Doc # 2006161443
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Date: 05/05/2006 09:27A
Filed by: SKAMANIA COUNTY TITLE
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$37.00

<b>AFTER RECORDING MAIL TO:</b>	
NameLenda_Leonardo	
Address 3215 River Road	
City/State Yakima, WA 98902	
Document Title(s): (or transactions contained therein)  1. AFFIDAVIT LACK OF PROBATE  2.  3.  4.  Reference Number(s) of Documents assigned or released	
Grantor(s): (Last name first, then first name and initials)  1. ELMO H. EMERSON  2.  3.  4.  5.  Additional names on page of document  Grantee(s): (Last name first, then first name and initials)  1. LENDA E. LEONARDO  2.  3.  4.  5.  Additional names on page of document  Abbreviated Legal Description as follows: (i.e. lot/block/plator 3 Block 7, Plat of Relocated North Bonne of Plats, Pages 13 and 29, in the County of	eville, recorded in Book B
Gary H. Martin, Skamania Oate <u>5/5/66</u> Parce	County Assessor 1 # 2-7 - 20-4-3-300
☐ Complete legal description is on page of d	ocument
Assessor's Property Tax Parcel / Account Number(s): (	02-07-20-4-3-0300-00

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.

# 10C # 20061614

# AFFIDAVIT Lack of Probate

State of Washington	
County of <u>Yakima</u>	
Lenda & Leonardo	, being first duly sworn, deposes and says:
• The second of	. 11
1. The undersigned affiant is the <u>Dana</u>	
Emerson, who died Sept. 3 (date of d	0 ,2001, at Uakima,
(date of d	eath) (year) (city)
State of then be	ing a legal resident of Makima
Makima Washing	for . (dily)
(county) (state)	
A PELANT MICT DOOUGE A DEA	TH CERTIFICATE OF NECEDEAT
AFFIANT MUST PROVIDE A DEA	TH CERTIFICATE OF DECEDENT
2. Check the appropriate box below:	
	4
[ ] Decedent and surviving spouse execu	uted a Community Property Agreement dated
, a cop	by of which is attached hereto.
E 1 Dans June 1-0 up 1-14 3000	
[ ] Decedent left no last Will.	
M Decedent left a last Will ruhish has n	neither been probated nor revoked; a copy of
which is attached hereto.	icities deen produced not revoked, a copy of
[ ] Decedent left a Will which was prob	pated in County, State
of A copy of	Fan Order Admitting Will to Probate, Decree
of Distribution or equivalent court docu	mentation is attached hereto.
·	
3. The heirs at law of the decedent, include the shill be a shill	
	hers and sisters, and any surviving parents are
as follows:	~ 1 0
EldA HOST FINERSON 53	3 Son ('Alitania
(age	(relationship) (residence)

## **HEIRS AT LAW** (continued)

Lead. & Lanca	do 55	Douglas	11.1.5 1.70
Jenda C-Jeonary	(age)	(relationship)	(residence)
But Box Poten	m 52	Day He	Mina Mag . JA
(fall hame)	(age)	(relationship)	(residence)
(2) 10m	ر در	_	
(full/name)	(age)	TANGER ER (relationship)	(residence)
Ç <del></del>	(101)		
(full name)	(age)	(relationship)	(residence)
(attach add	_ #	e for additional nam	) "
all expenses due to decedent'			
federal and state succession of	r inheritan	ce taxes have been i	fully paid, except as
follows:			
5. The decedent [>] had [ ] had	never rece	ived from the State	of Washington assistance
consisting of nursing facility			
hospital and prescription drug			

6. As of the date of death, the value of all community property of the decedent was

7. Other facts regarding the decedent, decedent's estate, or matters which pertain to the

\_\_\_. The value of all separate property of the

approximately \$ / 30,000

decedent was approximately \$

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.

Lenda & Leonardo Affiant's Full Name	
Affiant's Full Name	- Date
STATE OF WASHINGTON, } COUNTY OF YAKIMA } SS.	
On this day personally appeared before me known to be the individualdescribed in a instrument, and acknowledged thatShe	and who executed the within and foregoing
voluntary act and deed, for the use and purp GIVEN under my hand and official seal this	oses therein mentioned.
21 v 21 v unioù my mano and official sear (ins	Notary Public in and for the State of
SE SUDITE	Washington, residing at <u>VAKIMA</u> My appointment expires <u>May 31, 2007</u>



