



REAL ESTATE EXCISE TAX AFFIDAVIT
CHAPTER 82.45 RCW - CHAPTER 458-61A WAC

This form is your receipt when stamped by cashier.

PLEASE TYPE OR PRINT

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, 2, and 3 containing seller and buyer information, mailing addresses, and property tax correspondence details.

Section 4: Street address of property: 1231 15th Street, Clarkston, WA. Includes location details and a note about parcel segregation.

Section 5: Select Land Use Code(s): 11 Household, single family units. Includes a question about property tax exemption.

Section 6: Questions regarding property classification (forest land, current use, historical property).

(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...

This land does not qualify for continuance.

(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY) NEW OWNER(S): To continue special valuation as historic property, sign (3) below...

(3) OWNER(S) SIGNATURE PRINT NAME

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

Section 7 continued: If claiming an exemption, list WAC number and reason for exemption.

Table with financial details: Type of Document (Personal Representative's Deed), Date of Document (11/04/21), Gross Selling Price (\$420,000.00), Taxable Selling Price (\$420,000.00), Excise Tax (\$4,620.00), Total Due (\$5,675.00).

Section 8: CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. Includes signatures and dates for Grantor and Grantee's Agent.

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)...

REV 84 0001a (6/26/14) THIS SPACE - TREASURER'S USE ONLY COUNTY TREASURER

DATE 11/10/2021 - RECEIPT No. 54727 - Alliance Title - Clarkston

EFT

FILED

2020 OCT -5 PM 3:18

MCKENZIE A. CAMPBELL
COUNTY CLERK
ASOTIN COUNTY, WA

SUPERIOR COURT OF WASHINGTON
FOR ASOTIN COUNTY

Estate of

ILENE BRIDGES,

Deceased.

NO. 20-4-00078-02

LETTERS TESTAMENTARY
(RCW 11.28.090)

cf
AKA

On October 5, 2020, the last *Will* of the above-named Decedent was duly exhibited, proven, and filed in the foregoing Superior Court.

In the *Will*, Decedent named Christie Bridges to act as its Personal Representative, who, by Order of this Court, is authorized to execute the *Will* according to law.

Witness my hand and the seal of this Court on October 5th 2020.

Clerk of the Superior Court

By: Nicole Anderson
Deputy Clerk



Jennifer B. Douglass, WSB # 52978
Attorney for Petitioner
P.O. Box 321
Lewiston, Idaho 83501
(208) 746-0344

54727

STATE OF WASHINGTON)

County of Asotin) : ss.

I, McKenzie A. 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 this Superior Court this ____ day of _____, 20__.

County Clerk & Ex-officio
Clerk of the Superior Court

By _____
Deputy

54727

Agreement as to Status of Community Property

After Death of One of the Spouses

Know All Men by These Presents:

That this agreement, made and entered into this 4th day of FEBRUARY, 1974

by and between Eugene G. Bridges

and Elene B. Bridges, husband and wife,

of Clarkston Asotin County, State of Washington, WITNESSETH:

That, in consideration of the love and affection that each of said parties has for the other, and in consideration of the mutual benefits to be derived by the parties hereto, it is hereby agreed, covenanted, and promised:

I.

That all property of whatsoever nature or description whether real, personal, or mixed and where-soever situated now owned or hereafter acquired by them or either of them shall be considered and is hereby declared to be community property.

II.

That upon the death of either of the aforementioned parties title to all community property as herein defined shall immediately vest in fee simple in the survivor of them.

IN WITNESS WHEREOF, the said Eugene G. Bridges

and Elene B. Bridges have hereunto set their hands

and seals this 4th day of February, 1974.

Feb 4 1974 Eugene G. Bridges (SEAL) Elene B. Bridges (SEAL)

STATE OF WASHINGTON, County of Asotin SS.

This is to certify that on this 4th day of February, 1974, before me Eugene G. Davis, a Notary Public in and for the State of Washington

duly commissioned and sworn, personally came Eugene G. Bridges

and Elene B. Bridges, husband and wife, to me known to be the individuals described in and who executed the within instrument, and acknowledged to me that they signed and sealed the same as their free and voluntary act and deed for the uses and purposes therein mentioned.

WITNESS my hand and official seal the day and year in this certificate first above written.

Notary Public in and for the State of Washington residing at Clarkston

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STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

CERTIFICATE OF DEATH

Date Filed **JULY 05, 2001**

State File No. **2001-04770**

DECEDENT - NAME EUGENE GEORGE BRIDGES		AGE 77 YEARS	
DATE OF DEATH JUNE 23, 2001	SEX MALE	SOCIAL SECURITY NUMBER [REDACTED]	BIRTH PLACE MINNESOTA
HAS DECEDENT BEEN IN U.S. ARMED FORCES? YES	MARITAL STATUS MARRIED	DECEASING SPOUSE (if wife, include name) ILENE B. BRIERE	CITY, TOWN OR LOCATION OF DEATH LEWISTON, IDAHO
RESIDENCE STATE WASHINGTON	CITY, TOWN OR LOCATION CLARKSTON		
FATHER - NAME MILLS LEROY BRIDGES	BIRTH PLACE MINNESOTA		BIRTH PLACE FRANCE
MOTHER - FULL MAIDEN NAME AUGUSTINE MARIE LEHOING			BIRTH PLACE FRANCE
NAME AND ADDRESS OF MORTUARY MALCOM'S BROWER WANN MEMORIAL CHAPEL, LEWISTON, IDAHO			
FUNERAL SERVICE LICENSE THOMAS J. HOWELL			
METHOD OF DISPOSITION CREMATION	TIME OF DEATH 6:00 P.M.	MANNER OF DEATH NATURAL	
CAUSE OF DEATH (underlying cause last) PULMONARY INFECTION			Approximate Interval Between Onset and Death 25-38 HRS
DUE TO (or as a consequence of): RENAL CELL CARCINOMA			4 MONTHS
DUE TO (or as a consequence of):			
DUE TO (or as a consequence of):			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH (do not refer to the underlying cause given above) NONE LISTED			Autopsy Performed? NO
NAME OF CERTIFIER AGITH KUMAR, M.D.		TITLE OF CERTIFIER PHYSICIAN	
ACTION		NAME	
DATE OF INJURY	HOUR OF INJURY	INJURY AT WORK	
DESCRIPTION OF HOW INJURY OCCURRED			
PLACE OF INJURY	LOCATION OF INJURY		



This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

DATE ISSUED: **OCTOBER 14, 2021**

This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR



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