

143990

BOOK 221 PAGE 586

FILED FOR RECORD
SKAMANIA CO. WASH
BY *Vye Blanchard*

MAR 11 3 35 PM '02

P. Lawry
AUDITOR

Return Address: **Vye Blanchard**
Attorney at Law
5125 S.W. Macadam Avenue, Suite 210
Portland, Oregon 97201

J. MICHAEL GARVISON

<i>Document Title(s) or transactions contained herein:</i>	
Affidavit, Letters Testamentary and Death Certificate	
REAL ESTATE EXCISE TAX	
<i>GRANTOR(S) (Last name, first name, middle initial)</i>	<i>28093</i>
Estate of Geraldine Ruth Craine	MAR 11 2002
<input type="checkbox"/> Additional names on page _____ of document.	PAID <i>(initials)</i>
<i>GRANTEE(S) (Last name, first name, middle initial)</i>	<i>W. Craine, Jr.</i>
William Craine, Jr., and Judith Craine, Joint Tenants With Right of Survivorship	SKAMANIA COUNTY TREASURER
<input type="checkbox"/> Additional names on page _____ of document.	
<i>LEGAL DESCRIPTION (Abbreviated: L., Lot, Block, Plus or Section, Township, Range, Quarter/Quarter)</i>	
SW 1/4 NW 1/4 of Section 34, T2N, R5E WM, Skamania County, Washington.	
<input type="checkbox"/> Complete legal on page 5 of document.	
<i>REFERENCE NUMBER(S) of Documents assigned or released:</i>	
<input type="checkbox"/> Additional numbers on page _____ of document.	
ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER	
02 05 34 2 0 1600 00	<i>2-5-34-2-1600</i> <i>2-11-02</i> <i>GM</i>
<input type="checkbox"/> Property Tax Parcel ID is not yet assigned	
<input type="checkbox"/> Additional parcel numbers 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.	

AFTER RECORDING RETURN TO:

VYE BLANCHARD
Attorney at Law
5125 S.W. Macadam Avenue, Suite 210
Portland, Oregon 97201

AFFIDAVIT

GRANTORS: WILLIAM JOHN CRAINE, SR., and GERALDINE RUTH CRAINE
GRANTEE: ESTATE OF GERALDINE RUTH CRAINE

STATE OF OREGON)
) ss.
County of Multnomah)

WILLIAM CRAINE, JR., and JUDITH CRAINE, being first duly sworn on oath, depose and say:

That this Affidavit is for the purpose of supplying information for the record pertaining to that certain Community Property Agreement, executed by WILLIAM JOHN CRAINE, SR., and GERALDINE RUTH CRAINE, husband and wife, dated December 20, 1994, and also to the estates of WILLIAM JOHN CRAINE, SR., and GERALDINE RUTH CRAINE, Deceased, the parties to said Agreement; and it is intended that the statements set forth herein shall be considered representations of fact which may be relied upon by all persons dealing with real property and personal property owned by the deceased spouses.

FIRST, that WILLIAM JOHN CRAINE, SR., died on June 3, 1996, in Clark County, State of Washington, and that GERALDINE RUTH CRAINE died on August 3, 2000, in Clark County, State of Washington, and her estate is being probated in Clark County, Washington, Superior Court Case No. 01 4 00251 2.

SECOND, that the parties to said Agreement entered into no subsequent joint Wills or

AFFIDAVIT - 1

agreements which would have the effect of abrogating or nullifying the above-mentioned Community Property Agreement.

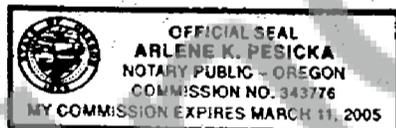
THIRD, that all property owned by the Decedents at the date of death of WILLIAM JOHN CRAINE, SR., was community property and WILLIAM JOHN CRAINE, SR., left no separate estate.

FOURTH, that all obligations of the community owing at the date of death of both Decedents have been paid in full, and all expenses of last sickness and for funeral services have been paid in full for both Decedents.

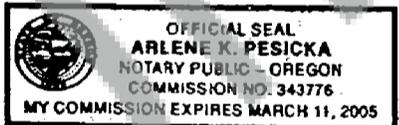
FIFTH, that Decedents were survived by the following named children:

WILLIAM CRAINE, JR., Son
JUDITH CRAINE, Daughter

DATED this 28 day of February, 2002.



