

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

Only for sales in a single location code on or after March 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*.

1 Check box if partial sale, indicate % sold.		2 Buyer/Grantee		
Halis and Davinson of III I/ Inflation		Z Buyer/Grantee Name G. Arnold Jeffreys		
		Name O. Attion beingys		
ailing address 2708 6th		Mailing address 2708 6th		
City/state/zip Clarkston, WA 99403		City/state/zip Clarkston, WA 99403		
one (including area code)		Phone (including area code)		
Send all property tax correspondence to:		List all real and personal property tax parcel account numbers 1-041-32-007-0001-0000	property?	Assessed value(s) \$ 116,100.00
<u> </u>		1-041-32-007-0002-0000	- —	\$ 235,700.00
ailing address		1-041-32-007-0009-0000		\$ 181,700.00
y/state/zip		1-041-02-001-0003-0000	_ 🗀	<u>Ψ 10 1,1 00.00</u>
Street address of property <u>2702 and 2708 6th Avenue</u> is property is located in <u>Asotin County</u> Check box if any of the listed parcels are being segregated fro gal description of property (if you need more space, attach a s ee Attached Exhibit A	for . m another	parcel, are part of a boundary line adjusti	nent or parci	
11 - Household, single family units ter any additional codes		7 List all personal property (tangible and price.	I intangible)	 included in selling
(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 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)		Reason for exemption Inheritance - Nonprobated will or operation of law		
is this broberty designated as locest land bet wear oarsat	Yes 🛮 No	Type of document Lack of Probate Affida	vit	
this property classified as current use (open space, farm dagricultural, or timber) land per RCW 84.34?	Ves 7 No	Date of document 15th day of	December, 2	.023
this property receiving special valuation as historical		Gross selling		
operty per RCW 84.26?] Yes ☑ No	*Personal property (dec		
any answers are yes, complete as instructed below.		Exemption claimed (dec		
1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE)		Taxable selling		
W OWNER(S): To continue the current designation as forest la classification as current use (open space, farm and agriculture		Excise tax: stat		
nber) land, you must sign on (3) below. The county assessor n		Less than \$525,000.01 at		0.0
termine if the land transferred continues to qualify and will in signing below. If the land no longer qualifies or you do not wi	ioicate ish to	From \$525,000.01 to \$1,525,000 at 1		
ntinue the designation or classification, it will be removed and	d the	From \$1,525,000.01 to \$3,025,000 at 2		
mpensating or additional taxes will be due and payable by the transferor at the time of sale (RCW 84.33.140 or 84.34.108). I		Above \$3,025,000 at 2		
ning (3) below, you may contact your local county assessor fo	r more	Agricultural and timberland at 1		
formation.		Agricultural and timberiand at 1 Total excise tax:		
is land: 🔲 does 🗹 does not qualify for ntinuance.			ocal	
		0.0025 *Delinquent interest:		
puty assessor signature Date			.ocal	
NOTICE OF COMPLIANCE (HISTORIC PROPERTY)	- -	b*Delinquent pe		
W OWNER(S): To continue special valuation as historic proper below. If the new owner(s) doesn't wish to continue, all addi				
Iculated pursuant to RCW 84.26, shall be due and payable by t			total	
transferor at the time of sale.		*State technolog		
(3) NEW OWNER(S) SIGNATURE		Affidavit processin		
gnature Signature		A MINIMUM OF \$10.00 IS DUE	due	
<u> </u>		*SEE INSTRUC	TIONS	
int name Print name				1 - 11
int name Print name I CERTIFY UNDER PENALTY OF PERIURY THAT THE FOREGOIN Signature of grantor or agent)	NG IS TRUE	Signature of grantee or agent	_	Jeffrys

REV 84 0001a (02/28/23)

THIS SPACE TREASURER'S USE ONLY

COUNTY TREASURER

56 528

Print on legal size paper.

DEC 1 5 2023

G.A. Jeffnies \$10.00 Cash

ASOTIN CLUSTON
TREASURER

Exhibit A

Parcel 1:

That part of the East half of Lot 7, Block I-4, Clarkston Heights, according to the official plat thereof, filed in Book B of Plats at Page(s) 102 Official Records of Asotin County, Washington, more particularly described as follows:

Commencing at the Southeast corner of Lot 7, , Block I-4, Clarkston Heights, Asotin County, Washington, said point being on the centerline of PHS 3 SR 129; thence West along said centerline a stance of 67.0 feet; thence North parallel to the East boundary line of said Lot 7 a distance of 184.0 feet; thence East parallel to PHS 3 SR 129 a distance of 67.0 feet to a point on the East boundary line of said Lot 7; thence South along the said East boundary line to The Place of Beginning.

