Department of Revenue
Washington State
Form 84 0001a

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

Only for sales in a single location code on or after January 1, 2023.
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 Estate of James Alan Redenbaugh, deceased
Sarah Eilene Redenbaugh, PR
Mailing address 2780 Old 26th Street
City/state/zip Clarkston WA 99403
Phone (including area code) _____

2 Buyer/Grantee
Name John Wayne Kammers
Mailing address 1105 Marvin Ln
City/state/zip Clarkston, WA 99403
Phone (including area code) _____

3 Send all property tax correspondence to: ☒ Same as Buyer/Grantee
Name John Wayne Kammers
Mailing address _____
City/state/zip _____

List all real and personal property tax parcel account numbers	Personal property?	Assessed value(s)
10590000800000000	☐	110,100.00
	☐	
	☐	

4 Street address of property 1105 Marvin Lane, Clarkston, WA 99403
This property is located in Asotin Unincorp *(for unincorporated locations please select your county)* X
☐ 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 8 in Block One of Bellevue Addition according to the official plat thereof, filed in Book C of Plats at Page(s) 106, records of Asotin County,

5 Land use code 11 Household, single family units
Enter any additional codes _____
(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.

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 _____

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

If claiming an exemption, list WAC number and reason for exemption.
WAC number (section/subsection) _____
Reason for exemption

Type of document Personal Representative's Deed (PRD)
Date of document 11/03/23

Gross selling price	145,000.00
*Personal property (deduct)	0.00
Exemption claimed (deduct)	0.00
Taxable selling price	145,000.00
Excise tax: state	
Less than $525,000.01 at 1.1%	1,595.00
From $525,000.01 to $1,525,000 at 1.28%	0.00
From $1,525,000.01 to $3,025,000 at 2.75%	0.00
Above $3,025,000 at 3%	0.00
Agricultural and timberland at 1.28%	0.00
Total excise tax: state	1,595.00
Local	362.50
*Delinquent interest: state	0.00
Local	0.00
*Delinquent penalty	0.00
Subtotal	1,957.50
*State technology fee	5.00
Affidavit processing fee	0.00
Total due	1,962.50

6200

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 Sarah E. Redenbaugh, PR
Name (print) Estate of James Alan Redenbaugh, deceased
Date & city of signing 11/3/23 Clarkston, WA

Signature of grantee or agent
Name (print) John Wayne Kammers
Date & city of signing Clarkston, WA 11/6/23

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 the amount set by the court of not more than $10,000, or by both such confinement and fine (RCW 9A.20.021(1)(c)).

To ask about the availability of this publication in alternate formats for the visually impaired, please call 360-705-6705. Teletype

REV 84 0001a (09/08/22)

THIS SPACE TREASURER'S USE ONLY COUNTY TREASURER

DATE 11/06/2023 - RECEIPT No. 56448 - Alliance Title - Clarkston

Print on legal size paper
Page 1 of

FILED

2022 APR 27 PM 2:06

MCKENZIE A. CAMPBELL
COUNTY CLERK
ASOTIN COUNTY, WA

SUPERIOR COURT OF WASHINGTON
FOR THE COUNTY OF ASOTIN
IN PROBATE

IN THE MATTER OF THE ESTATE OF JAMES ALAN REDENBAUGH, Deceased.	Case No. 22-4-00043-02 **LETTERS TESTAMENTARY** (RCW 11.28.090)

WHEREAS, the Last Will of James Alan Redenbaugh was on April 27th 2022, duly exhibited, proven, and recorded in our Superior Court; and whereas, it appears in and by such Will that Sarah Eilene Redenbaugh is appointed personal representative thereon; and whereas, Sarah Eilene Redenbaugh has duly qualified,

NOW, THEREFORE, KNOW ALL MEN BY THESE PRESENTS, that we do hereby authorize Sarah Eilene Redenbaugh to execute such Will according to law, and without intervention of the Court except as provided by law.

WITNESS my hand and seal of this Court this 27th day of April, 2022.

SUPERIOR COURT CLERK

By S Burgess
Deputy

SEAL OF THE SUPERIOR COURT STATE OF WASHINGTON OF ASOTIN COUNTY

Paul B. Burris, WSBA# 46382
Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston, ID 83501
(208) 743-1516; Fax: (208) 746-2231

564448

STATE OF WASHINGTON)
: ss.
County of Asotin)

I, McKenzie A. Campbell, County Clerk of the County of Asotin, State of Washington, an 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 Court Superior Court this _____ day of _____, 2022.

