

WHEN RECORDED RETURN TO:
James G. Buehling
PO, Box 1453
CLATSkanie, OR 97016

REAL ESTATE EXCISE TAX

29495

APR 19 2012

PAID *exempt*
William C. Belland
SKAMANIA COUNTY TREASURER

DOCUMENT TITLE(S)
Death Certificate / ALP

REFERENCE NUMBER(S) of Documents assigned or released:

☐ Additional numbers on page _____ of document.

GRANTOR(S):
Virginia H. Buehling

☐ Additional names on page _____ of document.

GRANTEE(S):
JAMES G. Buehling

☐ Additional names on page _____ of document.

LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter):
The Northeast Quarter of The Northeast Quarter of The Northeast 1/4 of The Southeast 1/4 of Section 27 Township 4N Range 7E East of the Willamette Meridian. Skamania Cty. Wash.
☐ Complete legal on page _____ of document. EXEMPTING PORTIES AS RECORDED IN

TAX PARCEL NUMBER(S): *DRY PPSC at Skamania Cty Auditors Records*
04072700150000

☐ Additional parcel numbers on page _____ of document.

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information.

I am requesting an emergency nonstandard recording for an additional fee as provided in RCW 36.18.010. I understand that the recorded processing requirements may cover up or otherwise obscure some part of the text of the original document.

Company Name: _____

Signature/Title: _____

CERTIFICATION OF VITAL RECORD

OREGON HEALTH AUTHORITY
CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH

H103170

I.D. TAG NO.

STATE FILE NUMBER

1. Legal Name First Virginia Middle Helen Last Buehling		2. Death Date September 23, 2011	
3. Sex Female	4. Age 73 years	5. Social Security Number	
6. County of Death Columbia	7. Birthdate April 20, 1938		
8. Birthplace Forest Grove, Oregon		9. Decedent's Education High school grad. or GED	
10. Was Decedent of Hispanic Origin? No		11. Decedent's Race(s) White	
12. Was Decedent Ever in U.S. Armed Forces? No		13. Residence: Number and Street 19206 Beaver Falls Road	
14. City/Town Clatskanie		15. Residence County Columbia	
16. State or Foreign Country Oregon		17. Zip Code + 4 97016	
18. Inside City Limits? No		19. Marital Status at Time of Death Married	
20. Spouse's Name Prior to First Marriage James G. Buehling		21. Usual Occupation Banker	
22. Kind of Business/Industry Banking		23. Father's Name Unknown	
24. Mother's Name Prior to First Marriage Unknown		25. Informant's Name James G. Buehling	
26. Telephone Number Not Available		27. Relationship to Decedent Spouse	
28. Mailing Address 19206 Beaver Falls Road, Clatskanie, OR 97016		29. Place of Death Decedent's Residence - Hospice	
30. Facility Name		31. Location of Death 19206 Beaver Falls Road	
32. City/Town or Location of Death Clatskanie		33. State Oregon	
34. Zip Code + 4 97016		35. Method of Disposition Donation and cremation	
36. Place of Disposition Portland Cremation Center, LLC		37. Location Portland, Oregon	
38. Name and Complete Address of Funeral Facility Portland Mortuary Services		39. Date of Disposition TBD	
40. Funeral Director's Signature G. Craig Collins		41. OR License Number FS-0500	
42. Registrar's Signature Elizabeth E. Huser		43. Date Received October 13, 2011	
44. Local File Number #172		45. Amendment	
46. Was case referred to Medical Examiner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		47. Autopsy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
48. Were autopsy findings available to complete the cause of death? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		49. Time of Death 1120	
CAUSE OF DEATH			
60. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT ENTER TERMINAL EVENTS such as cardiac arrest, respiratory arrest or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.			
Final disease or condition resulting in death →			
Due to (or as a consequence of) →			
Due to (or as a consequence of) →			
Due to (or as a consequence of) →			
61. Other significant conditions contributing to death, but not resulting in the underlying cause given above: DM, HTN			
62. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Undetermined <input type="checkbox"/> Suicide <input type="checkbox"/> Pending			
63. If Female <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Unknown if pregnant within the past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days before death			
64. Did tobacco use contribute to death? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown			
65. Date of Injury (month/year) N/A			
66. Time of Injury			
67. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)			
68. Injury at Work? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown			
69. Location of Injury (Number & Street or RFD No., City/Town, State, Zip + 4) N/A			
70. Describe how Injury occurred N/A			
71. If transportation injury, specify. <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify)			
72. Name and Address of Certifier (Number & Street or RFD No., City/Town, State, Zip + 4) Dexter James DeGuzman Asuncion, 748 14th Ave., Longview, WA. 98632			
73. Name and Title of Attending Physician if Other than Certifier			
74. Title of Certifier MD			
75. License Number MD65610549			
76. Date Signed (month/year) 10/14/11			
77. Medical Certifier - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.			
78. Medical Examiner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.			
79. Amendment			

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

DATE ISSUED:

Oct 13, 2011

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER.

