

124645

BOOK 155 PAGE 664

FILED FOR RECORD
SKAMANIA CO. WASH
BY *Kielpinski & Assoc*

FEB 22 4 50 PM '96

P. Olson
AUDITOR
GARY M. OLSON

AFFIDAVIT OF HEIRSHIP

STATE OF WASHINGTON)
County of Skamania) ss.

The undersigned, being first duly sworn, on oath deposes and states:

1. This Affidavit provides information for the record regarding the following described real property located in Skamania County, Washington:

Commencing at the Northeast Section corner to Section 2, Township 2 North, Range 7 East, W.M.; thence South 0° 01' East 1308.98 feet; thence South 89° 32' 25" West 1421.26 feet, more or less, to the true point of beginning which is on the West right of way boundary line of the Red Bluff County Road; thence South 89° 32' 25" West 222.00 feet; thence South 196.98 feet; thence East 237.00 feet to said right of way boundary line; thence Northerly along said right of way boundary line 200 feet; more or less, to the true point of beginning; said parcel of land containing 1.04 acres, more or less.

The statements set forth in this Affidavit are representations of fact and may be relied upon by all parties dealing with the above-described property.

2. Clinton Lee and Lorna A. Lee were married on September 29, 1929. There were four children as issue of this marriage, namely:

17918

REAL ESTATE EXCISE TAX

FEB 23 1996

Affidavit of Heirship
Page 1

PAID *exempt*
W. Olson, Deputy
SKAMANIA COUNTY TREASURER

Req. Hereo ☒
Indexed, Eir ☒
Indirect ☒
Filed ☐
Filed ☐

KIELPINSKI & ASSOCIATES
A PROFESSIONAL SERVICE CORPORATION
ATTORNEYS AT LAW
40 Cascade Avenue-Suite 110 * P.O. Box 510
Stevenson, Washington 98648
Telephone: (509) 427-5665
Fax: (509) 427-7618

Gary M. Olson, Skamania County Auditor
By *P. Olson* 2-22-96, Parcel # 2-7-2-1-1200

Alva Delores Rankin, who resides in Stevenson, Washington;

Betty Jean Olsen, who resides in McMinnville, Oregon;

Bertha Mae Bell, who resides in Stevenson, Washington; and

Richard Lynn Lee, who resides in Battleground, Washington.

All of said children are of legal age.

3. By deed dated April 22, 1975 and recorded in Book 68, Page 788, Auditor's File No. 19121, records of Skamania County, Washington, R.M. Hegewald and Helen B. Hegewald, husband and wife, conveyed the above-described property to "Lorna A. Lee". Clinton Lee and Lorna A. Lee were husband and wife at the time of said conveyance.

4. Lorna A. Lee died on March 2, 1976, a resident of Skamania County, Washington. A copy of her death certificate is attached hereto and incorporated herein. No will or probate of the estate of Lorna A. Lee was ever filed.

5. By deed dated December 3, 1980 and recorded in Book 79, Page 40, Auditor's File No. 91713, records of Skamania County, Washington, Clinton R. Lee, a single person, conveyed the above-described property to "Bertha Mae Bell, a married person, as her separate property".

6. Clinton Lee died on September 21, 1981, a resident of

Skamania County, Washington. A certified copy of his death certificate is attached hereto and incorporated herein. No will or probate of the estate of Clinton Lee was ever filed.

7. By deed dated November 29, 1989 and recorded in Book 11, Page 864, Auditor's File No. 108319, records of Skamania County, Washington, Bertha Mae Bell, a married person, conveyed the above-described property to "Randall or Alva Rankin, husband and wife, as their separate property".

8. Each of the undersigned, being all of the children and heirs at law of Clinton R. Lee and Lorna A. Lee, husband and wife, alleges and affirms that title to the above-described property is vested in Randall Duane Rankin and Alva Delores Rankin, husband and wife.

Alva Delores Rankin
ALVA DELORES RANKIN

SIGNED AND SWORN to before me this 12th day of February, 1996 by Alva Delores Rankin.



Donna Rusk

Notary
Public in and for the State
of Washington.

Commission expires: 8-15-99

BOOK 155 PAGE 667

Betty Jean Olsen
BETTY JEAN OLSEN

SIGNED AND SWORN to before me this 1st day of February, 1996 by Betty Jean Olsen.



David L. Newville, Notary
Public in and for the State
of Washington. Oregon.

Commission expires: 11-11-99

Bertha Mae Bell
BERTHA MAE BELL

SIGNED AND SWORN to before me this 12th day of February, 1996 by Bertha Mae Bell.



