



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 and 2: Seller/Grantor (Hazel L. Christiansen, surviving trustee) and Buyer/Grantee (Daniel Burch and Maragert Anne Beyerlin) with mailing addresses and phone numbers.

Form section 3: Correspondence information for Daniel Burch and Maragert Beyerlin, and property details for 532 9th Street, Clarkston, WA 99403.

Form section 5: Land Use Code(s) 11 Household, single family units. Includes checkboxes for property tax exemptions.

Form section 6: Forest land or current use designations. Includes checkboxes for forest land, current use, and special valuation.

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

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

Form section 7: Personal property included in selling price. Includes a table of costs: Gross Selling Price \$135,000.00, Taxable Selling Price \$135,000.00, Excise Tax \$1,485.00, Total Due \$1,827.50.

Form section 8: I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. Includes signatures and dates for both parties.

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)).

MICROFILM NO.

648939

INDEXED
FILMED
DELIVERED
MAILED

INSI. NO. 111
FILM FOR RECORD

Loren J Eddy

* LOREN J. EDDY, ESQ.
524 Bryden Avenue
P.O. Box 238
Lewiston, Idaho 83501
(208) 746-6051

REG. BY *See Left* FILED

1999 OCT 20 P 4:30

99 OCT 19 AM 9 23

PATTY O. WEEKS
RECORDER, NEZ PERCE CO ID

PATTY O. WEEKS
CLERK OF DIST. COURT

BY *[Signature]* DEPUTY **TERESA HILDRETH**

TIME 3:00 PM
REQUEST OF *[Signature]*
ELAINE JOHNSTON, ASSISTANT CLERK

OCT 27 1999

RECORDED

244320

IN THE DISTRICT COURT OF THE SECOND JUDICIAL DISTRICT
THE STATE OF IDAHO, IN AND FOR THE COUNTY OF NEZ PERCE

IN THE MATTER OF THE
CHRISTIANSEN 1999 REVOCABLE
LIVING TRUST,

Case No. **SP99-007**

G. V. "DON" CHRISTIANSEN)
and)
HAZEL L. CHRISTIANSEN,)
Grantors.)

REGISTRATION OF TRUST

FEE CATEGORY Q.1.
(No Fee Imposed)

Grantors G. V. "DON" CHRISTIANSEN and HAZEL L. CHRISTIANSEN have transferred, conveyed and assigned to G. V. "DON" CHRISTIANSEN and HAZEL L. CHRISTIANSEN, as Trustees of The CHRISTIANSEN 1999 REVOCABLE LIVING TRUST, under a trust agreement dated October 15, 1999, certain property, which, together with any other property that may later become subject to the trust, constitutes the trust estate. Such property is to be held and distributed by Trustees as provided in the trust instrument.

The undersigned, as Trustees of the said trust, state and represent as follows:

The following provisions are found in that certain trust instrument named and described above, by and between the above-designated Grantors and Trustee, and may be relied upon as a full statement of the matters covered by such provisions by anyone dealing with the Trustee or any successor Trustee. However, in the unlikely event there is a clerical error causing a discrepancy between the original trust instrument and this Registration of Trust, the original trust instrument will control the interpretation and administration of the trust.

1. Information required by I.C. §15-7-101 et seq.

The principal place of administration of the trust and the place at which the records of the trust are kept is the Trustee's residence, 3805 11th Street, Lewiston, Idaho 83501.

I, Patty O. Weeks, Clerk of the above entitled Court do hereby certify the foregoing information is a true and correct copy of the original instrument and that the same has not been registered elsewhere.

5507

In the above entitled case of the same now appears on file and of record in my office.
WITNESS my hand and official seal this 10/20/99

REGISTRATION OF TRUST - 1 -

c. The trust is an intervivos trust established by G. V. "DON" CHRISTIANSEN and HAZEL L. CHRISTIANSEN as Grantors, with G. V. "DON" CHRISTIANSEN and HAZEL L. CHRISTIANSEN acting jointly or separately, as initial trustee under a written trust instrument dated October 15, 1999.

d. The undersigned acknowledge the existence of the trust and submit to the jurisdiction of the Court in any proceeding relating to the trust that may be instituted by any interested person.

2. Trustee. References in the trust instrument, and in this Registration of Trust, to "Trustee" shall be deemed to include not only the original Trustee but also any additional or successor Trustee or Co-Trustees, and all the powers and discretion vested in Trustee shall be exercisable by any such additional or successor Trustee or Co-Trustees.

Upon the death, incapacity or resignation of either G. V. "DON" CHRISTIANSEN or HAZEL L. CHRISTIANSEN as the initial Trustees, then the other is appointed as Sole Trustee. Upon the death, incapacity or resignation of both G. V. "DON" CHRISTIANSEN and HAZEL L. CHRISTIANSEN as Trustee, then MARCI LEE MORAVEC is appointed to serve as successor trustee. Upon the death, incapacity or resignation of MARCI LEE MORAVEC as successor trustee, then STEVEN PAUL CHRISTIANSEN is appointed to serve as successor trustee.

3. Trustee's Powers. The Trustee has all of those powers set forth in the Uniform Trustees' Powers Act (Chapter 1 of Title 68 of the Idaho Code), including the power and authority to sell, lease, pledge, mortgage, transfer, exchange, convert or otherwise dispose of, or grant options with respect to, any and all property which forms a part of the trust estate, regardless of whether such property is real or personal property.

