

126708

BOOK 160 PAGE 812

SEP 2450

DECLARATION OF HEIRSHIP, INHERITANCE, DOMICILE AND INDEMNITY AGREEMENT

STATE OF WASHINGTON )  
County of Skamania )

FILED FOR RECORD  
SKAMANIA CO. WASH  
BY  
SKAMANIA CO. TITLE  
Nov 15 10 03 AM '96  
GARY  
AUDITOR  
GARY H. OLSON

I, Lois Ilene Boyle, residing at Ashland, OR,  
first being duly sworn, depose and say that:

1. Robert Edward Boyle died testate in Ashland, OR,  
on October 13, 1996.

2. ~~At the time of his/her death, I was the~~  
~~widow/widower of the decedent.~~  
~~XX~~  
~~XX~~  
~~XX~~

3. The sole surviving heirs at law and beneficiaries of the  
Last Will and Testament of Robert Edward Boyle are  
Lois Ilene Boyle.

The deceased, Robert Edward Boyle, left no children or children  
of children who predeceased him/her other than those named herein.

4. The expenses of the last illness and burial of  
Robert Edward Boyle and all other claims against the decedent's  
estate have been settled and paid.

5. There are no Federal Estate taxes due or Washington inheritance  
taxes due.

6. The purpose of this affidavit is to induce Skamania County Title  
COMPANY to accept such affidavit in forbearance of a demand made by  
said title insurance company to probate the decedent's estate.

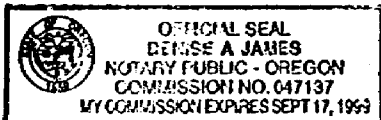
7. At the time of decedent's death, decedent owned property in  
Skamania County, Washington, located at  
Lot 1 of the Kent Short Plat, and described as

8. I, by my signature hereto, agree to indemnify and hold harmless  
SKAMANIA COUNTY TITLE from any and all liability, obligations, expenses,  
legal fees or litigation costs which it may incur as a result of a  
falsity or inaccuracy of any statement contained in this affidavit.

DATED this 7 day of November, 1996.

BY: Lois J. Boyle Lois Ilene Boyle

SUBSCRIBED and SWORN TO before me this 7 day of Nov., 1996.



Denise A. James  
NOTARY PUBLIC FOR WASHINGTON OREGON  
My Commission Expires: 9-17-99

Searched  
Indexed, Dir  
Indirect  
Filed  
Noted

## State File Number

45-2 Bkg 252

ANY ALTERATION OR FRASURE VOIDS THIS CERTIFICATE



**COPY** WILL OF ROBERT E. BOYLE

I, ROBERT E. BOYLE, a resident of Oregon, declare that this is my will.

1. REVOCATION OF PRIOR WILLS

I revoke all prior wills and codicils.

2. DESIGNATION OF FAMILY

My wife is LOIS I. BOYLE. We have no children.

3. SPECIFIC DEVISE

I devise to my wife, if she survives me, any interest I may have in household goods, furnishings, personal vehicles, recreational equipment, jewelry, clothing and other articles of personal or domestic use or ornament, other than specifically provided for herein, and any insurance on them. If my wife does not survive me, I devise the same to

If does not survive me, I devise the same as part of the residue of my estate pursuant to Article 4. below. I request, but do not direct, that if I have left a list indicating a desire who should receive particular items, those items be distributed to the persons named in that list.

4. DEVISE OF RESIDUE

I devise the residue of my estate to my wife, if she survives me. If my wife does not survive me, I devise the residue of my estate to

If does not survive me, I devise the same, in equal shares, to the SHRINERS HOSPITAL, of Portland, Oregon, and THE SOUTHWEST OREGON ALS SUPPORT GROUP, of Medford, Oregon. The devise to THE SOUTHWEST OREGON ALS SUPPORT GROUP is to be used for local support of ALS sufferers. If either of the charities named herein is not in existence at the time of my death, the other shall receive the entire residue of my estate.

//

*REB*  
1 - Will

LAW OFFICES OF  
DAVIS, GILSTRAP, HARRIS, HEARN & WELTY  
A Professional Corporation  
515 EAST MAIN STREET  
ASHLAND, OREGON 97520  
(503) 482-5111 FAX (503) 488-4455

ORIGINAL DOCUMENT  
IN CUSTODY OF  
DAVIS, GILSTRAP, HARRIS  
HEARN & WELTY, P.C.  
ASHLAND, OREGON

5. POWERS OF PERSONAL REPRESENTATIVE

I authorize my Personal Representative to:

A. Exercise Powers Provided by Law. Exercise the rights, powers and duties created by Oregon Law (as it now exists or as hereafter amended), in addition to all of the rights, powers and duties created by this Paragraph and other Paragraphs of this Will.