ELIZABETH E. HUSER
COUNTY REGISTRAR
COLUMBIA COUNTY, OREGON

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

LACK OF PROBATE AFFIDAVIT (STATE OF WASHINGTON)
FOR SEPARATE PROPERTY, COMMUNITY PROPERTY, OR JOINT TENANCY PROPERTY

Title Insurance Commitment No.: _____, County: _____

STATE OF Washington)

SS:

COUNTY OF Skamania)

The undersigned, James G. Buehling, executes this affidavit relating to the estate of Virginia H. Buehling (herein "Decedent"), who died on 09-23-2011, in the County of Columbia, State of Oregon, then being a resident of the City of Clatskanie, County of Columbia, State of Oregon.

(A copy of the death certificate is attached hereto.)

The undersigned, being first duly sworn, 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):

Name & relationship Renee J Epperly (Daughter)
Address: 2193 Willamette Falls Drive, West Linn, Oregon 97068
Name & relationship Jason W. Buehling (Son)
Address: 2193 Willamette Falls Drive, West Linn, Oregon 97068
Name & relationship Michelle L. Olsen (Daughter)
Address: Unknown address
Name & relationship _____
Address: _____
Name & relationship _____
Address: _____

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 SECTION:

- 1. That on the date the Real Estate was purchased the Decedent was:
 - ☒ married to Virginia H. Buehling
 - ☐ unmarried, not a registered domestic partner
 - ☐ unmarried, a registered domestic partner of _____
- 2. That on the date of death the Decedent was:
 - ☒ married to James G. Buehling
 - ☐ 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)*
- 4. ☒ That the decedent's estate is not being probated.
 - ☐ That the decedent's estate is subject to probate proceedings in _____ County, State of _____, 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.
- 5. ☐ 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

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): _____

That the value of the Decedent's estate at date of death, including all real and personal property, was approximately \$ 100,000.00, including the value of community property of Decedent and Decedent's surviving spouse or domestic partner, if any, of approximately \$ _____, and including the value of Decedent's separate property, if any, of approximately \$ _____, and including the full value of all other property, if any, held by the Decedent in joint tenancy of approximately \$ _____.

This affidavit is made to induce _____ 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: December 20, 2011

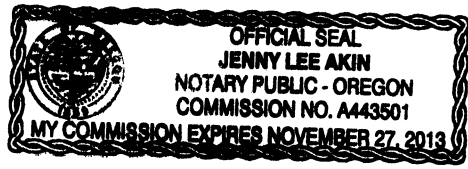
James G. Buehling
(Signature)

James G. Buehling
(Print or type full name)

PO Box 1453 (19206 Beaver Falls Rd.)
Clatskanie, OR 97016
(Full address and telephone number)

SUBSCRIBED and SWORN TO before me this 20 day of December, 2011

Jenny Lee Akin
Notary Public in and for the State of
Washington, residing at Sterling Savings Bank



FORM No. 100 - DEED CREATING AN ESTATE BY THE ENTIRETY - Husband to Wife or Wife to Husband. COPYRIGHT 1983 STEVEN MESS LAW FIRM, P.C. PORTLAND, OR 97208

NA 125623 DEED CREATING ESTATE BY THE ENTIRETY BOOK 158 PAGE 113

KNOW ALL MEN BY THESE PRESENTS, That Virginia H. Buehling, formerly Virginia H. Abrahams, hereinafter called the grantor, the spouse of the grantee hereinafter named, for the consideration hereinafter stated, has bargained and sold and by these presents does grant, bargain, sell and convey unto James G. Buehling, hereinafter called the grantee, an undivided one-half of the following described real property situated in Skamania County, Washington, to-wit:

