box or Street Address: _____ City: _____ State: _____ Zip: _____

Telephone Number: _____ Email Address: _____

Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:

8. The record now shows:	9. The true fact is:
10.	11.
12.	13.
14.	15.

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

16a. Signature: _____ Date: _____

16b. Signature of 2nd parent (if required): _____ Date: _____

INSTRUCTIONS - go to www.doh.wa.gov for more information

Required documentary proof must be submitted with the affidavit and include full name and birth date. Examples of documentary proof include:

- Birth/Marriage/Divorce record
- Military record (DD-214)
- School transcripts
- Social Security Numident Report
- Certificate of Naturalization
- Hospital/medical record
- Passport
- Green/Permanent Resident card (I-951)

Birth Certificates

- Only a parent(s), legal guardian (if the child is under 18), or the named individual (if 18 or older) may change the birth certificate
- The proof(s) must match the asserted fact(s). For example, if the affidavit says the name should be Mary Ann Doe, the proof must show the name to be Mary Ann Doe
- Documentary proof must be five or more years old or established within five years of birth
 - Child under 18**
 - If legal guardian(s), include certified court order proving guardianship
 - Up to age one, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names)*
 - After age one, a court order is required to change the last name
 - No proof is required to change the first or middle name*
 - To correct parent's information, one documentary proof is required.
 - To correct the sex of the child, one documentary proof from a medical provider is required
 - Adult (18 years or older)**
 - Only the adult can change his or her birth certificate
 - If the first or middle name is missing, three pieces of documentary proof are required
 - If the first, middle and/or last name is misspelled, or date of birth is incorrect, two pieces of documentary proof are required
 - To correct parent's birth date, place of birth, or name, one documentary proof is required

*To change any part of the name of a child using this form, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate with request.

This affidavit cannot be used to add a father to a birth certificate (use paternity acknowledgment form DOH 422-032)

Death Certificates

- Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information. Proof is required to make changes if requested by a family member not listed as the informant on the certificate (family members are spouse or registered domestic partner, parent, sibling or adult child or stepchild). Marital status requires a certified copy of a court order if someone other than the informant is requesting the change.
- The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

- Personal facts (minor spelling changes in name, date or place of birth or residence) may be changed by the person with one piece of documentary proof
- To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit

DOH 422-034 January 2015



Certificate not valid unless the Seal of the State of Washington changes color when heat applied.

CERTIFIED

JUN 23 2020

Glenn Houser
 Dr. Glenn Houser
 Health District Officer
 Garfield County Health District



0 3 2 1 8 7 8 1

53987

Last Will and Testament

OF

RANDY KNOPEs

I, RANDY KNOPEs, being of sound and disposing mind and memory, and not acting under duress, fraud or undue influence of any person whomsoever, do make, publish, and declare this to be my LAST WILL AND TESTAMENT, revoking all other or former Wills and Codicils by me at any time made.

I.

I hereby declare that I am a married man, and my heirs consist of my wife, TRUDI JO KNOPEs, and my two children, RANDI LEIGH KNOPEs, born November 11, 1977, and ZOE KNOPEs, born September 21, 1995, I also have a step-daughter CHRISTINA R. TANNER, born March 8, 1983, and a step-son SHANNON CHOLLETT, born November 19, 1975.

II.

I direct that all of my just debts, expenses of my last illness and burial, the costs and charges of the administration of my estate, inheritance or transfer taxes and other taxes due thereon or therefrom, be paid as soon as convenient after my death from the residue of my estate. I waive for my estate all rights of reimbursement for any such payments. PROVIDED, HOWEVER, that this direction shall not authorize any creditor to require payment of any debt or obligation prior to its normal maturity in due course.

without bond and without intervention of any court.

of this, my LAST WILL AND TESTAMENT, and I direct that she be permitted to act as such
I hereby nominate and appoint my wife, TRUDI JO KNOPES, as personal representative

V.

be distributed to my other surviving children or step-children.

predeceased me leaving no surviving children, then said deceased child or step-child's share shall
child or step-child's surviving children, if any. If either of my children or step-children have
the date of my death, then said deceased child or step-child's share shall be distributed to that
any of my said children or step-children have predeceased me or dies within thirty (30) days of
CHRISTINA R. TANNER, in equal shares, share and share alike. PROVIDED, in the event that

LEIGH KNOPES and ZOE KNOPES and my step-children, SHANNON CHOLBERT and
2. All of the rest, residue and remainder of my estate I give to my daughters, RANDI

daughter, Randi Leigh Knopes to divide as she sees fit.

