

# 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 and accurately completed.  
This form is your receipt when stamped by cashier. *Please type or print.*

Check box if partial sale, indicate % \_\_\_\_\_ sold.

List percentage of ownership acquired next to each name.

**1 Seller/Grantor**

Name Nancy Sangster, as successor in interest to Tom G. Sangster

Mailing address P. O. Box 30  
City/state/zip Anatone, WA 99401  
Phone (including area code) \_\_\_\_\_

**2 Buyer/Grantee**

Name Nancy Sangster, an unmarried person

Mailing address P. O. Box 30  
City/state/zip Anatone, WA 99401  
Phone (including area code) \_\_\_\_\_

**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>2-008-45-028-3700-0000</u>	<input type="checkbox"/>	<u>\$ 2,275.00</u>
_____	<input type="checkbox"/>	<u>\$ 0.00</u>
_____	<input type="checkbox"/>	<u>\$ 0.00</u>

**4** Street address of property LAND ONLY  
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).

The South Half of the Southwest Quarter (S $\frac{1}{2}$ SW $\frac{1}{4}$ ) of Section Twenty-eight (28), Township Eight (8) North, Range Forty-five (45) East of the Willamette Meridian, Asotin County, Washington

**5** Select land use code(s) \_\_\_\_\_

Enter any additional codes 83  
(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 (nonprofit 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 it's 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.  
**(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.  
Nail Walsh 4-4-22  
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**  
Nancy Sangster \_\_\_\_\_  
Signature Signature  
Nancy Sangster \_\_\_\_\_  
Print name Print name

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

None  
If claiming an exemption, list WAC number and reason for exemption.  
WAC number (section/subsection) 458-61A-202(5)(b)(6)(7)  
Reason for exemption

Inheritance

Type of document Lack of Probate Affidavit and Deed  
Date of document 3/4/22

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
0.0025 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

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 Nancy Sangster Signature of grantee or agent Nancy Sangster  
Name (print) Nancy Sangster Name (print) Nancy Sangster  
Date & city of signing Lewiston, ID March 4, 2022 Date & city of signing Lewiston, ID March 4, 2022

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.

CREASON, MOORE,  
DOVREN + GENDL  
CA# 141514

**AFTER RECORDING, RETURN TO:**

Paul B. Burris  
Creason, Moore, Dokken & Geidl, PLLC  
P. O. Drawer 835  
Lewiston ID 83501

**AFFIDAVIT OF NANCY SANGSTER  
LACK OF PROBATE – REAL PROPERTY**

*Reference Numbers of Related Documents:* N/A

*Grantor:* Sangster, Tom G.

*Grantee:* Sangster, Nancy

***Legal Description:***

Real property located in Asotin County, Washington, described as follows:  
The South Half of the Southwest Quarter (S½SW¼) of Section Twenty-eight (28), Township Eight (8) North, Range Forty-five (45) East of the Willamette Meridian, Asotin County, Washington.

2. Additional legal description is included on page 3 in the Affidavit.
3. Assessor's Parcel No. 2-008-45-028-3700-0000

**AFFIDAVIT OF NANCY SANGSTER  
LACK OF PROBATE – REAL PROPERTY - 1**

Creason, Moore, Dokken & Geidl, PLLC  
P.O. Drawer 835, Lewiston ID 83501  
(208)743-1516; Fax(208)746-2231

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**AFTER RECORDING MAIL TO:**

Paul B. Burris  
P. O. Drawer 835  
Lewiston, ID 83501

**AFFIDAVIT OF NANCY SANGSTER  
LACK OF PROBATE - REAL PROPERTY**

STATE OF IDAHO                    )  
  : ss.  
County of Nez Perce                )

Nancy Sangster, being first duly sworn, deposes and says:

Affiant is the lawful surviving spouse of Tom G. Sangster, who died on April 14, 2021, at Anatone, Asotin County, Washington, then being a resident of Anatone, Asotin County, Washington. A copy of the Certificate of Death is attached hereto.

Affiant has hereinbelow identified each and all of the heirs at law of decedent, including but not limited to his children, adopted children and the issue of any predeceased child or adopted child.

**AFFIDAVIT OF NANCY SANGSTER  
LACK OF PROBATE – REAL PROPERTY - 2**

**Creason, Moore, Dokken & Geidl, PLLC  
P.O. Drawer 835, Lewiston ID 83501  
(208)743-1516; Fax(208)746-2231**

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That the heirs of law of decedent are:

NAME AND ADDRESS	RELATIONSHIP
Nancy Sangster P. O. Box 30 Anatone, WA 99402	Spouse
Twain J. Sangster 3652 Mill Road Anatone, WA 99401	Son
Barry J. Sangster 223 1 <sup>st</sup> Street Richland, WA 97870	Son

That affiant knows of her own knowledge, and so states, that each and all of the obligations against the marital community and against the estate of the 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, state and federal succession taxes upon decedent's estate, if applicable) have been paid in full.

