

## MOBILE HOME REAL ESTATE EXCISE TAX AFFIDAVIT

Submit to County Treasurer of the county in which property is located.

Chapter 82.45 RCW Chapter 458-61A WAC This form is your receipt when stamped by cashier.

Used for sales on or after Jan. 1, 2020

FC	R USE WHEN TRANSFERR	ING TITLE TO	O MOBILE HOMI	ONLY						
	INCOMPLETE AFFIDAVITS WILL NOT BE ACCEPTED				_					
	Name					Name				
	Estate of Robert W. Rosenberg				면수	Horizons Holdings LLC				
	Jeanne Marie Rosenberg, PR  Street 2316 4th Avenue City State Zip code Clarkston WA 99403				NEW REGISTERED OWNER (Buyer)					
	=   Duest				Si Si	Street	. 01- 0000		1	
	2 316 4th Avenue  City State Zip code Clarkston WA 99403					<u>513 Bryden .</u> City	Ave, Ste C328	ate	Zip code	
	City Clarkston		WA	99403		Lewiston _			83501	
	Phone number (509) 552-1835					Phone number (208) 553-6665				
	Name				_	Name				
					ER	Mary Sue Benton				
		<u></u>			N					
	0.19				_		Title & Escrow			
	NO CATION OF THE PROPERTY OF T	Spext	<b>Æ</b> 1		EGAL	☐ Street				
	City	opc x1	State	Zip code	EG	735 5th Street State		Zip code		
	Clarkston		WA	99403	] i	Clarkston	<u></u>	<u>/A</u>	99403	
	PERSONAL PROPERTY	500500	2040000044		RE	AL PROPERTY	- 6265000010000	0000		
	PERSONAL PROPERTY PARCEL or ACCOUNT N	(0. <u>5265000</u>	<u> </u>			RCEL or ACCOUR ST ASSESSED VA	NT NO. 6265000010000	0000		
Γ	LIST ASSESSED VALUE		<del></del>			<del></del>	1	R	EVENUE TAX	
	MAKE	YEAR		MODEL		SIZE	SERIAL NO. or I.D.	+	CODE NO.	
}	MEDFORD	1994	14X66	<u> </u>		14X66		+		
}								<del> </del>		
Asotin QQ ZD	Delinquent Interest:         State         \$ 0.00           0.0025         Local         \$ 0.00           Delinquent Penalty         \$ 0.00           Subtotal         \$ 244.35           State Technology Fee         \$ 5.00           Affidavit Processing Fee         \$ 0.00           Total Due         \$ 249.35           If exemption claimed, WAC number & title:					AFFIDAVIT  I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.  Signature of Seller/Agent Parame Marie Rosenberg, P.R.  Date and Place of Signing: 129 22 Claudity  Signature of Buyer/Agent  Name (print) Scott Rains, Sole Member  Date & Place of Signing: 128 22 Claudity WA				
7	WAC No. (Sec/Sub)  WAC Title  A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX.  TREASURER'S CERTIFICATE  I hereby certify that property taxes due ASOTU  County on the mobile home described hereon have been paid to and including the year 2022				If, in selling (or otherwise transferring ownership of) a mobile home which possesses a tax lien, the seller does not inform the buyer (new owner) of such a lien, the seller is guilty of deliberate deception as it applies to Fraud and/or Theft as defined in Title 9 and 9A RCW (RCW 9.45.06) RCM 9A.56.010 (4d), and RCW 9A.56.020).  JAN - 9 2023					
	Date County Treasurer or Daputy				ASOTIN COUNTY TREASURER					

THIS SPACE - TREASURER'S USE ONLY

REV 84 0003e (12/13/19) COUNTY TREASURER

#95774



REV 84 0002ca (3/25/21)

## REAL ESTATE EXCISE TAX SUPPLEMENTAL STATEMENT

(WAC 458-61A-304)

This form must be submitted with the Real Estate Excise Tax Affidavit (FORM REV 84 0001A for deeded transfers and Form REV 84 0001B for controlling interest transfers) for claims of tax exemption as provided below. Completion of this form is required for the types of real property transfers listed in numbers 1-3 below. Only the first page of this form needs original signatures.

AUDIT: Information you provide on this form is subject to audit by the Department of Revenue. In the event of an audit, it is the taxpayers' responsibility to provide documentation to support the selling price or any exemption claimed. This documentation must be maintained for a minimum of four years from date of sale. (RCW 82.45.100) Failure to provide supporting documentation when requested may result in the assessment of tax, penalties, and interest. Any filing that is determined to be fraudulent will carry a 50% evasion penalty in addition to any other accrued penalties or interest when the tax is assessed.

