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BOOK 217 PAGE 946

FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. III4

DEC 10 4 08 PM '01

P. L. L. L.
AUDITOR
GARY M. OLSON

AFTER RECORDING MAIL TO:

Name KATHY GARRITY KELLY

Address 7025 ANICE STREET

City/State ORANGEVALE, CA 95662

S.C.T.C. 24404

Document Title(s): (or transactions contained therein)

1. AFFIDAVIT LACK OF PROBATE
2. CERTIFICATE OF DEATH
- 3.
- 4.



(this space for title company use only)

Reference Number(s) of Documents assigned or released:

☐ Additional numbers on page _____ of document

Grantor(s): (Last name first, then first name and initials)

1. THOMAS FRANK GARRITY
- 2.
- 3.
- 4.

REAL ESTATE EXCISE TAX

21948

DEC 11 2001

PAID

Exempt

W. H. H. H. H.
SKAMANIA COUNTY TREASURER

5. ☐ Additional names on page _____ of document

Grantee(s): (Last name first, then first name and initials)

1. KATHY RAYLENE GARRITY
2. ~~THOMAS FRANK GARRITY~~
3. ~~THOMAS FRANK GARRITY~~
- 4.

5. ☐ Additional names on page _____ of document

Abbreviated Legal Description as follows: (i.e. lot/block/plat or section/township/range/quarter/quarter)

NE 1/4 SEC 2 T2N R7E

☐ Complete legal description is on page _____ of document

Assessor's Property Tax Parcel / Account Number(s):

02-07-02-1-0-0500-00

Gary H. Martin, Skamania County Assessor

Date 12-10-01 Parcel # 2-7-2-1-500

WA-1

NOTE: The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

**AFFIDAVIT
Lack of Probate**

State of Washington

County of Skamania

Kathy R. Garrity, being first duly sworn, deposes and says:

1. The undersigned affiant is the wife of Thomas
E. Garrity, who died Dec. 20, 1999 at Stevenson
(relationship to decedent) (date of death) (year) (city)
 State of Washington, then being a legal resident of Stevenson
Skamania, Washington
(county) (state) (city)

AFFIANT MUST PROVIDE A DEATH CERTIFICATE OF DECEDENT

2. Check the appropriate box below:

☐ Decedent and surviving spouse executed a Community Property Agreement dated _____, a copy of which is attached hereto.

☒ Decedent left no last Will.

☐ Decedent left a last Will which has neither been probated nor revoked; a copy of which is attached hereto.

☐ Decedent left a Will which was probated in _____ County, State of _____ A copy of an Order Admitting Will to Probate, Decree of Distribution or equivalent court documentation is attached hereto.

3. The heirs at law of the decedent, including spouse, natural or adopted children, children of any predeceased child, brothers and sisters, and any surviving parents are as follows:

Kathy Rose Garrity 52 wife 1531 Lakeview Rd
(full name) (age) (relationship) (residence)
Stevenson, WA

HEIRS AT LAW (continued)

<u>Timothy James Garrity</u> (full name)	<u>26</u> (age)	<u>son</u> (relationship)	<u>1531 Lakeview Rd</u> (residence)
<u>Tamara Rae Schroeder</u> (full name)	<u>28</u> (age)	<u>daughter</u> (relationship)	<u>Stevens, WA</u> (residence)
_____ (full name)	_____ (age)	_____ (relationship)	<u>1049 E Adams</u> (residence)
_____ (full name)	_____ (age)	_____ (relationship)	<u>Cottage Grove, OR</u> (residence)
_____ (full name)	_____ (age)	_____ (relationship)	_____ (residence)

(attach additional page for additional names)

4. All debts of the decedent and/or the marital community, including, but not limited to all expenses due to decedent's last illness, funeral and burial, and all applicable federal and state succession or inheritance taxes have been fully paid, except as follows:
5. The decedent [] had [X] had never received from the State of Washington assistance consisting of nursing facility services, home and community-based services, related hospital and prescription drug services, or any other type of medical assistance.
6. As of the date of death, the value of all community property of the decedent was approximately \$40,500. The value of all separate property of the decedent was approximately \$0.
7. Other facts regarding the decedent, decedent's estate, or matters which pertain to the current transaction:

THIS AFFIDAVIT IS MADE TO INDUCE FIRST AMERICAN TITLE
INSURANCE COMPANY (THE COMPANY) TO ISSUE ITS POLICIES OF
TITLE INSURANCE ON REAL PROPERTY PASSING TO THE AFFIANT(S) IN
RELIANCE UPON THE REPRESENTATIONS SET FORTH ABOVE. AFFIANT
AGREES TO INDEMNIFY AND HOLD THE COMPANY HARMLESS FROM
LOSS OR DAMAGE WHICH IT MAY SUFFER AS A RESULT OF SAID
RELIANCE.

Kathy Raylene Garity
Affiant's Full Name

12/5/01
Date

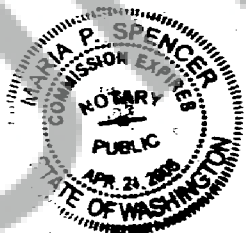
Affiant's Full Name

Date

STATE OF WASHINGTON,)
COUNTY OF Skamania) ss.

On this day personally appeared before me Kathy Raylene Garity to me
known to be the individual described in and who executed the within and foregoing
instrument, and acknowledged that she signed the same as her free and
voluntary act and deed, for the use and purposes therein mentioned.

GIVEN under my hand and official seal this 5 day of December, 2001.



Maria P. Spencer
Notary Public in and for the State of
Washington, residing at Skamania
My appointment expires 4-21-05

STATE FILE NUMBER

DEC 21 1999