County Clerk & Ex-officio
Clerk of the Superior Court

By_____

Paul B. Burris, WSBA# 46582
Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston, ID 83501
(208) 743-1516; Fax: (208) 746-2231.

56448

Asotin County, WA
Darla McKay Auditor

363454
10/09/2019 11:50 AM

I-15 CP
Pgs=5 Fee:$107.50
CREASON, MOORE, DOKKEN &

AFTER RECORDING, RETURN TO:

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

COMMUNITY PROPERTY AGREEMENT

Reference Numbers of Related Documents: N/A

Grantor: Redenbaugh, Virginia D.

Grantee: Redenbaugh, James Alan

Legal Description:

1. Real property located in Asotin County, Washington, described as follows:

   Lot 8 in Block One of Bellevue Addition

2. Additional legal description is included on page 2 of the Community Property Agreement.

3. Assessor's Parcel No. 1-059-00-008-0000-0000

56448

AFTER RECORDING, RETURN TO:

_____

_____

_____

COMMUNITY PROPERTY AGREEMENT

This agreement is made between James Alan Redenbaugh ("Husband") and Virginia D. Redenbaugh ("Wife"), husband and wife, who were married on January 22, 1966, in Elmira, Missouri, and who are currently domiciled within the State of Washington. In consideration of their mutual promises and covenants set forth below, the parties agree as follows:

1. *Property Covered*: This agreement shall apply to the following described property now owned or hereafter acquired by Husband and Wife even though some items may have been purchased or acquired by one or the other alone or may be registered in the name of one or the other or both:

A. Residence. 1105 Marvin Lane, Clarkston, County of Asotin, State of Washington, to-wit:

Lot 8 in Block One of Bellevue Addition according to the official plat thereof, filed in Book C of Plats at Page(s) 106, records of Asotin County, Washington.

APN: 1-059-00-008-0000-0000

Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston ID 83501
(208)743-1516; Fax(208)746-2131

56448

B. All tangible personal property and financial assets now owned or hereafter acquired, including without limitation, household items, tools, firearms, vehicles, art objects, ownership and debt interests in business entities, accounts and notes receivable, and all financial accounts of every nature.

The above-described property shall be transmuted at death into and declared to be the community property of the parties and is referred to in this agreement as the "described community property."

2. *Vesting at Death of a Spouse*: If Husband dies and Wife survives him, all of the described community property and/or separate property shall vest in Wife as of the moment of Husband's death. If Wife dies and Husband survives her, all of the described community property and or separate property shall vest in Husband as of the moment of Wife's death.

3. *Disclaimer*: Upon the death of either spouse, the surviving spouse may disclaim any interest passing under the agreement in whole or in part, or with reference to specific parts, shares or assets thereof, in which event the interest disclaimed shall pass as if the provisions of paragraph 2 had been revoked as to such interest with the surviving spouse entitled to the benefits provided by any alternate disposition.

4. *Automatic Revocation*: The provisions of paragraph 2 shall be automatically revoked:

(a) Upon the filing by either party of a petition, complaint or other pleading for separation, dissolution, or divorce; or

(b) Immediately prior to death, if the order of death cannot be ascertained, or if both parties hereto die within ninety (90) days of one another.

5. *Optional Revocation by One Party*: If either party becomes incapacitated, the other party shall have the power to terminate the provisions of paragraph 2 and each party designates the other as attorney-in-fact to become effective upon incapacity to exercise such power. The termination shall be effective upon the delivery of written notice

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

56448

thereof to the incapacitated spouse and to the guardian(s), if any, of the person and of the estate of the incapacitated person. For the purposes of this paragraph, a spouse shall be deemed incapacitated if a person duly licensed to practice medicine signs a statement declaring that the person is unable to manage his or her own financial affairs.

6. *Powers of Appointment*: This agreement shall not affect any power of appointment now held by or hereafter given to Husband or Wife or both of them, nor shall it obligate Husband or Wife or both of them, to exercise any such power of appointment in any way.

7. *Revocation of Inconsistent Agreements*: To the extent this agreement is inconsistent with any provisions of any community property agreement or other arrangement previously made by the parties that affects the described community property, the terms of this agreement shall be deemed to revoke such prior provisions to the extent of the inconsistency.

IN WITNESS WHEREOF, the parties, James Alan Redenbaugh and Virginia D. Redenbaugh, have hereunto set their signatures this 9th day of May, 2018.