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)(e)).

	continement and fine (RCW 9A.72.030 at	nd RCW 9A.20.021	(1)(6)).						
	The persons signing below do hereby dec	lare under pënalty o	of perjury that the following is true (check	k appropriate statement):					
1.	<b>☑ DATE OF SALE</b> : (WAC 458-61A-30	16(2))							
	I, (print name) Kelsey Gingerich		certify that the Bill of Sale						
	(type of instrument), dated 07/29/2022	, was d	elivered to me in escrow by Estate of Ro	bert W. Rosenberg					
	(seller's name). NOTE: Agent named here it is not more than 90 days beyond the date	e must sign below at	nd indicate name of firm. The payment of	the tax is considered current if					
	instrument								
	Reasons beld in escrow Waiting for Lieu	holder to release	3 additional titles to escrow following	payoff					
,	Kelsey (Sunger	)X	Alliance T	Name					
•	Signature Signature	- • •	Firm	Name					
2.	GIFTS: (WAC 458-61A-201) The gift of value exchanged or paid for equity plus the Both Grantor (seller) and Grantee (buyer)	ne amount of debt ed must sign below.	quals the taxable amount. One of the boxe	s not a gift and is taxable. The es below must be checked.					
	Grantor (seller) gifts equity valued at \$ _ NOTE: Examples of different transfer	to ;	grantee (buyer).	correctly completing					
	this form and paying your tax.	types are provided	on the back. This is to assist you with	torrecity completing					
	"Consideration" means money or anyth contracted to be paid or delivered, includi amount of any lien, mortgage, contract in remaining unpaid on the property at the tiby the buyer at the time of transfer.	ing performance of s debtedness, or other	services, in return for the transfer of real pencumbrance, given to secure the purcha	property. The term includes the ase price, or any part thereof, or					
	A. Gifts with consideration								
	1. Grantor (seller) has m	ade and will continu	te to make all payments after this transfer d from the grantee (buyer) \$	r on the total debt of					
	ه (include in this figure	the value of any iter	ms received in exchange for property). A	ny consideration received by					
	grantor is taxable.								
	is liable and pay grant	2. Grantee (buyer) will make payments on % of total debt of \$ for which grantor (seller) is liable and pay grantor (seller) \$ (include in this figure the value of any items received in							
	exchange for property  B. Gifts without consideration	property). Any consideration received by grantor is taxable.							
	1. There is no debt on the	e property; Grantor	(seller) has not received any consideration	n towards equity.					
	No tax is due.	1 1 20 20	the second of the second on the	total daht of C					
	2. Grantor (seller) has m	age and will continu	ue to make 100% of the payments on the wards equity. No tax is due.	total debt of \$					
	3. Grantce (buver) has m	ade and will contin	ue to make 100% of the payments on tota	al debt of \$					
	4. Grantor (seller) and gr debt before and after t No tax is due.								
	Has there been or will there be a refinanc taxable). If grantor (seller) was on title as The undersigned acknowledge this tran record-keeping requirements and evas	co-signor only, ple nsaction may be su	ase see WAC $458-61\Lambda-215$ for exemption	n requirements.					
	Grantor's Signature	Date	Grantee's Signature	Date					
	Grantor's Name (print)		Grantee's Name (print)	<del></del>					
			<del>-</del> -						
3.	☐ IRS "TAX DEFERRED" EXCHA	NGE (WAC 458-61	A-213)						
	I. (print name)	, certify	that I am acting as an Exchange Facilita	tor in transferring real property					
I, (print name), certify that I am acting as an Exchange Facilitator in transferring real print pursuant to IRC Section 1031, and in accordance with WAC 458-61A-213. NOTE: Ex									
	Facilitator must sign below.								
	Exchange Facilitator's Signature	Date	Exchange Facilitator's Name (print)						
	5								
	To ask about the availability of this publication in a Service by calling 711.	n alternate format for the	e visually impaired, please call 360-705-6705. Telet	type (1114) users may use the WA Relay					

55 774

DEPARTMENT OF REVENUE

1	WASHINGTON STATE DEPARTMENT OF
Co_	LICENSING

## Affidavit of Loss/Release of Interest

When completed, mail or take this to any vehicle licensing office. If mailing, you must have your signature notarized.