1-041-32-007-0001-0000 (2702 6th)

Parcel 2:

The East half of Lot 7, Block I-4, Clarkston Heights, according to the official plat thereof, filed in Book B of Plats at Page(s) 102 Official Records of Asotin County, Washington. EXCEPT Beginning at the Southeast corner of Lot 7, , Block I-4, Clarkston Heights, Asotin County, Washington, said point being on the centerline of PHS 3 SR 129; thence West along said centerline a stance of 67.0 feet; thence North parallel to the East boundary line of said Lot 7 a distance of 184.0 feet; thence East parallel to PHS 3 SR 129 a distance of 67.0 feet to a point on the East boundary line of said Lot 7; thence South along the said East boundary line to The Place of Beginning. AND EXCEPT The North 90 feet of the South 975.47 of the East half of Lot 7, Block I-4, Clarkston Heights, according to the official plat thereof, filed in Book B of Plats at Page(s) 102 Official Records of Asotin County, Washington.

1-041-32-007-0002-0000 & 1-041-32-007-0009-0000 (S/C Split 2708 6th)

Please print or type information
Document Title(s) (or transactions contained therein): 1. Affidavit (Lack of Probate)
2. 3. 4.
Grantor(s) (Last name first, then first name and initials): 1. The heirs and devisees of Jill K. Jeffreys 2.
3. 4. □ Additional names on page of document.
Grantee(s) (Last name first, then first name and initials): 1. Jeffreys, G. Arnold 2. 3. 4.
☐ Additional names on page of document. Legal description (abbreviated: i.e. lot, block, plat or sections, township, range, qtr/rtr.)
Pt. Lot 7, Block I-4, Clarkston Heights
□ Additional legal is on page of document.
Reference Number(s) of Documents assigned or released:
L3 Additional numbers on page of document.
Assessor's Property Tax Parcel/Account Number
1-041-32-007-0001-0000, 1-041-32-007-0002-0000, & 1-041-32-007-0009-0000
□ Property Tax Parcel ID is not yet assigned □ Additional parcel numbers on page of document
The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information.

Return Address



AFFIDAVIT (LACK OF PROBATE)

G. Arnold Jeffreys	,being first	duly swom, deposes and says:
The undersigned affiant is the rightful heir	r to the real property described below, and is the	e surviving spouse
(relationship to decedent) of Jill K. Jeffre	eys(d	lecedent), who died on (date)
NOVEMBER 8, 2023, at		
SPOKANE	SPOKANE	WA:
City	County	State
*** A CERTIFIED COPY OF THE DE be used for recording at the discretion	CATH CERTIFICATE MUST BE PRESENTED of the county.	ED. PLEASE NOTE: A copy may
REGARDING DISPOSITION OF REA	L PROPERTY:	
Attach the full legal description of the procommonly recognized address of: 270		sferred which is located at a
CLARKSTON	Street State	99403
City	State	Zip Code
Property Agreement in favor of survivi	ent and/or Community Property Agreement; OR ing spouse (A COPY OF WHICH IS ATTACHE County recording number nt which HAS NOT been Probated or Revoked (-	ED for review), or has been; OR
ATTACHED for review)	when the tree to the tree to the tree to the tree to	reor i or wincing
"Heirs at law" includes surviving spouse, child, parents, brothers and sisters of the d (use additional pages if necessary)	children, adopted children, issue of predeceased lecedent. Affiant hereby identifies all heirs at law	child or adopted v of the decedent:
G. ARHOLD JEFFRE	45 86 SPOUSE	
CA. ARHOLD JEFFREY 2708 6TH AVEHVE CL. Full name, age, relationship, address	ARKSTON, WA 99403	
HOLLY KRISTINE BARTH	ELMESS 54 DAUGHTER	
2704 GHAVEHUE CLA	RKSTON, WA 99403	···.
Full name, age, relationship, address		•
	DERSON 53 DAUGHTER	
1530 GWALLOWS CRE	ST COURT CLARKSTON, WA	199403
Full name, age, relationship, address		
		
Full name, age, relationship, address		

(Continued on next page)

56528

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Full name, age, relationship, address	_	
		
	<u> </u>	
Full name, age, relationship, address		
Full name, age, relationship, address		
	 	