Donna Rush, Notary
Public in and for the State
of Washington.

Commission expires: 8-15-99

BOOK 155 PAGE 668

Richard Lynn Lee
RICHARD LYNN LEE

SIGNED AND SWORN to before me this 5 day of
February, 1996 by Richard Lynn Lee.

CHERYL A HOLMAN
STATE OF WASHINGTON
NOTARY PUBLIC
My Commission Expires 3-5-99

Cheryl A Holman, Notary
Public in and for the State
of Washington.

Commission expires: 3-5-99

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

BOOK 155 PAGE 669

18-0

STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES
VITAL RECORDS

CERTIFICATE OF DEATH

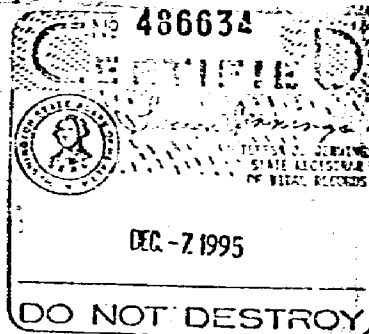
LOCAL FILE NUMBER		NAME - FIRST MIDDLE LAST		SEX	DATE OF BIRTH	STATE FILE NUMBER
		Clinton Richard LEE		M	21 Sep 1981	146-81 22452
RACE (WHITE, BLACK, AM INDIAN, ETC.)		AGE - LAST BIRTHDAY		DATE OF DEATH		COUNTY OF DEATH
White		71		07 Jul 1910		Skamania
CITY, TOWN OR LOCATION OF DEATH		PLACE OF DEATH - CHECK TYPE OF PLACE THEN GIVE ADDRESS OR POST NAME		RECEIVED EMERGENCY CARE		YES/NO
Stevenson		Home - 127 Roosevelt		Yes		YES/NO
BIRTH STATE (IF NOT IN USA GIVE COUNTRY)		CITIZEN OF WHAT COUNTRY		MARRIED - NEVER MARRIED, WIDOWED, DIVORCED		YES/NO
Missouri		USA		Widowed		YES/NO
SOCIAL SECURITY NO.		USUAL OCCUPATION - GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE EVEN IF RET. RED.		SPOUSE - IF WIFE GIVE MA DEVA NAME		YES/NO
543-12-5783		Laborer		THOMAS Lorna A. Lee		YES/NO
RESIDENCE - NUMBER AND STREET		CITY, TOWN OR LOCATION		INSIDE CITY LIMITS (YES/NO)		COUNTY
127 Roosevelt		Stevenson		Yes		Skamania
FATHER - NAME FIRST MIDDLE LAST		MOTHER - NAME FIRST MIDDLE LAST		STATE		
John Wesley Lee		BEARD Bertha Viola Lee		Washington		
INFORMANT - NAME		MARITAL ADDRESS		STREET OR RFD NO.		CITY OR TOWN
Bertha M. Bell		Stevenson, Washington		98648		
DATE OF BURIAL OR CREMATION		CITY, TOWN OR LOCATION		STATE		
Burial		25 Sep 1981		Idlewild Cemetery		Hood River, Oregon
FURNERAL DIRECTOR'S SIGNATURE		NAME OF FACILITY		ADDRESS OF FACILITY		
X		GARDNER FUNERAL HOME, INC.		White Salmon, Wash.		
TO BE COMPLETED ONLY BY CERTIFYING PHYSICIAN		TO BE COMPLETED ONLY BY MEDICAL EXAMINER OR CORONER				
SIGNATURE		SIGNATURE		TITLE		
X		X		CORONER		
DATE SIGNED (MO DAY YR)		HOUR OF DEATH (24 HRS)		DATE SIGNED (MO DAY YR)		
September 24, 1981		Approx.		September 21, 1981		
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)		Pronounced Dead (MO DAY YR)		HOUR OF DEATH (24 HRS)		
Robert K. Leick Skamania County Courthouse Stevenson, Wash. 98648		September 21, 1981		11:50 A.M.		
NAME AND ADDRESS OF CERTIFIER - PHYSICIAN, MEDICAL EXAMINER OR CORONER (TYPE OR PRINT)		IMMEDIATE CAUSE		INTERVAL BETWEEN ONSET AND DEATH		
Robert K. Leick Skamania County Courthouse Stevenson, Wash. 98648		CHRONIC ALCOHOLISM		Unknown		
		DUE TO OR AS A CONSEQUENCE OF		INTERVAL BETWEEN ONSET AND DEATH		
		DUE TO OR AS A CONSEQUENCE OF		INTERVAL BETWEEN ONSET AND DEATH		
		DUE TO OR AS A CONSEQUENCE OF		INTERVAL BETWEEN ONSET AND DEATH		
OTHER SIGNIFICANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN ABOVE		AUTOPSY (YES/NO)		WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER (YES/NO)		
		No		Yes		
ACC. SUICIDE, HOMICIDE, OR INJURY DATE (MO DAY YR)		HOUR OF INJURY (24 HRS)		DESCRIBE HOW INJURY OCCURRED		
Natural		Sept. 21, 1981		Approx.		
INJURY AT WORK (YES/NO)		PLACE OF INJURY - AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG ETC. (SPECIFY)		LOCATION - STREET OR RFD NO., CITY, TOWN, STATE		
No		Residence		127 Roosevelt Ave., Stevenson, WA 98648		
REGISTRAR'S SIGNATURE		DATE RECEIVED (MO DAY YR)		REVIEWED BY		
X		Sept. 30, 1981		DATE		

