

Real Estate Excise Tax Affidavit (RCW 82.45.WAC 458-81A)

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 Alvin Leroy Cutler, Trustee
of the Cutler Living Trust dated Apr 7, 2015
Mailing address 384 Cloverland Rd
Asotin WA 99402
City/state/zip Asotin WA 99402
Phone (including area code) 5415198370

2 Buyer/Grantee

Name Daniel Grimm
Jessica Wood
Mailing address 384 Cloverland Rd
Asotin WA 99402
City/state/zip Asotin WA 99402
Phone (including area code) 5038778604

3 Send all property tax correspondence to: ☒ Same as Buyer/Grantee

Name Daniel Grimm Jessica Wood

Mailing address _____
City/state/zip 5038778604

4 Street address of property 384 Cloverland Road, Asotin, WA

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).

-see attached legal

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 _____

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

Signature of grantor or agent Alvin Leroy Cutler

Name (print) Alvin Leroy Cutler, Trustee

Date & city of signing 2/23/24, Clarkston, WA

Signature of grantee or agent Daniel Grimm

Name (print) Daniel Grimm

Date & city of signing 2/23/24, Clarkston, WA

Part of the second deed is a release of a lien which is null and void if not recorded with the county clerk on or before February 23, 2024. If not recorded, the release is null and void.

To ask about the availability of this public use, or any other public use, please call 360-705-6705. Teletype _____

REV 84 0001a (09/08/22)

THIS SPACE TREASURER'S USE ONLY

COUNTY TREASURER

DATE 02/23/2024 - RECEIPT No. 56628 - Alliance Title - Clarkston

Print on legal size paper
Page 1 of 1

EXHIBIT "A"

656035

A tract of land in the Southwest Quarter of the Southeast Quarter Section 24 Township 10 North, Range 45 East of the Willamette Meridian, Asotin County, Washington, sometimes referred to as Tax Plat No. 2 or Jerry Mill property in the plat on file in the office of the Asotin County Auditor and more particularly described as follows:

From the Quarter Section corner between Sections 24 and 25, Township 10 North, Range 45 East of the Willamette Meridian, East on section line 746.32 feet to a point on ridge between Asotin and George Creeks; thence angle to left $76^{\circ}30'$ a distance of 140.85 feet to the place of beginning; thence angle to left $15^{\circ}40'$ a distance of 404.63 feet to the Northeast corner (to what is known as the Frank Horak tract) at foot of ledge of rock; thence angle to left $15^{\circ}50'$ a distance of 139.5 feet to the Southwest corner of J. Knight property; thence angle to right $70^{\circ}48'$ a distance of 375.5 feet; thence angle to right $110^{\circ}55'$ a distance of 100 feet; thence angle to left $46^{\circ}30'$ a distance of 95 feet; thence angle to right $4^{\circ}00'$ a distance of 227.2 feet; thence angle to right $113^{\circ}00'$ a distance of 500 feet; thence angle to left $21^{\circ}00'$ a distance of 265.5 feet to place of beginning, EXCEPT that portion deeded to Asotin County, Washington for the Jerry-Cloverland Road right-of-way as described in that certain deed filed and recorded May 16, 1951 in the office of the Asotin County Auditor bearing Instrument number 46478

656035

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56628

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

DATE ISSUED: 01/10/2024
FEE NUMBER:

CERTIFICATE NUMBER: 2024-000481

FIRST AND MIDDLE NAME(S): LETA LUCILLE
LAST NAME(S): BEARD

COUNTY OF DEATH: ASOTIN
DATE OF DEATH: JANUARY 05, 2024
HOUR OF DEATH: 12:27 AM
SEX: FEMALE AGE: 105 YEARS
SOCIAL SECURITY NUMBER:

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

BIRTH DATE: DECEMBER 06, 1918
BIRTH PLACE: WEISER, ID

MARITAL STATUS: WIDOWED
SURVIVING SPOUSE: NOT APPLICABLE

OCCUPATION: HOMEMAKER
INDUSTRY: OWN HOME
EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE
US ARMED FORCES: NO

INFORMANT: SHARON E. BLOODSWORTH
RELATIONSHIP: DAUGHTER
ADDRESS: 601 3RD STREET #123, CLARKSTON, WASHINGTON 99403

CAUSE OF DEATH:
A: CONGESTIVE HEART FAILURE
INTERVAL: MONTHS
B: ATHEROSCLEROSIS
INTERVAL: YEARS
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