William Craine Jr.
WILLIAM CRAINE, JR., Co-Personal
Representative of the Estate of Geraldine
Ruth Craine, Deceased



Judith Craine
JUDITH CRAINE, Co-Personal Representa-
tive of the Estate of Geraldine Ruth Craine

SUBSCRIBED AND SWORN to before me this 28th day of February, 2002.

Arlene K. Pesicka
NOTARY PUBLIC FOR OREGON
My Commission Expires: MAR. 11, 2005

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

146

STATE FILE NUMBER

BOOK 221 PAGE 589

1 NAME First Middle Last GERALDINE RUTH CRAINE		2 SEX (M/F) Female	3 DEATH DATE (Mo, Day, Yr) AUG 03, 2000
4 AGE LAST BIRTH DAY (Yr, Mo, Day)	5 UNDER 1 YEAR WKS DAYS HRS	6 UNDER 1 DAY HRS	7 BIRTH DATE (Mo, Day, Yr) OCT 09, 1910
8 BIRTH PLACE (City, State or Foreign Country) Enid, Oklahoma		9 WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes/No)	10 COUNTY OF DEATH Clark
11 CITY, TOWN, OR LOCATION OF DEATH Vancouver		12 PLACE OF DEATH - BOX FOR PLACE THEN GIVE ADDRESS OR INSTITUTION NAME 123 East 37th Street	
14 MARITAL STATUS - Married, Never married, Widowed, Divorced (Specify) Widowed		15 SURVIVING SPOUSE (If wife, give maiden name)	16 SOCIAL SECURITY NO.
18 USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED)		19 KIND OF BUSINESS OR INDUSTRY	20 Was Decedent of Hispanic origin or descent? (Ancestry) (Specify Yes or No. If Yes, specify Cuban, Mexican, Puerto Rican, etc.) No
22 RESIDENCE - NUMBER AND STREET 123 East 37th Street		23 CITY, TOWN, OR LOCATION Vancouver	21 RACE (Specify) White
24 INSIDE CITY LIMITS? (Yes/No) Yes		25A COUNTY Clark	26 STATE WA
28 FATHER'S NAME - FIRST, MIDDLE, LAST Ernest R. Davis		29 MOTHER'S NAME - FIRST, MIDDLE, MAIDEN SURNAME Olga C. Johnson	27 ZIP CODE 98663
30 INFORMANT - NAME Judith Ann Craine (daughter)		31 MAILING ADDRESS 123 East 37th St., Vancouver, Washington 98663	
32 BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		33 DATE (Mo, Day, Yr) AUG 8, 2000	34 CEMETERY, CREMATORY - NAME Evergreen Memorial Gardens Cemetery
36 FUNERAL DIRECTOR SIGNATURE <i>David R. Fuller</i>		37 NAME OF FACILITY Hamilton-Mylan Funeral Home, Inc.	
35 LOCATION - CITY/TOWN, STATE Vancouver, Washington		38 ADDRESS OF FACILITY 302 West 11th Street, Vancouver, Washington 98660	
30 TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED SIGNATURE AND TITLE <i>Geoff Richardson</i>		43 ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION, IN MY OPINION DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED SIGNATURE AND TITLE <i>Geoff Richardson</i>	
40 DATE SIGNED (Mo, Day, Yr) 8/7/00		41 HOUR OF DEATH (24 Hrs) 2020 HRS	44 DATE SIGNED (Mo, Day, Yr)
42 NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) Geoff Richardson MD, 100 East 33rd St., Suite 100, Vancouver, WA 98663		45 HOUR OF DEATH (24 Hrs)	46 HOUR PRONOUNCED DEAD (24 Hrs)
48 NAME AND ADDRESS OF CERTIFIER - PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print)		49 ME/CORONER FILE NUMBER	
50 ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH.			
IMMEDIATE CAUSE (Final disease or condition resulting in death) A. <i>Renal Failure</i>		INTERVAL BETWEEN ONSET AND DEATH 6 wks	
DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. Separately list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST.		INTERVAL BETWEEN ONSET AND DEATH	
B. DUE TO, OR AS A CONSEQUENCE OF		INTERVAL BETWEEN ONSET AND DEATH	
C. DUE TO, OR AS A CONSEQUENCE OF		INTERVAL BETWEEN ONSET AND DEATH	
D. DUE TO, OR AS A CONSEQUENCE OF		INTERVAL BETWEEN ONSET AND DEATH	
51 OTHER SIGNIFICANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVE ABOVE <i>CHF, HTN</i>		52 AUTOPSY? (Yes/No) No	53 WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes/No) Yes
54 ACC. SUICIDE, HON. UNDET. OR PENDING INVEST. (Specify) Natural	55 INJURY DATE (Mo, Day, Yr)	56 HOUR OF INJURY (24 Hrs)	57 DESCRIBE HOW INJURY OCCURRED
58 INJURY AT WORK? (Yes/No)	59 PLACE OF INJURY - AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG, ETC. (Specify)	60 LOCATION - STREET OR RFD NO., CITY/TOWN, STATE	
61 RECORD AMENDMENT (Registrar use only) ITEM DOCUMENTARY EVIDENCE REVIEWED BY DATE		63 DATE RECEIVED (Mo, Day, Yr) AUG 07 2000	