James Alan Redenbaugh, Husband

Virginia D. Redenbaugh, Wife

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

56448

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

On this day personally appeared before me, James Alan Redenbaugh and Virginia D. Redenbaugh, husband and wife, to me known to be the individuals described in and who executed the within and foregoing Community Property Agreement, and acknowledged that they signed the same as their free and voluntary act and deed for the uses and purposes therein mentioned.

Given under my hand and official seal on this 9th day of May, 2018.

Notary Public in and for said State,
residing at or employed in Lewiston.
My Commission Expires: Sept 4 2018

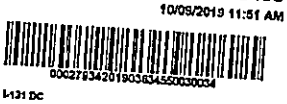
Creason, Moore, Dokken & Geidl, PLLC
P.O. Drawer 835, Lewiston ID 83501
(208)743-1516; Fax(208)746-2231

56448

Asotin County, WA
Darla McKay Auditor

363455

10/09/2019 11:51 AM



L131 DC
Pages: 3 Fee: $41.00
CREASON, MOORE, DOKKEN &

AFTER RECORDING, RETURN TO:

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

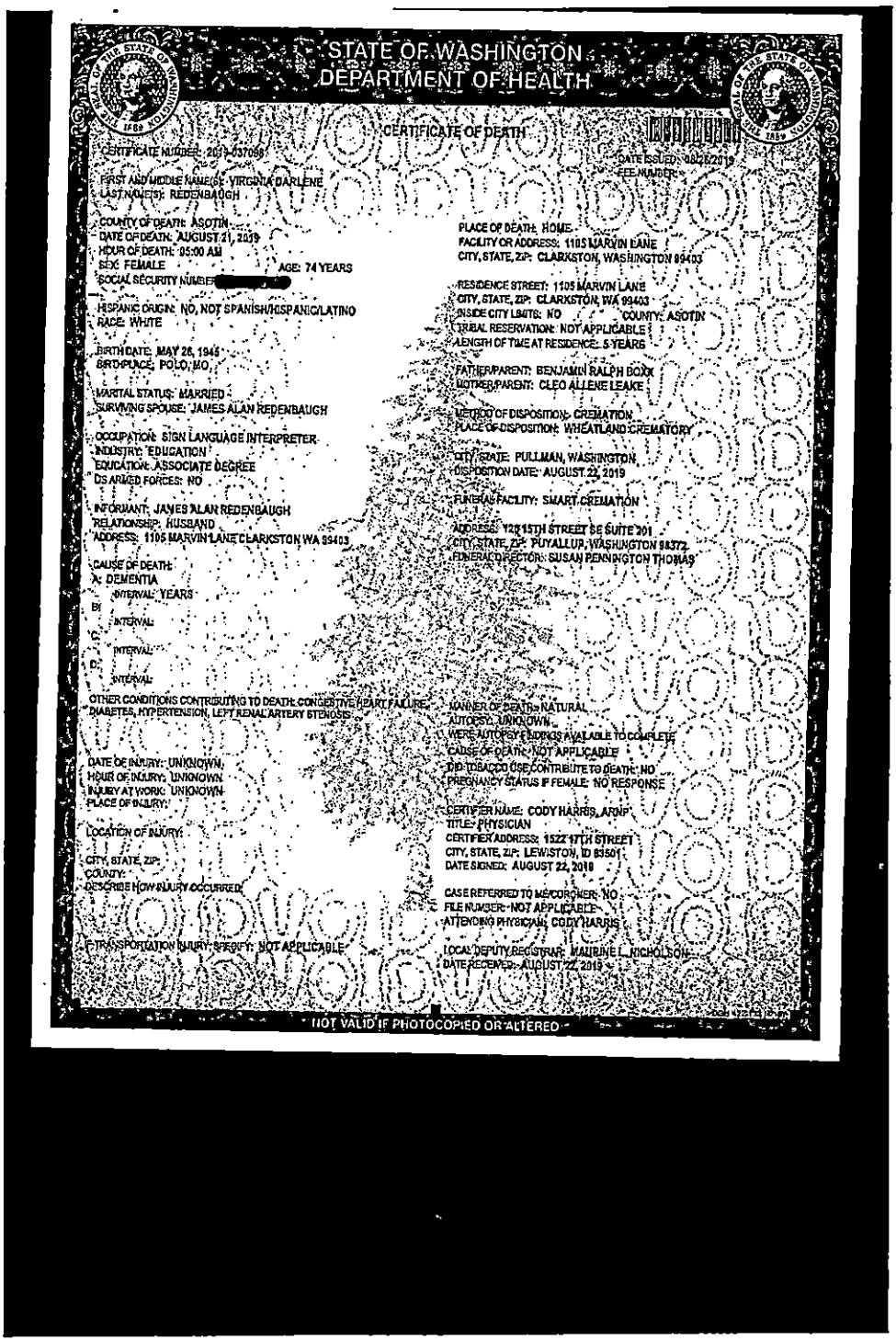
COMMUNITY PROPERTY AGREEMENT

Reference Numbers of Related Documents: N/A

Grantor: Redenbaugh, Virginia D.