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: DECEDENT'S HOME
FACILITY OR ADDRESS: 384 CLOVERLAND ROAD
CITY, STATE, ZIP: ASOTIN, WASHINGTON 99402

RESIDENCE STREET: 384 CLOVERLAND ROAD
CITY, STATE, ZIP: ASOTIN, WA 99402
INSIDE CITY LIMITS: NO COUNTY: ASOTIN
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 44 YEARS

FATHER: WILLIAM HARRY SWISHER
MOTHER: MARTHA ANN GORDON

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: VALLEY CREMATORY

CITY, STATE: LEWISTON, IDAHO
DISPOSITION DATE: JANUARY 10, 2024

FUNERAL FACILITY: VASSAR-RAWLS FUNERAL HOME

ADDRESS: 920 21ST AVENUE
CITY, STATE, ZIP: LEWISTON, IDAHO 83501
FUNERAL DIRECTOR: DENNIS W. HASTINGS

MANNER OF DEATH: NATURAL
AUTOPSY: NO
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: LISA WEBBER
TITLE: CORONER/ME
CERTIFIER ADDRESS: PO BOX 220
CITY, STATE, ZIP: ASOTIN, WASHINGTON 99402
DATE SIGNED: JANUARY 09, 2024

CASE REFERRED TO ME/CORONER: YES
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: MAURINE L. NICHOLSON
DATE RECEIVED: JANUARY 09, 2024

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

DATE ISSUED: 07/17/2017
FEE NUMBER:

CERTIFICATE NUMBER: 2017-030031

FIRST AND MIDDLE NAME(S): LEO RUSSELL
LAST NAME(S): BEARD

COUNTY OF DEATH: ASOTIN

DATE OF DEATH: JULY 13, 2017

HOUR OF DEATH: 05:44 PM

SEX: MALE

AGE: 97 YEARS

SOCIAL SECURITY NUMBER:

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: DECEMBER 28, 1919

BIRTHPLACE: PARADISE, WALLOWA COUNTY, OR

MARITAL STATUS: MARRIED

SPOUSE: LEITA LUCILLE SWISHER

OCCUPATION: OWNER/OPERATOR

INDUSTRY: LOGGING

EDUCATION: 8TH GRADE OR LESS

US ARMED FORCES: NO

INFORMANT: SHARON BLOODSWORTH

RELATIONSHIP: DAUGHTER

ADDRESS: P.O. BOX 185, ENTERPRISE, OREGON, 97228

CAUSE OF DEATH:

A. NATURAL CAUSES ASSOCIATED WITH ADVANCED AGE

INTERVAL: MONTHS

INTERVAL:

INTERVAL:

INTERVAL:

INTERVAL:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

DATE OF INJURY:

TIME 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: 384 CLOVERLAND ROAD

CITY, STATE, ZIP: ASOTIN, WASHINGTON 99402

RESIDENCE STREET: 384 CLOVERLAND ROAD

CITY, STATE, ZIP: ASOTIN, WASHINGTON 99402

INSIDE CITY LIMITS: NO

COUNTY: ASOTIN

TRIBAL RESERVATION: NOT APPLICABLE

LENGTH OF TIME AT RESIDENCE: 38 YEARS

FATHER/PARENT: LEONARD EDWARD BEARD

MOTHER/PARENT: INA MAY VARNEY

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: VALLEY CREMATORY

CITY, STATE: LEWISTON, IDAHO

DISPOSITION DATE: JULY 15, 2017

FUNERAL FACILITY: VASSAR-RAWLS FUNERAL HOME

ADDRESS: 620 21ST AVENUE

CITY, STATE, ZIP: LEWISTON, IDAHO 83501

FUNERAL DIRECTOR: DENNIS W. HASTINGS

MANNER OF DEATH: NATURAL

AUTOPSY: NO

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: LISA WEBBER

TITLE: CORONER/ME

CERTIFIER ADDRESS: P.O. BOX 220

CITY, STATE, ZIP: ASOTIN, WA 99402

DATE SIGNED: JULY 17, 2017

CASE REFERRED TO ME/CORONER: YES

FILE NUMBER: NOT APPLICABLE

ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: BRADY WOODBURY

DATE RECEIVED: JULY 17, 2017

NOT VALID IF PHOTOCOPIED OR ALTERED

56628