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BOOK 143 PAGE 775

FILED FOR RECORD  
SKAMANIA CO. WASH  
BY *Helen LaDue*

MAR 27 4 22 PM '97

*P. Lowry*  
AUDITOR  
GARY M. OLSON

RETURN ADDRESS:

*Helen LaDue*  
*PO Box 785*  
*Carson, WA 98610*

Please Print or Type Information.

Document Title(s) or transactions contained therein:

1. *Affidavit of Heirship*

2.  
3.  
4.

GRANTOR(S) (Last name, first, then first name and initials)

1. *LaDue, Elwood K.*

2.  
3.  
4.

☐ Additional Names on page \_\_\_\_\_ of document.

GRANTEE(S) (Last name, first, then first name and initials)

1. *LaDue, Helen E.*

2.  
3.  
4.

☐ Additional Names on page \_\_\_\_\_ of document.

LEGAL DESCRIPTION (Abbreviated: I.E., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter)

*Lot 2 Rodgers Subdivision*

☐ Complete legal on page *3* of document.

REFERENCE NUMBER(S) Of Documents assigned or released:

*N/A*

☐ Additional numbers on page \_\_\_\_\_ of document.

ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER

*03-08-17-4-1200*

☐ Property Tax Parcel ID is not yet assigned.

☐ Additional parcel #'s on page \_\_\_\_\_ of document.

The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.

Registered  
Assigned, P  
Filed  
Index  
Searched  
1997

AFFIDAVIT OF HEIRSHIP

STATE OF WASHINGTON )

COUNTY OF SKAMANIA )

HELEN E. LA DUE, being first duly sworn, deposes and says:

That affiant is the lawful surviving spouse of ELWOOD K. LA DUE, who died on April 21, 1996, at County of Hood River, State of Oregon. A copy of the death certificate is attached.

That affiant has herein below identified each and all of the heirs at law of decedent, including but not limited to his children, adopted children, and the issue of any predeceased child or adopted child.

That the heirs at law of decedent are ( list all of the heirs at law ):

FULL NAME:	AGE:	RELATIONSHIP TO DECEDENT: ESTATE EXCISE TAX
1. CYNTHIA MAE LA DUE ESCENE	adult	Daughter 18704 MAR 28 1997
2. WILLIAM KEITH LA DUE	adult	Son PAID <u>exempt</u>
3. HARRIET ANN LEATON	adult	Adopted Son <u>W. Leaton, Deputy</u> COUNTY TREASURER
4. DARYL LEE LA DUE	adult	Adopted Son

That affiant knows of her own knowledge, and so states, that all of the expenses of decedent's last illness, funeral and burial; mortgages; and State and Federal succession taxes upon decedent's estate, if applicable have been paid in full.

Affiant states that the total value of the decedent's estate at date of death, including all real and personal property and community property of decedent and decedent's surviving spouse was approximately \$ 60,000. including real property located in Skamania County, Washington, legally described as follows: See Exhibit " A " attached and incorporated herein by this reference.

Gary H. Martin, Skamania County Auditor  
Date 3-27-97 Percol # 3-8-12-1-1200

Affiant further states that decedent's estate is not being probated, there are no Federal Estate taxes due or Washington inheritance taxes due.

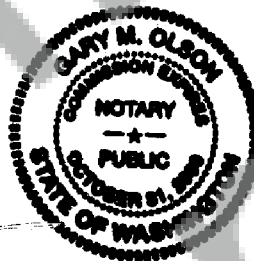
That this affidavit is made for the purpose of removing decedent's name from title to said real property.

DATED 3-21-97

Helen E. La Due  
HELEN E. LA DUE, AFFIANT  
182 Dillingham Loop  
Carson, WA. 98610

SUBSCRIBED and SWORN TO before me this 27 day of MARCH 1997, by  
HELEN E. LA DUE.

Gary M. Olson  
NOTARY PUBLIC FOR WASHINGTON  
Residing at NORTH BONNEVILLE  
My commission expires: 10-31-2000



BOOK 163 PAGE 778

EXHIBIT "A"

Parcel No. 1:

Lot 2, RODGER'S SUBDIVISION, according to the official plat thereof on file and of record in Book E of Plats at page 36, records of Skamania County, Washington.

SUBJECT TO easements for mains, laterals, pipelines, and reservoirs of Public Utility District No. 1 of Skamania County, a municipal corporation, and existing contract for water service furnished by said district.

SUBJECT TO rights of the public in streets, roads and highways.