Full name, age, relationship, address		
Dated: December, 2023		
		
G. Arnold Jeffreys		·
Affiant's full name	•	
509-758-5342		
Telephone number		
2708 6th Avenue		
Street		
Clarkston	Washington	83501
City	State	Zip Code
01 0 00 0 10	4 4 .	
1) unou filles	<u> 12-15-</u>	<u> 15</u>
Signature (15) Y	Date '	
•		•
Thako		
Machington	County of Asotin Nez Pe	OAL D
State of Washington		THE
I know or have satisfactory evidence that G. Arno	old Jeffreys	
-	(name of person)	
is the person who appeared before me, and said pers		his affidavit and acknowledged
it to be (his/her free and voluntary act for the uses a	nd purposes mentioned in this affidavit.	1.4
lo —	Aller F	March
Dated: 12 / 15 / 2023	_ VVWW D.	100-9
	Signature of Note	ary Public
(SEAL OR STAMP)	Residing at: VW 16 ON	+0
MARIO D. COMEZ	Residing at: //W/6/01/	رياس
MARIO D. GOMEZ Commission #59271	Notary Public in and for the Sta	ite of <u>I dano</u>
Notary Public	-	
State of Idaho	My appointment expires: 3	1 7 / 2024
	•	

For tax assistance call (360) 534-1503, option 2. To request this document in an alternate format, please call 1-800-647-7706. Teletype (TTY) users may use the Washington Relay Service by calling 711.

REV 84 0017 (5/16/16)

56518

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1-041-32-007-0002-0000 & 1-041-32-007-0009-0000 (S/C Split 2708 6th)

56528



STATE OF WASHINGTON





LOCAL FILE NUMBER: 4983

DATE ISSUED: 11/14/2023 FEE NUMBER:

rese a COUNTY OF DEATH: SPOKANE

CERTIFICATE NUMBER: 2023-055170

DATE OF DEATH: NOVEMBER 08, 2023 HOUR OF DEATH: 07:25 PM

SEX: FEMALE AGE: 78 YEARS

FİRST AND MIDDLE NAME(S): JILL KATHLEEN

SOCIAL SECURITY NUMBER.

L'AŞT NAME(S): JEFFREYS

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: OCTOBER 14, 1945 BIRTHPLACE: MOSCOW, ID

MARITAL STATUS: MARRIED

SURVIVING SPOUSE: G ARNOLD JEFFREYS

OCCUPATION: HOME MAKER INDUSTRY: OWN HOME

EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE

US ARMED FORCES: NO

INFORMANT: G ARNOLD JEFFREYS

RELATIONSHIP: SPOUSE .

ADDRESS: 2708 6TH AVE, CLARKSTON WA, 99403

CAUSE OF DEATH:

A: VENTRICULAR FIBRILLATION

INTERVAL: MINUTES

B: UNKNOWN'

INTERVAL: MINUTES

◇INTERVAL:

"D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: MULTIPLE MYELOMA, ADNEXAL

MASSES, FEVER OF UNKNOWN ORIGIN

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

LOCATION OF INJURY:

CITY, STATE, ZIP: COUNTY: ·

DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOSPITAL

FACILITY OR ADDRESS: PROVIDENCE SACRED HEART MEDICAL CENTER

CITY, STATE, ZIP: SPOKANE, WASHINGTON 99204

RESIDENCE STREET: 2708 6TH AVE CITY, STATE, ZIP: CLARKSTON, WA 99403

INSIDE CITY LIMITS: NO COUNTY: ASOTIN

TRIBAL RESERVATION: NOT APPLICABLE LENGTH OF TIME AT RESIDENCE: 52 YEARS

FATHER: FRANCIS MARTSON MOTHER: BETTE WELLS

METHOD OF DISPOSITION: BURIAL

PLACE OF DISPOSITION: VINELAND CEMETERY

CITY, STATE: CLARKSTON, WASHINGTON DISPOSITION DATE: NOVEMBER 17, 2023

FUNERAL FACILITY: MERCHANT RICHARDSON BROWN FUNERAL HOMES

ADDRESS: PO. BOX 107

CITY, STATE, ZIP. CLARKSTON, WASHINGTON 99403

FUNERAL DIRECTOR: RICHARD LASSITER

MANNER OF DEATH NATURAL AUTOPSY: UNKNOWN WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH: NOT APPLICABLE DID TOBACCO USE CONTRIBUTE TO DEATH: UNKNOWN

PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: JESSICA LUNDGREN, DO

TITLE: DO

CERTIFIER ADDRESS: 101 W. 8TH AVENUE CITY, STATE, ZIP: SPOKANE, WASHINGTON 99204

DATE SIGNED: NOVEMBER 10, 2023

CASE REFERRED TO ME/CORONER: NO FILE NUMBER: NOT APPLICABLE ATTENDING PHYSICÎAN: DAVID WAPLES, DO

LOCAL DEPUTY REGISTRAR: AJA RICHARDSON DATE RECEIVED: NOVEMBER 13, 2023