1. I give all of my family photos and family memorabilia from the Knopes family to my

property as follows:

If my wife, TRUDI JO KNOPES, does not survive me by thirty (30) days, then I give my

IV.

days.

personal, and mixed, to my beloved wife, TRUDI JO KNOPES, if she survives me by thirty (30)

I give, devise and bequeath all of my property and estate, wheresoever situated, real,

III.

In the event my wife, TRUDI JO KNOPEs is unable or unwilling to qualify as such personal representative, then, and in that event, I name and designate my daughter, RANDI LEIGH KNOPEs to serve in such capacity, and I direct that she be permitted to act as such without bond and without intervention of any court.

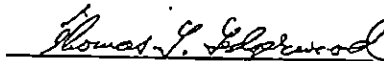
VI.

Should it be necessary to have a guardian appointed for the person and/or estate of any minor child of mine then I name and designate my wife, TRUDI JO KNOPEs to serve in such capacity; and I direct that no bond be required of her unless required by law. In the event that TRUDI JO KNOPEs is unable to serve in such capacity then I appoint my daughter, RANDI LEIGH KNOPEs, to serve as guardian and I direct that no bond be required of her.

IN WITNESS WHEREOF, I have hereunto set my hand in the presence of these subscribed witnesses at Clarkston, Asotin County, Washington, on this 2 day of April, 1999.


TESTATOR

The foregoing instrument, consisting of three (3) pages, including this page, was at the date thereof, by the said RANDY KNOPEs, sealed, published and declared by him to be his LAST WILL AND TESTAMENT, in the presence of us, who at his request and in his presence and in the presence of each other, have subscribed our names as witnesses thereto, RANDY KNOPEs appearing to us to be at the time of sound and disposing mind and memory, and not acting under duress or the undue influence of anyone whomsoever.


Thomas L. Ledgerwood


Carlyn L. Ledgerwood

AFFIDAVIT OF SUBSCRIBING WITNESSES

STATE OF WASHINGTON }
 } ss.
County of Asotin }

We, the undersigned, being first duly sworn upon oath, depose and say:

That we and each of us reside in Asotin County, Washington, are over the age of 18 years; that we each know the Testator herein, RANDY KNOPEs, on the date of the instrument to which this affidavit is attached, to wit: The 2nd day of April, 1999. That said instrument was signed and executed by the said Testator at Clarkston, Asotin County, Washington, on the date it bears, in our presence, and that said Testator thereupon published and declared said instrument to be his LAST WILL AND TESTAMENT, and requested us in attestation thereof to act as witnesses thereto; and that we then and there, in the presence of said Testator and in the presence of each other, subscribed our names as witnesses to this affidavit.

At the time of the execution of said instrument and this affidavit, the said Testator was of the age of majority, and was of sound and disposing mind and not acting under duress, fraud, menace, undue influence of misrepresentation, or any other liability heretofore unnamed which might militate against the validity of said instrument's being the LAST WILL AND TESTAMENT of said Testator.

This affidavit is made at the request of the Testator, pursuant to the provisions of RCW 11.20.020(2), who signed the instrument to which this affidavit is attached.

Thomas L. Ledgerwood
Thomas L. Ledgerwood
2520 Valleyview Drive
Clarkston, WA 99403

Carlyn L. Ledgerwood
Carlyn L. Ledgerwood
2520 Valleyview Drive
Clarkston, WA 99403

SIGNED AND SWORN to before me this 2nd day of April, 1999, by Thomas L. Ledgerwood and Carlyn L. Ledgerwood.

Thomas R. Hanks
Notary Public in and for the State of Washington,
residing at Clarkston. Expires: 3-5-01