STATUTORY WARRANTY DEED

REAL ESTATE EXCISE TAX

18704

MAR 28 1997

PAID *exempt*

*W. Brown, Deputy*  
SKAMANIA COUNTY TREASURER

Gary H. Martin, Skamania County Assessor

Date 3-27-97 Parcel # 3-8-17-4-1200

PERMANENT  
BLACK MARK

OREGON DEPARTMENT OF HUMAN RESOURCES  
HEALTH DIVISION  
CENTER FOR HEALTH STATISTICS  
CERTIFICATE OF DEATH

CERTIFICATE OF DEATH				1936		State of Washington	
Name of Deceased <b>Elmer C. LaDue</b>		Birth <b>Keith LaDue</b>		Sex <b>Male</b>		Date of Death (Month, Day, Year) <b>April 21, 1996</b>	
Date of Birth <b>31-10-1961</b>		Sex <b>Male</b>		Place of Birth (City and State or Foreign Country) <b>Ronan, MT</b>		Date of Birth (Month, Day, Year) <b>October 31, 1921</b>	
Place of Death (City and State or Foreign Country) <b>Bozeman, MT</b>				Cause of Death (Specify) <b>Heart Disease</b>			
City, Town, or Location of Death <b>Bozeman, MT</b>				County of Death <b>Hood River</b>			
Marital Status (Married, Widowed, Divorced, Single) <b>Married</b>				Name of Spouse (Full Name) <b>Helen E. LaDue</b>			
Occupation (Specify) <b>Timber</b>				Education (Specify) <b>High School</b>			
Address (Street and Number) <b>182 Dillingham Loop</b>				City, Town, or Location <b>Carson, WA</b>			
Race (Specify) <b>AM. Indian</b>				Religion (Specify) <b>Methodist</b>			
Signature of Deceased (If Living) <b>Elmer C. LaDue</b>				Signature of Spouse (If Living) <b>Helen E. LaDue</b>			
Signature of Physician (If Living) <b>Dr. J. L. Smith</b>				Signature of Coroner (If Living) <b>Dr. J. L. Smith</b>			
Signature of Funeral Home (If Living) <b>Stevenson Cemetery</b>				Signature of Burial Place (If Living) <b>Stevenson Cemetery</b>			
Signature of Burial Place (If Living) <b>Stevenson Cemetery</b>				Signature of Burial Place (If Living) <b>Stevenson Cemetery</b>			