License plate/Re	gistration number	Vehicle Identification Number CAFLP17A15675WF	(VIN) or Vessel Hull Identification Number (HIN)			
Model year 1994	Make FLEET	Model	Body style			
Affidavit of loss-Signature must be notarized or certified						
Check all that apply I do not have the following:  ☑ Title ☐ Registration ☐ Tab ☐ Decal ☐ Plates ☐ Metal tag						
Destroye	It is not in my possession because it was:  ☐ Destroyed ☐ Illegible ☑ Lost ☐ Stolen ☐ Defaced and can no longer be used					
I declare under penalty of perjury under the law of Washington that the foregoing is true and correct. If signing for a business, I have full authority to do so. AMY ROSKELLEY						
	ZIONS FIRST NATI		TYPE or PRINT Name			
801-844-482			Position and company name, if signing for a business			
(Area code) Pho AMY,ROSKI	ne number Washingtor ELLEY@ZIONISBAN	driver license number ICORP.COM	(Area code) Phone number Washington driver license number			
	dvale, UT	·	Email  Date and place (city or county) signed			
X Our	city or county) signed	Deg	X Signature			
Signature	f interest-Signa	ture must be notarized	or certified			
What are you re	leasing (check all that app ng interest in the fo	oly) ollowing for the vehicle	or vessel described above.			
l □ Ownersh	ip 🔲 Gross wei	ght license 🔲 Perso	nalized plate ashington that the foregoing is true and correct.			
If signing fo	r a business, I have	e full authority to do so.				
TYPE or PRINT	Name		TYPE or PRINT Name			
Position and cor	mpany name, if signing fo	a business	Position and company name, if signing for a business			
(Area code) Pho	one number Washingto	driver license number	(Area code) Phone number Washington driver license number			
Email			Email			
Date and place (city or county) signed			Date and place (city or county) signed			
Signature Signature						
Notarization/Certification—You don't need your signature notarized if you sign in front of a WA vehicle licensing agent, who can certify your signature.						
State of						
(Seal or stamp)  NOTARY PUBLIC  Notary/Agent/Subagent signature  JESSICA ANN HOLGERSON						
		714531 My Commission Expires 10/05/2024	Notary printed or stamped name			
	Title	STATE OF UTAH	and Dealer or county/office number or notary expiration date			



## Affidavit of Loss/Release of Interest

When completed, mail or take this to any vehicle licensing office. If mailing, you must have your signature notarized.

License plate/Registration number Vehicle Identification Number CAFLP17A15675WF				(VIN) or Vessel Hull Identification Number (HIN)			
Model year 1994	Make FLEET		Model		Body style		
	- 0:		<del></del>				
	f loss-Signature	must be note	arized or ce	ertified			
I do not have	Check all that apply I do not have the following: ☐ Title ☐ Registration ☐ Tab ☐ Decal ☐ Plates ☐ Metal tag						
It is not in m	It is not in my possession because it was:  ☐ Destroyed ☐ Illegible ☐ Lost ☐ Stolen ☐ Defaced and can no longer be used						
I declare une	<del></del>	iry under the	law of Wa		oing is true and correct.		
ir signing for	a business, i nave	, tun aunioni	y 10 do 30.				
TYPE or PRINT	Name ,	-		TYPE or PRINT Name			
Position and con	pany name, if signing for	a business		Position and company name	, if signing for a business		
(Area code) Pho	ne number Washingtor	driver license nu	mber	(Area code) Phone number	Washington driver license number		
Email				Email	-		
Date and place (	city or county) signed			Date and place (city or county) signed			
Signature				Signature			
Pologeo	f interest-Signa	ture must he	notarized	or certified			
	easing (check all that app		HOLATIZEG	or certified			
I am releasii	ng interest in the fo ip     Gross wei	llowing for th	ne vehicle d Persor	or vessel described abo nalized plate	ove.		
	der penalty of perju a business, I have			shington that the foreg	oing is true and correct.		
AMY ROSKI	ELLEY						
TYPE or PRINT A.V.P. FOR 2	Name ZIONS FIRST NATI	ONAL BANK		TYPE or PRINT Name			
Position and con	npany name, if signing for	a business		Position and company name, if signing for a business			
	ne number Washingtor	driver license nu	•	(Area code) Phone number Washington driver license number			
Email 114	177 5-14	Lake Co	4.1.41.	Email			
Date and place (city or county) signed				Date and place (city or county) signed			
Signature Signature				Signature			
F							
Notarization/Certification—You don't need your signature notarized if you sign in front of a WA vehicle licensing agent, who can certify your signature.  State of (Fah							
	Signed or attested before me on 10/14/2022 by Amy Poskelley						
(Seal or stamp) NOTARY PUBLIC Name of person(s) signing this document				Erroent //			
JESSICA ANN HOLGERSON				Notary/Agent/Subagent signature			
My Commission Expires 10/05/2024			sion Expires	Vessica Ann Holgerson Notary printed or stamped name			
]			/2024 F UTAH	1	or stamped name		
Title				and Dealer or cour	nty/office number or notary expiration date		