1246

# **Health**

146

		VERTIF	ICATE OF DEATI	•	STATE I OLE NUMBER
· -	HeS	Middle	Lagi	2, SEX (M/F)	3. DEATH DATE (Mrs. Day, Yr)
Elm	ER 1 YEAR   6. UNDER 1	H.	EMERSON YO G BRITISPLACE	Male	September 30,2
75 Mas	DAYS HUMES	MINS Oct. 6, 1925	(City, State or Forman Country)	9, WAS DECEC IN U.S. ARM (Yes / No)	Yakima
11. CITY TOWN OR LOCATION	OF DEATH	12. PLACE OF DEATH — I € HOME 2. ■ INTR	ED BOX FOR PLACE THEN GIVE ADDRESS OF MAISPORT 1. C FHERG. RIMOUT PTN 4. [] HOSP.	INSTITUTION NAME	THER PLACE 16 VEARS? (Year)
Yakima		Crescent	t Convalescent C	enter 🚽	Yes
14. MARITAL STATUS - Mennie Never married, Wildowed, Davorceu (Specify)	15. SURVIVINGS	BPOUSE (II WAR you nuight fants)	16. SOCIAL SECURITY	NO. 17.	DECEDENT'S EDUCATION Secury only regions grade completed)
Widowed				Elem	College (1-4 67 Se)
18, USUAL OCCUPATION (Give during most of working life.)	kind of work done 19	KIND OF BUSINESS OR INDUSTR	TY 20 Was Decement of Mispail Yes or No. If Yes, specifi	AC Only of descent? (A	recestry) (Specify Z1. PACE (Specify)
Farmer/Bark	. 1	Agriculture /	Hair (Yea/No) Specify		White
22. RESIDENCE - NUMBER A		23. CITY/IOWN, OR LIXEATION	1 24 NSICE CHY 254 COUNTY	25B LENGTH C	F 26. STATE 27. ZIP COOR
3300 Englev	rood #112	Yakima	Yes Yakima	2yrs	WA 98902
28. FATHER'S NAME - FIRST,			28 MOTHER'S NAME ~ FIRST	MIDOLE, MAIDEN SU	RNAME
Elda Emerso	n		Louis Lend	:h	
30. OPORMANT - NAME		31 MAILING ACC	77	WO7 20 1715	STATE 219
Lenda Leona		The second secon	River Rd., Yaki		98902
PEMOVAL, OTHER (Specify)	13. DATE (Mo. Day, Yri	34 CEMEIBRY CHEMAIORY	~ ~ ~		CITY/TOWN STATE
Cremation Octobron	T-4 ,2001	Terrace Heic	oths Mem. Park	Yakima 38. ACCRESS OF	·
x 1/-///	de -		ls Funeral Home	POB 12	
	COMPLETED ONLY BY CE				CAL CAMMEN ON COMPASS
MOTHE BEST OF MY	KNOWLEDGE, DEATH (	OCCURRED AT THE TIME DATE AN			STIGATION IN MY OPINION DEATH OCCURRED
SIGNATURE AND FITLE	Λ /	~~ ~ ~ `			
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GUERRES

# Tast Will and Testament

of

### **ELMO H. EMERSON**

KNOW ALL MEN BY THESE PRESENTS: That I, ELMO H. EMERSON, a resident of the State of Washington, of legal age, declare this to be my Last Will and hereby revoke all former Wills and Codicils by me made.

FIRST: I declare that I am a single person, and that I have four children, namely. LENDA E. LEONARDO, PATSY J. MENARD, BETTY L. PETERSON, and ELDA HOYT EMERSON, known as HOYT.

SECOND: I do hereby state that it is my intent to prepare a list separate from this Will for the purpose of disposition of tangible personal property, mementos and family heirlooms pursuant to RCW 11.12.260.

THIRD: Except as provided in the list described in Paragraph SECOND above or as otherwise hereinafter contingently provided, after the payment of all just claims against my Estate, all of the rest, residue and remainder of my property I give, devise and bequeath equally unto my four children, LENDA E. LEONARDO, PATSY J. MENARD, BETTY L. PETERSON, and ELDA HOYT EMERSON, known as HOYT, share and share alike; hereby providing that if any child or children of mine should die prior to the distribution of my estate, then said predeceasing child's share of my estate shall go to the heirs of said child's body, including children adopted by said child, share and share alike.

FIFTH: I hereby nominate and appoint my daughter, LENDA E. LEONARDO, as Personal Representative of my Estate, to serve without bond and I direct that this Will be probated as a non-intervention Will. I further authorize and direct said Personal Representative to sell, mortgage, lease or convey or otherwise deal with the property of my Estate in the same manner as I could do were I then living and whether or not it be necessary to do so in order to pay claims against my Estate or expenses of administration.

LAST WILL & TESTAMENT OF ELMO EMERSON - I



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