1. NAME OF DECEASED (Last, first, middle initial) <b>John Edgar Hoover</b>		2. DOB (Month/Day/Year) <b>1/22/1895</b>		3. DATE OF DEATH (Month/Day/Year) <b>1/23/1967</b>		4. TIME OF DEATH (Hour/Minute) <b>11:00 AM</b>	
5. PLACE OF DEATH (Street, City, State, Zip) <b>1400 ... Street, Washington, DC 20535</b>		6. OCCASION OF DEATH (e.g., Accident, Suicide, Natural Causes) <b>Natural Causes</b>		7. CAUSE OF DEATH (Medical Certificate Number) <b>...</b>		8. SIGNATURE OF DECEASED (If known) <b>John Edgar Hoover</b>	
9. NAME OF NEXT OF KIN (Last, first, middle initial) <b>John Edgar Hoover</b>		10. ADDRESS OF NEXT OF KIN (Street, City, State, Zip) <b>...</b>		11. PHONE NUMBER OF NEXT OF KIN <b>...</b>		12. SIGNATURE OF NEXT OF KIN <b>John Edgar Hoover</b>	
13. NAME OF PHYSICIAN (Last, first, middle initial) <b>...</b>		14. ADDRESS OF PHYSICIAN (Street, City, State, Zip) <b>...</b>		15. PHONE NUMBER OF PHYSICIAN <b>...</b>		16. SIGNATURE OF PHYSICIAN <b>...</b>	
17. NAME OF FUNERAL HOME (Last, first, middle initial) <b>...</b>		18. ADDRESS OF FUNERAL HOME (Street, City, State, Zip) <b>...</b>		19. PHONE NUMBER OF FUNERAL HOME <b>...</b>		20. SIGNATURE OF FUNERAL HOME <b>...</b>	
21. NAME OF CORONER (Last, first, middle initial) <b>...</b>		22. ADDRESS OF CORONER (Street, City, State, Zip) <b>...</b>		23. PHONE NUMBER OF CORONER <b>...</b>		24. SIGNATURE OF CORONER <b>...</b>	
25. NAME OF POLICE OFFICER (Last, first, middle initial) <b>...</b>		26. ADDRESS OF POLICE OFFICER (Street, City, State, Zip) <b>...</b>		27. PHONE NUMBER OF POLICE OFFICER <b>...</b>		28. SIGNATURE OF POLICE OFFICER <b>...</b>	
29. NAME OF DISTRICT ATTORNEY (Last, first, middle initial) <b>...</b>		30. ADDRESS OF DISTRICT ATTORNEY (Street, City, State, Zip) <b>...</b>		31. PHONE NUMBER OF DISTRICT ATTORNEY <b>...</b>		32. SIGNATURE OF DISTRICT ATTORNEY <b>...</b>	
33. NAME OF JUDGE (Last, first, middle initial) <b>...</b>		34. ADDRESS OF JUDGE (Street, City, State, Zip) <b>...</b>		35. PHONE NUMBER OF JUDGE <b>...</b>		36. SIGNATURE OF JUDGE <b>...</b>	
37. NAME OF CLERK (Last, first, middle initial) <b>...</b>		38. ADDRESS OF CLERK (Street, City, State, Zip) <b>...</b>		39. PHONE NUMBER OF CLERK <b>...</b>		40. SIGNATURE OF CLERK <b>...</b>	
41. NAME OF WITNESS (Last, first, middle initial) <b>...</b>		42. ADDRESS OF WITNESS (Street, City, State, Zip) <b>...</b>		43. PHONE NUMBER OF WITNESS <b>...</b>		44. SIGNATURE OF WITNESS <b>...</b>	
45. NAME OF SECOND WITNESS (Last, first, middle initial) <b>...</b>		46. ADDRESS OF SECOND WITNESS (Street, City, State, Zip) <b>...</b>		47. PHONE NUMBER OF SECOND WITNESS <b>...</b>		48. SIGNATURE OF SECOND WITNESS <b>...</b>	
49. NAME OF THIRD WITNESS (Last, first, middle initial) <b>...</b>		50. ADDRESS OF THIRD WITNESS (Street, City, State, Zip) <b>...</b>		51. PHONE NUMBER OF THIRD WITNESS <b>...</b>		52. SIGNATURE OF THIRD WITNESS <b>...</b>	
53. NAME OF FOURTH WITNESS (Last, first, middle initial) <b>...</b>		54. ADDRESS OF FOURTH WITNESS (Street, City, State, Zip) <b>...</b>		55. PHONE NUMBER OF FOURTH WITNESS <b>...</b>		56. SIGNATURE OF FOURTH WITNESS <b>...</b>	
57. NAME OF FIFTH WITNESS (Last, first, middle initial) <b>...</b>		58. ADDRESS OF FIFTH WITNESS (Street, City, State, Zip) <b>...</b>		59. PHONE NUMBER OF FIFTH WITNESS <b>...</b>		60. SIGNATURE OF FIFTH WITNESS <b>...</b>	
61. NAME OF SIXTH WITNESS (Last, first, middle initial) <b>...</b>		62. ADDRESS OF SIXTH WITNESS (Street, City, State, Zip) <b>...</b>		63. PHONE NUMBER OF SIXTH WITNESS <b>...</b>		64. SIGNATURE OF SIXTH WITNESS <b>...</b>	
65. NAME OF SEVENTH WITNESS (Last, first, middle initial) <b>...</b>		66. ADDRESS OF SEVENTH WITNESS (Street, City, State, Zip) <b>...</b>		67. PHONE NUMBER OF SEVENTH WITNESS <b>...</b>		68. SIGNATURE OF SEVENTH WITNESS <b>...</b>	
69. NAME OF EIGHTH WITNESS (Last, first, middle initial) <b>...</b>		70. ADDRESS OF EIGHTH WITNESS (Street, City, State, Zip) <b>...</b>		71. PHONE NUMBER OF EIGHTH WITNESS <b>...</b>		72. SIGNATURE OF EIGHTH WITNESS <b>...</b>	
73. NAME OF NINTH WITNESS (Last, first, middle initial) <b>...</b>		74. ADDRESS OF NINTH WITNESS (Street, City, State, Zip) <b>...</b>		75. PHONE NUMBER OF NINTH WITNESS <b>...</b>		76. SIGNATURE OF NINTH WITNESS <b>...</b>	
77. NAME OF TENTH WITNESS (Last, first, middle initial) <b>...</b>		78. ADDRESS OF TENTH WITNESS (Street, City, State, Zip) <b>...</b>		79. PHONE NUMBER OF TENTH WITNESS <b>...</b>		80. SIGNATURE OF TENTH WITNESS <b>...</b>	

70-  
EX-106  
Items 20b & 20c, corrected by Funeral Home Affidavit,  
5-14-96 IE7140, E. Johnson II, State Reg., klc

ORIGINAL VITAL STATISTICS COPY

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY  
REGISTERED AT THE OFFICE OF THE HOOD RIVER COUNTY REGISTRAR.

Norothy A. Osell

DATE ISSUED: ~~1988~~ MAY 28 1996 COUNTY OREGON

DOROTHY A. O'DELL  
COUNTY REGISTRAR  
HOOD RIVER COUNTY, OREGON

Gary H. Martin, Stanislaus County Assessor,  
 Dated: 3-27-94 Perpetual 3-27-94 3-120