The Northeast Quarter of the Northeast Quarter of the Northeast Quarter of the Southeast Quarter of Section 27, Township 4, Range 7, East of the Willamette Meridian, Skamania County, Washington. Excepting that portion as recorded in Book 7, page 56 of Skamania County Auditors Records. REAL ESTATE EXCISE TAX

Skamania County Assessor 18161
Date 4-19-12 Parcel 4-7-27-1508 JUL 1 1993
PAID Exempt
SW

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE) together with all and singular the tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining;

TO HAVE AND TO HOLD an undivided one-half of the above described real property unto the grantee forever. The above named grantor retains a like undivided one-half of that same real property, and it is the intent and purpose of this instrument to create and there hereby is created an estate by the entirety between husband and wife as to this real property.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$None. However, the actual consideration consists of or includes other property of value given or promised which is the whole consideration (indicate which). (The sentence between the symbols @, if not applicable, should be deleted. See ORS 93.030.)

WITNESS grantor's hand this 26th day of May, 1995.
THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.900.

STATE OF OREGON, County of Skamania.
This instrument was acknowledged before me on May 26th, 1995, by James G. Buehling.



Corinna Nelson
Notary Public for Oregon
My commission expires 1-15-97

Grantor's Name and Address

After recording return to Phone, Address, Zip:
Y James & Virginia Buehling
955 Montgomery
Coe's Bay, OR 97420
Mail requested attach and fill out stamp to Phone, Address, Zip:
X James & Virginia Buehling
955 Montgomery
Coe's Bay, OR 97420

FILED FOR RECORD STATE OF OREGON,
SKAMANIA CO. WASH
BY James Buehling County of _____
I certify that the within instrument was received for record on the 11 day of July, 1995 at _____ o'clock _____ M., and recorded in book/reel/volume No. _____ page _____ or as fee/file/instrument/microfilm/reception No. _____
Record of Deeds of said County.
Witness my hand and seal County attested.
NAME _____ TITLE _____
By _____ Deputy _____
GARY H. OESON
Auditor
9-1-96
9-27-1520

LAST WILL AND TESTAMENT

OF

VIRGINIA BUEHLING

I, VIRGINIA BUEHLING, of Coos Bay, Coos County, Oregon, do hereby make, publish and declare this to be my Last Will and Testament, and do hereby revoke all Wills and Codicils heretofore made by me.

1. I direct my personal representative to pay from my estate all inheritance, estate, transfer and succession taxes which become payable by reason of my death, with authority to contest or compromise any claims for such taxes. I further direct that all such taxes shall be paid without apportionment thereof and without withholding or collecting any part thereof from any beneficiary under my Will, or under any life insurance of mine which may be subject to such tax, or from the surviving owner of any property owned jointly with me, it being my intention that all such taxes shall be paid from my estate as an expense of administration.

2. I direct my personal representative to pay from my estate all my just debts, the expenses of my last illness and funeral and final interment and the expenses of administration of my estate.

3. I declare that I am the wife of JAMES G. BUEHLING, and that the names of our children are: MICHELLE L. BUEHLING, RENEE J. BUEHLING, and JASON W. BUEHLING.

I intend by this Will to remember all my children,

and also the issue whether now or hereafter born of any child of mine who may predecease me. I declare that all persons related to me by a chain of relationship any step or steps of which are created by legal adoption, shall be considered as related to me in the same degree as though all steps in the chain of relationship were by natural blood.

4. I give and bequeath unto my said husband any interest I may have in the household goods and furnishings in our home, my automobile or automobiles, and all my personal jewelry, clothing and other articles of personal or domestic use or ornament, together with all unexpired insurance on all such personal property. If my said husband shall have predeceased me, I give and bequeath such property to my children surviving at my death, to be divided among them as they shall agree.

5. I hereby give, bequeath and devise all the rest, residue and remainder of my estate unto my husband if he survives me. In the event my said husband fails to survive me, I hereby give, bequeath and devise all the rest residue and remainder of my estate to:

A. My children in equal shares.

B. In the event one or more of my children shall predecease me, then their shares shall become part of the whole of my residuary estate to be divided equally among my remaining children.

C. In the event all of my children and my husband predecease me, to RONALD and JUDY BRUELAND, 6574 Lawrence Road, Everson, Washington 98247.

6. If my husband, JAMES G. BUEHLING, and I die in a common disaster, or if my husband dies within sixty (60) days after my death, all of the provisions of this Will, for his benefit shall lapse and this Will shall be construed as though my husband predeceased me.