4. Names of Beneficiaries. G. V. "DON" CHRISTIANSEN and HAZEL L. CHRISTIANSEN are each lifetime beneficiaries of the trust, under the terms and provisions of the trust instrument. STEVEN PAUL CHRISTIANSEN, and MARCI LEE MORAVEC, have remainder interests in the trust, under the terms and provisions and in the amounts set forth in the trust instrument.

5. Power to Amend and Revoke. Grantors have reserved the power to amend or revoke the trust at any time or times, in whole or in part, by an instrument or instruments signed by Grantors and delivered during Grantors' lifetime. The trust agreement becomes partially irrevocable at the death of either Grantor, and fully irrevocable at the death of both Grantors.

In the event of revocation of the trust instrument, either partially or in its entirety, Trustee shall deliver the trust property to Grantors, or as Grantors may otherwise direct in such instrument of revocation.

6. Place of Constructive Notice of Trust Revocation, Amendment or Trustee Succession. All notices required to be sent to Trustee must be delivered to the principal place of administration of this trust, as set forth in sub-paragraph 1.a. above. The County Recorder of Nez Perce County, Idaho, is hereby designated as the location where title companies and others may check to ascertain if this trust has been revoked or amended in any material respect. This Registration of Trust shall be recorded in the Nez Perce County Recorder's office as notice of the existence of this trust and its Grantors, its Trustee, its beneficiaries, the powers of the Trustee, and other relevant terms. All parties dealing with this trust may rely on this Registration of Trust and other documents recorded with that public office in ascertaining the status of this trust, and may further assume, if there are no official filings or recordings to the contrary, that no material changes have been made to the trust since the last filing or recording.

IN WITNESS WHEREOF, the Trustees have duly executed this Registration of Trust this 15 day of October, 1999.

G. V. "DON" CHRISTIANSEN
Trustee

Hazel L. Christiansen
HAZEL L. CHRISTIANSEN, Trustee

STATE OF IDAHO)
COUNTY OF NEZ PERCE) ss.

On this 15th day of October, 1999, before me, the undersigned, a Notary Public in and for the said state, personally appeared G. V. "DON" CHRISTIANSEN and HAZEL L. CHRISTIANSEN, husband and wife, known or identified to me to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same as Trustees of The CHRISTIANSEN 1999 REVOCABLE LIVING TRUST.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

[Signature]
Notary Public in and for said State,
residing at Lewiston therein.
My Commission Expires: 10/08/2003
(SEAL)

55017

Asotin County, WA
Daria McKay Auditor

362229

06/27/2019 03:00 PM

WHEN RECORDED RETURN TO:
Land Title of Nez Perce County, Inc.
1230 Idaho Street
Attn: Lori E. Stone
Lewiston Idaho 83501



I-131 DC
Pgs=3 Fee:\$39.00
ALLIANCE TITLE & ESCROW

<p>DOCUMENT TITLE(S) Death Certificate</p> <p>REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:</p> <p>GRANTOR(S): Garland Vance "Don" Christiansen</p> <p>GRANTEE(S): Garland Vance "Don" Christiansen</p> <p>ABBREVIATED LEGAL DESCRIPTION:</p> <p>TAX PARCEL NUMBER(S):</p>

LPB 01-05

155017

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

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

DATE FILED BY STATE REGISTRAR:

State of Idaho

STATE FILE NO. 453

CERTIFICATE OF DEATH

1. DECEASED'S LEGAL NAME (Include AKA's if any) (Print, Middle, Last, Suffix) Garland Vance "Don" Christiansen		2. SEX Male	
3. AKA'S (Include AKA's if any) (Print, Middle, Last, Suffix) None		4. SOCIAL SECURITY NUMBER [Redacted]	
5. AGE AND BIRTH INFORMATION 6. BIRTH DATE (MM/DD/YYYY) 71 (Years) October 16, 1937	7. BIRTH PLACE (City and State, Territory, or Foreign Country) Craigmont, Idaho		8. COUNTY OF BIRTH Nez Percé
9. MARRIAGE STATUS (Indicate whether in Full, Partial, or No Marriage) Idaho	10. COUNTY OF MARRIAGE Nez Percé	11. CITY OR TOWN OF MARRIAGE Lewiston	12. ZIP CODE 83501
13. MARITAL ADDRESS AT TIME OF DEATH 3805 - 11th ST.		14. MARITAL ADDRESS AT TIME OF DEATH (If different from 13) None	
15. DECEASED'S MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accidental <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Unknown <input type="checkbox"/> Never married <input type="checkbox"/> Unknown			
16. DECEASED'S OCCUPATION (Print, Middle, Last, Suffix) None			
17. DECEASED'S EDUCATION (Print, Middle, Last, Suffix) None			
18. DECEASED'S MARRIAGE HISTORY (Print, Middle, Last, Suffix) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
19. DECEASED'S MARRIAGE HISTORY (Print, Middle, Last, Suffix) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		20. DECEASED'S MARRIAGE HISTORY (Print, Middle, Last, Suffix) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
21. DECEASED'S MARRIAGE HISTORY (Print, Middle, Last, Suffix) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
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49. DECEASED'S MARRIAGE HISTORY (Print, Middle, Last, Suffix) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
50. DECEASED'S MARRIAGE HISTORY (Print, Middle, Last, Suffix) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

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: Nov. 24, 2008
This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

Jane S. Smith
JANE S. SMITH
STATE REGISTRAR

55017



0 0 0 0 5 7 0 2 4

STATE OF IDAHO County of Nez Perce

This copy of a death certificate was issued by the District Health Department prior to filing with the Bureau of Health Policy and Vital Statistics.

Karen L. Rugg

Local Vital Statistics Registration Official

55017