Grantee: Public

56448



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2019-037099
DATE ISSUED: 08/26/2019
FEE NUMBER:

FIRST AND MIDDLE NAME(S): VIRGINIA DARLENE
LAST NAME(S): REDENBAUGH

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: AUGUST 21, 2019
HOUR OF DEATH: 05:00 AM
SEX: FEMALE AGE: 74 YEARS
SOCIAL SECURITY NUMBER: [redacted]

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

BIRTH DATE: MAY 26, 1945
BIRTHPLACE: POLO, MO

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: JAMES ALAN REDENBAUGH

OCCUPATION: SIGN LANGUAGE INTERPRETER
INDUSTRY: EDUCATION
EDUCATION: ASSOCIATE DEGREE
DS ARMED FORCES: NO

INFORMANT: JAMES ALAN REDENBAUGH
RELATIONSHIP: HUSBAND
ADDRESS: 1105 MARVIN LANE CLARKSTON WA 99403

CAUSE OF DEATH:
A: DEMENTIA
INTERVAL: YEARS
B:
INTERVAL:
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: CONGESTIVE HEART FAILURE, DIABETES, HYPERTENSION, LEFT RENAL ARTERY STENOSIS

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

LOCATION OF INJURY:

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

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 1105 MARVIN LANE
CITY, STATE, ZIP: CLARKSTON, WASHINGTON 99403

RESIDENCE STREET: 1105 MARVIN LANE
CITY, STATE, ZIP: CLARKSTON, WA 99403
INSIDE CITY LIMITS: NO COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 5 YEARS

FATHER/PARENT: BENJAMIN RALPH BOXX
MOTHER/PARENT: CLEO ALLENE LEAKE

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: WHEATLAND CREMATORY

CITY, STATE: PULLMAN, WASHINGTON
DISPOSITION DATE: AUGUST 22, 2019

FUNERAL FACILITY: SMART CREMATION
ADDRESS: 1221 15TH STREET SE SUITE 201
CITY, STATE, ZIP: PUYALLUP, WASHINGTON 98372
FUNERAL DIRECTOR: SUSAN PENNINGTON THOMAS

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

CERTIFIER NAME: CODY HARRIS, ARNP
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 1522 17TH STREET
CITY, STATE, ZIP: LEWISTON, ID 83501
DATE SIGNED: AUGUST 22, 2019

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

LOCAL DEPUTY REGISTRAR: MAURINE L. NICHOLSON
DATE RECEIVED: AUGUST 22, 2019

NOT VALID IF PHOTOCOPIED OR ALTERED

56448

Washington State Department of Health

Affidavit for Correction

This is a legal document. Complete in ink and do not alter.

Mail to: Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
360-236-4300

STATE OFFICE USE ONLY

State File Number	Fee Number	Initials	Date	Affidavit Number

Required information must match current information on record

Record Type: ☐ Birth ☐ Death ☐ Marriage ☐ Dissolution (Divorce)

1. Name on Record:
2. Date of Event:
3. Place of Event:
4. Father/Parent Full Legal Name (Spouse A for Marriage or Dissolution)
5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution)
6. Name of Person Requesting Correction:

Relationship to Person on Record: ☐ Self ☐ Parent(s) ☐ Guardian ☐ Funeral Director ☐ Informant ☐ Other (specify) ☐ Hospital

7. Return Mailing 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:

Printed name: Date:

16b. Signature of 2nd parent (if required):

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
- Certificate of Naturalization
- Military record (DD-214)
- Hospital/medical record
- School transcripts
- Passport
- Social Security Numident Report
- Green/Permanent Resident card (I-551)

Birth Certificates

1. 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.
2. 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.
3. 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, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate.

This affidavit cannot be used to add a father to a birth certificate (use paternity acknowledgment form DOH 422-032)

Death Certificates

1. 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). The informant may change marital status with proof. *Marital status requires a certified copy of a court order if someone other than the informant is requesting the change.
2. The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

1. 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.
2. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.

DOH 422-034 October 2015

ASOTIN COUNTY HEALTH DISTRICT

Bob Lutz, M.D., MPH
Health Officer

AUG 2 6 2019

01252474

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

56448