B. Personal Effects. Select and distribute among my devisees any items of household furniture and furnishings, personal effects, animals and other property for personal use. My Personal Representative may sell that property or may distribute that property in kind to the devisees of that property, even though that devisee is under the age of eighteen (18) years, or to any suitable person with whom that devisee resides.

C. Tax Elections. To make any tax elections available, particularly to:

(1) Elect whether administration and other expenses shall be claimed as income tax deductions or as estate tax deductions.

(2) Value the assets of my gross estate at whichever valuation date produces the lowest gross estate for tax purposes.

(3) Not make any adjustments between any of my devisees because of the consequences of the exercise of any of these powers or rights to elect.

(4) To make any other election, allocation, or decision available under any state or federal law.

D. Nonapportionment. To pay all estate and inheritance taxes which become payable by reason of my death (including any interest and penalties thereon) out of my estate as an expense of administration and without apportionment.

E. To Minors. Payments to a minor devisee may be made to the minor, to a parent of the minor who, or corporation which, may be furnishing maintenance, support or education to the minor. If there is no such parent or corporation, payments may be made to a custodian pursuant to the Oregon Uniform Transfers to Minors Act.

F. Operation of Business. Hold, manage and operate any business in which my estate owns an interest at the risk of my estate and not at the risk of my Personal Representative. The

REB  
2 - Will

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profits and losses from the operation of that business shall inure to the benefit of or be chargeable to my estate as a whole. If my Personal Representative, at any time, deems it advisable, my Personal Representative may form a corporation, limited partnership or other entity to carry on that business and may transfer to that corporation, limited partnership or other entity, any part or parts of my estate as my Personal Representative deems advisable in exchange for the shares, securities or obligations of that corporation, limited partnership or other entity. My Personal Representative may continue to hold any interest in any business owned by my estate for any period deemed to be in the best interest of my estate by my Personal Representative.

6. APPOINTMENT OF PERSONAL REPRESENTATIVE

I appoint my wife, LOIS I. BOYLE, as Personal Representative of my Will. If my wife is unable or unwilling to serve as Personal Representative, I appoint \_\_\_\_\_ of Medford, Oregon as alternate Personal Representative of my Will. No bond shall be required of any Personal Representative named in this paragraph.

7. PAYMENT OF ESTATE TAXES OUT OF ESTATE

I direct that all inheritance and estate taxes which become payable by reason of my death be apportioned among all persons interested in the estate. This apportionment shall be made in the proportion that the value of the interest of each person interested in the estate bears to the total value of the interests of all persons interested in the estate.

8. SURVIVORSHIP REQUIREMENT

No devisee under my Will shall be deemed to have survived me unless that devisee is living on the thirtieth (30th) day after the date of my death.

9. CONSTRUCTION OF WILL UNDER OREGON LAW

The validity and construction of my Will shall be determined in accordance with the laws of the State of Oregon at the time of

///  
///  
///

*Q.E.B.*  
3 - Will

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the execution of my Will.

IN WITNESS WHEREOF, I have signed and do declare this instrument consisting of four (4) pages, including this page, to be my Will, this 10-4-94 day of October, 1994.

Robert E. Boyle  
Robert E. Boyle

COPY

THE FOREGOING INSTRUMENT, consisting of four (4) pages, the fourth (4th) one of which contains the signature, was at the date hereof signed by ROBERT E. BOYLE in our presence and in the presence of each of us, and at the time of said signature, the said ROBERT E. BOYLE did declare this instrument to be his Last Will and Testament requesting our presence and witnessing to his subscription and requesting our subscriptions hereto.

James M. Welby residing at ASHLAND, Oregon

Mary L. Scife residing at Ashland, Oregon

CA A WILLA BOYLE R

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AFFIDAVIT OF ATTESTING WITNESSES

STATE OF OREGON                    }  
County of Jackson                } ss.

We, the undersigned, being sworn, each for myself, say:

We are attesting witnesses to the Last Will and Testament executed by ROBERT E. BOYLE, dated October 4, 1994, consisting of five (5) typewritten pages, including this page. The Will was executed in our presence and in the presence of the Testator who declared this instrument to be his Will and requested us to sign our names as witnesses, which we did. To the best of our knowledge and belief, at the time of executing the Will the Testator was of legal age, of sound mind, and not acting under any restraint, undo influence, duress or fraudulent misrepresentation.

*[Signature]*

*Mary L. Scarp*

SUBSCRIBED AND SWORN to by each of the affiants above named on this 4 day of October, 1994.



*[Signature]*  
Notary Public for Oregon  
My Commission Expires: 5/30/97