AFN #2010175298 Recorded 04/19/10 at 01:40 PM DocType: ALP Filed by: SKAMANIA COUNTY TITLE COMPANY Page: 1 of 5 Auditor Timothy 0. Todd Skamania County, WA

AFTER RECORDING RETURN TO: *CHARLENE K. WALKER *52 COOKHOUSE ROAD *WILLARD, WA 98605 Document Title(s): (or transactions contained therein) 1. LACK OF PROBATE AFFIDAVIT 2. 3. 4. Reference Number(s) of Documents assigned or released: ☐ Additional numbers on page _ Grantor(s): (Last name first, then first name and initials) 1. *Walker, Jeffrey Scot 2. 3. **REAL ESTATE EXCISE TAX** 4. 5. ☐ Additional names on page ____ of document 28504 Grantee(s): (Last name first, then first name and initials) APR 1 9 2010 1. *Walker, Charlene exemps 2. 3. 4. SKAMANIA/COUNTY TREASURER of document ☐ Additional names on page ___ Abbreviated Legal Description as follows: (i.e. lot/block/plat or section/township/range/quarter/quarter *LOT 2 OF PLAT OF WILLARD Skamania County Assessor of do Date ent4-19-10 Parcel 3-9-2-1-1-206 ☐ Complete legal description is on page

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

03-09-02-1-1-0200-00 (sv)

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LACK OF PROBATE AFFIDAVIT (STATE OF WASHINGTON) FOR SEPARATE PROPERTY, COMMUNITY PROPERTY, OR JOINT TENANCY PROPERTY
Title Insurance Commitment No.: 31736, County: Skamana
STATE OF Washington
COUNTY OF Klickitat, SS:
The undersigned, Charlene Key Walker, executes this affidavit relating to the estate
of Jeffrey Scott Walks (herein "Decedent"), who died on July 5, 1997, in
the County of Min I Harrah State of Oregon then being a resident of the City of
Willard County of Skannana State of WA
(A copy of the death certificate is attached hereto.)
The undersigned, being first duly swom, on oath deposes and says:
That the undersigned is (check one):
the lawful surviving spouse of the Decedent
Surviving child of the Decedent
Registered domestic partner of the Decedent
One of the joint tenants named in that certain instrument creating a joint tenancy with a right of
survivorship identified in that certain deed recorded on [mm/dd/yyyy], under
Recording No in County, Washington,
other (identify:)
That the undersigned has listed below all of the heirs at law and next of kin of Decedent, including but not
limited to: 1. spouse or registered domestic partner; and
2. children, adopted children, the issue of any predeceased child or adopted child (if
decedent left no surviving children, then the undersigned has listed below all of the surviving parents, brothers and sisters of decedent); and
3. all parties who would have been heirs at law if the decedent had not been married
or a registered domestic partner on the date of death:
That the heirs at law and next of kin of the decedent are (list all parties, using the reverse side or attaching a list if necessary):
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Lack of Probate Affidavit – State of Washington (\$108) Page 1 of 3 (Community property, Separate Property, Joint Tenancy Property)

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That immediately prior to the date of death the Decedent was an owner of the real estate described in the above referenced Title Insurance Commitment (herein the "Real Estate"), and that the Decedent's ownership interest was [check one]: Community property ☐ Separate property ☐ Joint tenancy property CHECK ALL BOXES WHICH APPLY IN EACH SEC That on the date the Real Estate was purchased the Decedent married to Charlene unmarried, not a registered domestic partner unmarried, a registered domestic partner of 2. That on the date of death the Decedent was: Married to unmarried, not a registered domestic partner unmarried, a registered domestic partner of 3. That the decedent left a Will, a copy of which is attached hereto. That the decedent left no Will, That the decedent executed a Community Property Agreement. It was recorded under County recording number. . (if unrecorded, attach a copy) That the decedent's estate is not being probated. That the decedent's estate is subject to probate proceedings in County, State , under Probate No. 5. That the estate of the decedent is exempt from State and/or Federal succession or inheritance taxes. That State and/or Federal succession or inheritance taxes in the amount of have been paid. Copies of the release/discharge are attached hereto. That State and/or Federal succession or inheritance taxes are due, but have not been paid. That the decedent has not received assistance from the State of Washington for medical care. That the decedent has received assistance from the State of Washington for medical care. That the State of Washington has been fully reimbursed for assistance for medical care. (This paragraph applies only if the Real Estate referred to above was owned by the Decedent in joint tenancy): That at all times from the date on which the joint tenancy was created to the death of the Decedent, each of the joint tenants recognized that the Real Estate was held in joint tenancy, and that the interest of no one or more of the joint tenants has ever been independently conveyed, encumbered or otherwise separated from the interest of the other joint tenant(s), either voluntarily or involuntarily, whether by specific act or by operation of law; and that the joint tenancy continued in full force until the death of the Decedent and, if there are two or

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more surviving joint tenants, including the undersigned, the joint tenancy continues in effect as to the interests of the surviving joint tenants.

That the undersigned knows of his/her own knowledge, and so states, that each and all of the obligations
against the estate of the Decedent (including, but not limited to: all the debts of decedent; all of the expenses of
Decedent's last illness, funeral and burial; promissory notes; installment contracts and mortgages; and state
and federal succession taxes upon Decedent's estate, if applicable) have been paid in full, except as follows
(use reverse side or attach a list if necessary): All pol None
That the value of the Decedent's estate at date of death, including all real and personal property, was
approximately \$ 131,000, including the value of community property of Decedent and Decedent's
surviving spouse or domestic partner, if any, of approximately \$ /3/,000, and including the value of
Decedent's separate property, if any, of approximately \$ \(\triangle A - O \), and including the full value of
all other property, if any, held by the Decedent in joint tenancy of approximately \$ \(\omega \beta - \omega \).
This affidavit is made to induce Skanania TITLE INSURANCE COMPANY (the
Company) to insure real property covered by the Company's commitment for title insurance number set forth
above, in which Decedent held an interest at the time of the Decedent's death. The undersigned urges the
Company to issue its policy of title insurance in full reliance upon the representations set forth herein. The
undersigned, for himself/herself and for the undersigned's heirs, executors and administrators, indemnifies the
Company or any other person, including a purchaser of the Real Estate, for any loss arising from reliance on
any misstatement of fact herein.
DATED: 4-15 20/12
Ol a silver of the silver of t
Charles Walky To helacke Williams
Charlene Walker Kohrbachan NOTARLED
(Prim or type full name)
(Bull address and telephone pumples)
Willard, WA 98605 11 23,20 01
SOBSCRIBED and SWORN TO before me this 5 day of April 20 WASHINGTON
THALL ANGUE STATE
Notary Public in and for the State of Washington, residing at White Salamon
Ex 09.23.2012

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

high clustic adams, MPH

HILDA CHASKI ADAMS, MPH COUNTY REGISTRAR MULTNOMAH COUNTY, OREGON



DATE ISSUED: JUL 2 9 1997