

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

Only for sales in a single location code on or after January 1, 2020.
This affidavit will not be accepted unless all areas on all pages are fully completed.
This form is your receipt when stamped by cashier. *Please type or print.*

Check box if the sale occurred in more than one location code. Check box if partial sale, indicate % _____ sold.
List percentage of ownership acquired next to each name.

1 Seller/Grantor
Name Keren Elizabeth Palmer
Mailing address 2102 Westwind Ct.
City/state/zip Clarkston WA 99403
Phone (including area code) NA

2 Buyer/Grantee
Name Jessica Palmer Ryan
Mailing address 417 N. Fayette St.
City/state/zip Alexandria VA 22314
Phone (including area code) 208 305 2581

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>1-415-00-001-000-000</u>	<input type="checkbox"/>	<u>\$ 0.00 94,700.00</u>
_____	<input type="checkbox"/>	<u>\$ 0.00</u>
_____	<input type="checkbox"/>	<u>\$ 0.00</u>

4 Street address of property 2102 Westwind Ct. 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).

Lot 1 of Westwind Village, according to the official plat thereof, recorded June 1, 2004 as Instrument No. 276632 of Official Records of Asotin County, Washington.

5 11 - Household, single family units
Enter any additional codes _____
(see back of last page for instructions)

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

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 predominantly used for timber (as classified under RCW 84.84 and 84.33) or agriculture (as classified under RCW 84.34.020)? See ETA 3215. Yes No
If yes, complete the predominate use calculator (see instructions for section 5).

If claiming an exemption, list WAC number and reason for exemption.
WAC number (section/subsection) 458-61A-202(6)(d)
Reason for exemption
transfer pursuant to transfer on death deed recorded on 8/19/2019 under Instrument No. 362827

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

Type of document Transfer on Death Deed
Date of document 8/19/2019

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.

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%	0.00
Agricultural and timberland at 1.28%	0.00
Total excise tax: state	0.00
0.0075 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

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 _____

PAID
JUN 10 2021
ASOTIN 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 agent _____ Signature of grantee or agent _____
Name (print) Jessica Palmer Ryan Name (print) Jessica Palmer Ryan
Date & city of signing Alexandria VA 22314 June 6, 2021 Date & city of signing Alexandria VA 22314 June 6, 2021

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.

Asotin County, WA
Darla McKay Auditor

362827

08/19/2019 11:40 AM



00027203201903628270020022

I-178 TOD
Pgs=2 Fee:\$104.50
GITTINS & DUKES, PLLC

After recording return to:

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

Grantor: Palmer, K. Elizabeth, a/k/a Keren Elizabeth Palmer, a single person
Grantee: Ryen, Jessica Palmer, a married person dealing in her sole and separate property
Legal: Lot 1, Westwind Village
Parcel No: 1-415-00-001-0000-0000

TRANSFER ON DEATH DEED

The Grantor, K. Elizabeth Palmer, a/k/a Keren Elizabeth Palmer, a single person, for and in consideration of a gift, conveys and quitclaims upon Grantor's death to Jessica Palmer Ryen, a married person dealing in her sole and separate property, the Grantee, the following described real property, situate in the County of Asotin, State of Washington, including any after-acquired title:

Lot 1 of Westwind Village, according to the official plat thereof, recorded June 1, 2004 as Instrument No. 276632 of Official Records of Asotin County, Washington.

Tax Parcel No. 1-415-00-001-0000-0000

more commonly known as 2102 Westwind Court

The transfer as described above is to occur upon Grantor's death. This Deed is made pursuant to RCW Chapter 64.80.

Dated this 15th day of August, 2019.

