WHEN RECORDED RETURN TO:

DONALD Lew DAVIS
PO BOX 613
CARSON, WA 98610

Doc # 2006162444

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Date: 07/27/2006 08:38A

Filed by: DONALD LEW DAVIS

Filed & Recorded in Official Records
of SKAMANIA COUNTY

J. MICHAEL GARVISON

AUDITOR

Fee: \$35.06

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Last Will and Testament

BE IT KNOWN that I, Donald Lew Davis (Testator), a resident of 82 Vada Road, Carson, WA, 98610, County of Carson, in the State of Washington, being of sound and disposing mind and memory and over the age of eighteen (18) years, and not being actuated by any duress, menace, fraud, mistake or undue influence, do make, publish and declare this to be my Last Will and Testament, hereby revoking all my prior Wills and Codicils at any time made.

I. MARRIAGE AND CHILDREN:

I am not married. I have the following children:

Name:	Elisabeth Davis		Date of Birth:	7 May 1960
Name:	Diane Ruth Davis Deen		Date of Birth:	6 May 1961
Name:	Jefferson Dale Davis	A*. (Date of Birth:	30 July 1962
Name:	Becky Graham		Date of Birth:	25 April 1967

II. EXECUTOR:

I appoint Jefferson Dale Davis of 25918 NE 60th St, Vancouver, WA 98682, as Executor of this my Last Will and Testament and provide that if this Executor is unable or unwilling to serve, then I appoint Elisabeth Davis of Vancouver, WA as alternate Executor. My Executor shall be authorized to carry out all provisions of this Will and pay my just debts, obligations and funeral expenses. I further provide my Executor shall not be required to post surety bond in this or any other jurisdiction, and direct that no expert appraisal be made of my estate unless required by law.

III. BEQUESTS:

I direct that after payment of all my just debts, my property be bequeathed in the manner following:

Name: Jefferson Dale Davis	Address:	25918 NE 60 th ST, Vancouver, WA 98682
	,	Coins, swords, books, chess sets, all artifacts and
Relationship: Son	Property:	Egyptian antiquities,
Name: Diane Davis Dean Relationship: Daughter		Vancouver, WA Angel porcelain
Name: Danielle Scribner		Vancouver, WA
Relationship: Granddaughter	Property:	Frog porcelain
Name: Rose Caruthers Relationship: Friend	Address: Property:	Carson, WA Computer and peripherals

IV. SIMULTANEOUS DEATH OF BENEFICIARY:

If any beneficiary of this Will, including any beneficiary or any trust established by this Will, shall die within 60 days of my death or prior to the distribution of my estate, I hereby declare that I shall be deemed to have survived such person.

V. ALL REMAINING PROPERTY; RESIDUARY CLAUSE:

I give, devise and bequeath all of the rest, residue and remainder of my estate, of whatever kind and character, and wherever located, to my children per share, but if any child predeceases me, then his or her share will pass, per share, to my other named children; but if none of my named children survives me or leaves a lineal descendant who survives me, then according to the order of intestate succession in the State of Washington.

VI. ADDITIONAL POWERS OF THE EXECUTOR:

My Executor shall have the following additional powers with respect to my estate, to be exercised from time to time at my Executor's discretion without further license or order of any court. To decide the fair market value of all real goods in my estate and develop an equitable division of them amongst my heirs

VII. OPTIONAL PROVISIONS:

I have placed my initials next to the provisions below that I adopt as part of this Will. Any unmarked provision is not adopted by me and is not part of this Will.

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If any beneficiary to this Will is indebted to me at the time of my death, and the beneficiary evidences this debt by a valid Promissory Note payable to me, then such person's portion of my estate shall be diminished by the amount of such debt.



Any and all debts of my estate shall first be paid from my residuary estate. Any debts on any real property bequeathed in this Will shall be assumed by the person to receive such real property and not paid by my Executor.



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I direct that my remains be cremated and that the ashes be disposed of according to the wishes of my Executor.

 I direct that my remains be following manner:	e cremated	and that the	ashes be dispo	sed of in th
I desire to be buried in the	e cer	metery in	County,	State.

VIII. SEVERABILITY AND SURVIVAL

If any part of this Will is declared invalid, illegal or inoperative for any reason, it is my intent that the remaining parts shall be effective and fully operative, and that any Court so interpreting this Will and any provision in it construe in favor of survival.

Testator's Initials:	Della)	
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of 4	パククローロバルチャ

Execute and attest before a notary. IN WITNESS WHEREOF, I have hereunto set my hand this 24 200 6 , to this my Last Will and Testament.	b day of July,
Testator's Signature: Donald Menis	
IX. WITNESSED: The testator has signed this will at the end and on each other sedeclared or signified in our presence that it is his or her last will at the presence of the testator and each other we have hereunto sthis 26th day of July, 2006 Witness Signature: Manual Manual Witness' Signature: Monual Manual Water WA 98648 Witness' Signature: Address: Monual Manual Manua	and testament, and in ubscribed our names
Witness' Signature:Address:	
ACKNOWLEDGMENT State of Washington County of Skanadier	
We, Donald L. Davis, Monica Leonard, and Shonna Taylo witnesses, respectively, whose names are signed to the attache instrument, were sworn and declared to the undersigned that the instrument as his or her Last Will and that each of the witnesses testator and each other, signed the will as a witness. Testator: Witness: Witness:	ed and foregoing the testator signed the s, in the presence of the Market Derivation Ma
On July 26th 2006 before me, Lisa Allen, appeared Donald to me (or proved to me on the basis of satisfactory evidence to name is subscribed to the within instrument and acknowledged the same in his authorized capacity, and that by his signature of person, or the entity upon behalf of which the person acted, exercise the same in his authorized capacity, and that by his signature of person, or the entity upon behalf of which the person acted, exercise the same in his authorized capacity, and that by his signature of person, or the entity upon behalf of which the person acted, exercise the same in his authorized capacity.	be the person whose to me that he executed n the instrument the
WITNESS my hand and official seal.	NOTARY PUBLIC
Signature of Notary XIXA Y (, () () ()	LISA M. ALLEN
Affiant Produced ID	STATE OF WASHINGTON My Commission Expires Feb. 13, 2010
Type of ID (Seal)	