DOH 110-009 (Rev. 7/91) (formerly DSHS 9-150)

DOH 01-003 (5-99)

IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
FOR THE COUNTY OF CLARK

In Probate

In the Matter of the Estate)
) No. 01 4 00251 2
 of)
) LETTERS TESTAMENTARY
 GERALDINE RUTH CRAINE,)
)
 Deceased.)

FILED
APR 27 2001
JoAnne McBride, Clerk, Clark Co.

THIS CERTIFIES that the will of GERALDINE RUTH CRAINE, deceased, has been proved and WILLIAM CRAINE, JR., and JUDITH CRAINE have been and are at the date hereof duly appointed, qualified and acting CO-PERSONAL REPRESENTATIVES of the will and the estate of the decedent

IN WITNESS WHEREOF, I, as Clerk of the Superior Court of the State of Washington, for the County of Clark, in which proceedings for administration upon the estate are pending, do hereby subscribe my name as Clerk of the court this 27 day of April 2001



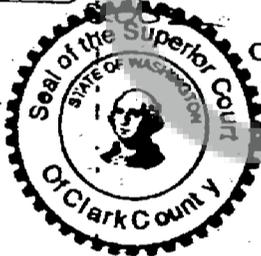
JOANNE McBRIDE
CLARK COUNTY SUPERIOR COURT

BY: *[Signature]*
COURT CLERK

STATE OF WASHINGTON)
) ss
County of Clark)

I, JOANNE McBRIDE, a Superior Court Clerk of the State of Washington for Clark County, do hereby certify that the foregoing copy of Letters Testamentary has been compared by me with the original, that it is a correct transcript therefrom and of the whole of such original Letters Testamentary, as the same appear on file and of record in my office and in my custody, and that said Letters are still in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of said Court this 25 day of Jan, 2001



JOANNE McBRIDE
CLARK COUNTY SUPERIOR COURT

[Signature]
COURT CLERK

EXHIBIT 'A'

A portion of the Southwest Quarter of the Northwest Quarter of Section 34, Township 2 North, Range 5 East of the Willamette Meridian, in the County of Skamania, State of Washington described as follows:

BEGINNING at a point of the West boundary line of Section 34, Township 2 North, Range 5 East of the Willamette Meridian where said boundary line intersects with the center of the Washougal River; thence Easterly, following the channel of said river 500 feet East of the West boundary to point of beginning of the tract herein conveyed, which point is also the Southeast corner of the Jack Pahud property; thence North parallel with the West boundary line of Section 34, 435 feet more or less, to a point in the center of a private road running Easterly and Westerly as now staked out and which point is 500 feet East of the West boundary of Section 34 and also the Northeast corner of the Jack Pahud property; thence Easterly along the center of said road 600 feet East of the West boundary of Section 34; thence South parallel with the West boundary line of Section 34, 435 feet more or less to a point in the center of the Washougal River, said point being 600 feet East of the West boundary of Section 34; thence Westerly following the center of the channel of the Washougal River 100 feet more or less to the point of beginning.

Gary H. Martin, Skamania County Assessor

Date 2-11-62 Parcel # 2-5-34-2-1600

[Signature]