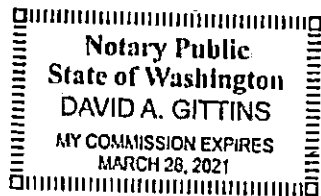
Keren Elizabeth Palmer
Keren Elizabeth Palmer

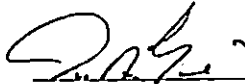
54252

STATE OF WASHINGTON)
 : ss.
County of Asotin)

On this day personally appeared before me Keren Elizabeth Palmer, to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that she signed the same as her free and voluntary act and deed for the uses and purposes therein mentioned.

Given under my hand and official seal this 15th day of August, 2019.





Notary Public for Washington
Residing at Clarkston
My appointment expires March 28, 2021

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2021-023989

DATE ISSUED: 05/24/2021
FEE NUMBER:

FIRST AND MIDDLE NAME(S): KEREN ELIZABETH
LAST NAME(S): PALMER

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: MAY 19, 2021
HOUR OF DEATH: 11:03 PM
SEX: FEMALE AGE: 68 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 2102 WESTWIND COURT
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403

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

RESIDENCE STREET: 2102 WESTWIND COURT
CITY, STATE, ZIP: CLARKSTON, WA 99403
INSIDE CITY LIMITS: NO COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 20 YEARS

BIRTH DATE: SEPTEMBER 18, 1952
BIRTH PLACE: TACOMA, WA

FATHER: EDMUND BERTON VAREY
MOTHER: SHEILA MAY NORTON

MARITAL STATUS: WIDOWED
SURVIVING SPOUSE: NOT APPLICABLE

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: VALLEY CERMATORY

OCCUPATION: EDUCATIONAL ASSISTANT
INDUSTRY: PUBLIC SCHOOL DISTRICT
EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE
US ARMED FORCES: NO

CITY, STATE: LEWISTON, IDAHO
DISPOSITION DATE: MAY 24, 2021

INFORMANT: JESSICA RYEN
RELATIONSHIP: DAUGHTER
ADDRESS: 417 N. FAYETTE STREET, ALEXANDRIA, VIRGINIA 22314

FUNERAL FACILITY: VASSAR-RAWLS FUNERAL HOME

ADDRESS: 920 21ST AVENUE
CITY, STATE, ZIP: LEWISTON, IDAHO 83501
FUNERAL DIRECTOR: DENNIS W. HASTINGS

CAUSE OF DEATH:
A: METASTATIC SQUAMOUS CELL CARCINOMA LEFT BREAST
INTERVAL: 2.5 YEARS

B: INTERVAL:
C: INTERVAL:
D: INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

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

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

CERTIFIER NAME: ELIZABETH N. BLACK, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 1271 HIGHLAND AVE STE B
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403
DATE SIGNED: MAY 20, 2021

LOCATION OF INJURY:
CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

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

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: MAURINE L. NICHOLSON
DATE RECEIVED: MAY 20, 2021

54252



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

Required

Record Type: Birth Death Marriage Dissolution (Divorce)

1. Name on Record: First Middle Last 2. Date of Event: MM/DD/YYYY 3. Place of Event: (City or County)

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/Maiden First Middle Last/Maiden

6. Name of Person Requesting Correction: Relationship to Self Guardian Informant Hospital
Person on Record: Parent(s) Funeral Director 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:

The record now shows:	The true fact is:
8.	9.
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: 16b. Signature of 2nd parent (if required):

Printed name: Date: Printed name: Date:

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

Driver's license, Social Security card or hospital decorative birth certificate cannot be used as proof

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-551)

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

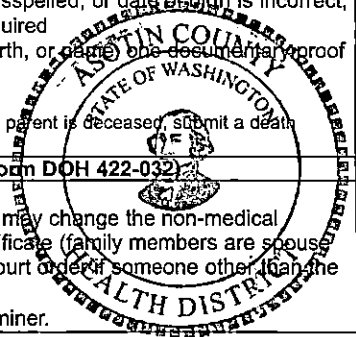
*To change any part of the name of a child using this form, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate with request.

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



Bob Lutz
Bob Lutz, M.D., MPH
Health Officer

MAY 24 2021



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



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