The decedent died intestate. Affiant is the sole distributee of decedent's estate.

This affidavit is made solely to transfer the Estate's interest in the following real property located in the County of Asotin, State of Nez Perce, to-wit:

The South Half of the Southwest Quarter (S $\frac{1}{2}$ SW $\frac{1}{4}$ ) of Section Twenty-eight (28), Township Eight (8) North, Range Forty-five (45) East of the Willamette Meridian, Asotin County, Washington.

Tax Parcel No. 2-008-45-028-3700-0000.

Affiant hereby agrees to indemnify and hold harmless any person or entity who is damaged economically as the result of transferring or accepting title in reliance upon the representations in this document.

**AFFIDAVIT OF NANCY SANGSTER  
LACK OF PROBATE - REAL PROPERTY - 3**

Creason, Moore, Dokken & Geidl, PLLC  
P.O. Drawer 835, Lewiston ID 83501  
(208)743-1516; Fax(208)746-2231

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STATE OF WASHINGTON  
DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2021-018226

DATE ISSUED: 04/19/2021  
FEE NUMBER:

FIRST AND MIDDLE NAME(S): TOM G.  
LAST NAME(S): SANGSTER

COUNTY OF DEATH: ASOTIN  
DATE OF DEATH: APRIL 14, 2021  
HOUR OF DEATH: 10:20 AM  
SEX: MALE AGE: 74 YEARS  
SOCIAL SECURITY NUMBER: [REDACTED]

PLACE OF DEATH: HOME  
FACILITY OR ADDRESS: 1677 MEYERS RIDGE ROAD  
CITY, STATE, ZIP: ANATONE, WASHINGTON 99401

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

RESIDENCE STREET: 1677 MEYERS RIDGE ROAD  
CITY, STATE, ZIP: ANATONE, WA 99401  
INSIDE CITY LIMITS: NO COUNTY: ASOTIN  
TRIBAL RESERVATION: NOT APPLICABLE  
LENGTH OF TIME AT RESIDENCE: 51 YEARS

BIRTH DATE: FEBRUARY 17, 1947  
BIRTHPLACE: CLARKSTON, WA

FATHER: JAMES SANGSTER  
MOTHER: GWENDOLYN CHRISMAN

MARITAL STATUS: MARRIED  
SURVIVING SPOUSE: NANCY MALLORY

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

OCCUPATION: FARMING/RANCHING  
INDUSTRY: AGRICULTURE  
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED  
US ARMED FORCES: YES

CITY, STATE: LEWISTON, IDAHO  
DISPOSITION DATE: APRIL 19, 2021

INFORMANT: NANCY SANGSTER  
RELATIONSHIP: SPOUSE  
ADDRESS: 1677 MEYERS RIDGE ROAD, ANATONE, WASHINGTON 99401

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

CAUSE OF DEATH:  
A: ACUTE RESPIRATORY FAILURE  
INTERVAL: HOURS  
B: CHRONIC HYPOXEMIC RESPIRATORY FAILURE  
INTERVAL: MONTHS  
C:  
INTERVAL:  
D:  
INTERVAL:

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

OTHER CONDITIONS CONTRIBUTING TO DEATH:

CERTIFIER NAME: LISA WEBBER  
TITLE: CORONER/ME  
CERTIFIER ADDRESS: PO BOX 220  
CITY, STATE, ZIP: ASOTIN, WASHINGTON 99402  
DATE SIGNED: APRIL 14, 2021

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

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

LOCATION OF INJURY:

CITY, STATE, ZIP:  
COUNTY:

LOCAL DEPUTY REGISTRAR: MAURINE L. NICHOLSON  
DATE RECEIVED: APRIL 17, 2021

DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

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# 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

<b>Required</b>	Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> 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) First Middle Last/Maiden	
	5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution) First Middle Last/Maiden	
6. Name of Person Requesting Correction: Relationship to Person on Record: <input type="checkbox"/> Self <input type="checkbox"/> Parent(s) <input type="checkbox"/> Guardian <input type="checkbox"/> Funeral Director <input type="checkbox"/> Informant <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:

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 forgoing is true and correct

16a. Signature:	16b. Signature of 2 <sup>nd</sup> parent (if required):
Printed name:	Printed name:
Date:	Date:

### INSTRUCTIONS - go to [www.doh.wa.gov](http://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.

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



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

# CERTIFIED

APR 19 2021

*[Signature]*

Dr. Larry Jecha  
Health District Officer  
Garfield County Health District

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