DSHS 9-150 (REV. 1-80)

DOH 01-003 (7/84)

Please send the proof(s) and this form/certificate to:

Attn: Corrections
Center for Health Statistics
1112 Quince Street South
P.O. Box 9709
Olympia, WA 98507-9709



CC475326

TYPE, OR PRINT IN
PERMANENT INKWASHINGTON STATE DEPARTMENT OF HEALTH — BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

2-D LOCAL FILE NUMBER 7.		STATE FILE NUMBER	
DECEASED — NAME Lorna Alva Lee		DATE OF DEATH — MONTH, DAY, YEAR March 2, 1976	
RACE — WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY) White	AGE — LAST BIRTHDAY (YEARS) 67	SEX female	DATE OF BIRTH — MONTH, DAY, YEAR Sept. 29, 1908
CITY, TOWN, OR LOCATION OF DEATH Stevenson	COUNTY OF DEATH Skamania	RESIDENCE Rt. 1, Box 60	
STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY) Washington	CITIZEN OF WHAT COUNTRY U.S.A.	SURVIVING SPOUSE (IF WIFE, GIVE MARRIED NAME) Clinton Richard Lee	
SOCIAL SECURITY NUMBER 543-12-4281	USUAL OCCUPATION, GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED home maker	KIND OF BUSINESS OR INDUSTRY	
RESIDENCE — STATE Washington	COUNTY Skamania	CITY, TOWN, OR LOCATION Stevenson	STREET AND NUMBER Rt. 1, Box 60
FATHER — NAME Newton Thomas		MOTHER — MARRIED NAME Thomas	
INFORMANT — NAME Jasper Bell		MARRIAGE ADDRESS Stevenson, Washington 98648	
PART I DEATH WAS CAUSED BY (a) CORONARY OCCLUSION		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH Un-Determined	
PART II OTHER SIGNIFICANT CONDITIONS CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE LISTED IN PART I Approx. 9:40pm		AUTOPSY No	
ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY) Nat. Causes		DATE OF INJURY March 2, 1976	
PLACE OF INJURY Home		LOCATION Ryan-Allen Road, Stevenson, WA	
CERTIFICATION — PHYSICIAN I ATTESTE THE RELEASED FROM		DATE OF DEATH March 2, 1976	
CERTIFICATION — CORONER EXAMINATION OF THE BODY AND OF THE INVESTIGATION OF THE DEATH OCCURRED ON THE DATE AND AT THE PLACE STATED		DATE SIGNED March 8, 1976	
CERTIFIER — NAME (PRINT OR PRINT) Robert K. Leick		CORONER March 8, 1976	
MARRIAGE ADDRESS Courthouse Bldg., Stevenson, Washington 98648			
BURIAL — REMOVAL burial		CITY OF CREMATION Hood River, Oregon	
DATE March 8, 1976		FURNERAL HOME, NAME AND ADDRESS Gardner's Funeral Home, P.O. Box 100, Salmon, Wa. 98581	
FURNERIAL DIRECTOR — SIGNATURE D. Rosenback		REGISTER — SIGNATURE D. Rosenback	

THIS IS TO CERTIFY, that the foregoing is a true copy (Photographic)
of a record on file with the Southwest Washington Health District,
Stevenson, Washington.

Robert A. Champaign, M.D., N.P.H.
District Health Officer

SEAL MAR 8 1976

D. Rosenback
(Clerk) ge

BOOK 155 PAGE 670

RECORDER'S NOTE:
NOT AN ORIGINAL DOCUMENT