7. In the event it becomes necessary that a guardian or conservator be appointed for the persons or estates of any of my children, and my spouse is unable to serve, I hereby appoint RONALD and JUDY BRUELAND, or the survivor thereof, as such guardian or conservator.

8. I hereby appoint my said husband, JAMES G. BUEHLING, to be personal representative of my estate, and direct that he serve as such without being required to give any bond or undertaking whatsoever. In the event that my husband shall have predeceased me or is unable or unwilling to serve, I hereby appoint RONALD and JUDY BRUELAND as personal representatives of my estate and Trustee of the trust created herein, and direct that they serve as such without being required to give any bond or undertaking whatsoever.

9. I direct that any and all fiduciaries appointed by me or necessary for the administration of my estate shall be permitted to serve as such without being required to give any bond or undertaking whatsoever.

10. I hereby empower my said personal representative to lease, encumber, sell, exchange or otherwise deal with or dispose of all my property, real or personal, or any part thereof, in such manner, at such times, and upon such terms as to

my personal representative shall seem for the interest of my estate. Such sale or other disposition may and shall be made without any reference to the order of disposition of real and personal property, and without any petition, citation, hearing, order or any other action, and may be at private or public sale as to my personal representative may seem advisable.

IN WITNESS WHEREOF, I have signed and do declare this instrument to be my Will this 12 day of November, 1979.

/s/ Virginia Buehling
VIRGINIA BUEHLING

THE FOREGOING INSTRUMENT consisting of four (4) pages, including this page, each page initialed by the above-named VIRGINIA BUEHLING was by the said VIRGINIA BUEHLING on the date hereof, signed, published and declared to be her Last Will and Testament in the presence of us, who saw the said VIRGINIA BUEHLING sign this instrument and heard her declare it to be her Will, and who, at her request and in her presence and in the presence of each other, have hereunto subscribed our names as witnesses thereto.

/s/ Sue Lafferty address Rt. 1, Box 1934A, Bandon, OR

/s/ Karen Griffin address 2129 17th, North Bend, OR

/s/ Mike Stebbins address 462 Simpson, North Bend, OR

A F F I D A V I T

STATE OF OREGON)
) ss:
 County of Coos)

THIS DAY PERSONALLY APPEARED before the undersigned authority, Sue Lafferty, Karen Griffin, and Mike Stebbins, who, having been first duly sworn, did depose and say:

That they are the same persons who subscribed their names as witnesses to the annexed Will of VIRGINIA BUEHLING bearing the date of the 12 day of November, 1979; that the testatrix signed and acknowledged the paper writing as and for her Will in their presence; that at the time the testatrix was of sound and disposing mind and memory and over the age of eighteen (18) years; that, at the request of the testatrix, they signed their names to the paper writing in the presence of the testatrix and in the presence of each other as attesting witnesses, and that they are making this Affidavit at the request of the testatrix to be offered into evidence when the Will is presented for probate.

/s/ Sue Lafferty

/s/ Karen Griffin

/s/ Mike Stebbins

Subscribed and sworn to before me this 12 day of November, 1979.

/s/ Lieselotte Schmidt
 Notary Public for Oregon
 My Commission Expires: 11-1-83

FORM No. 100 - DEED CREATING AN ESTATE BY THE ENTIRETY - Husband to Wife or Wife to Husband

125623

DEED CREATING ESTATE BY THE ENTIRETY BOOK 158 PAGE 113

KNOW ALL MEN BY THESE PRESENTS, That Virginia H. Buehling, formerly Virginia H. Abrahams, hereinafter called the grantor, the spouse of the grantee hereinafter named, for the consideration hereinafter stated, has bargained and sold and by these presents does grant, bargain, sell and convey unto James G. Buehling, hereinafter called the grantee, an undivided one-half of the following described real property situated in Skamania County, Washington, to-wit:

The Northeast Quarter of the Northeast Quarter of the Northeast Quarter of the Southeast Quarter of Section 27, Township 4, Range 7, East of the Willamette Meridian, Skamania County, Washington. Excepting that portion as recorded in Bk Y, pg 56 of Skamania County Auditors Records.

REAL ESTATE EXCISE TAX 18161 JUL 1 1996 PAID Exempt

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

together with all and singular the tenements, hereditaments, and appurtenances therunto belonging or in anywise appertaining:

TO HAVE AND TO HOLD an undivided one-half of the above described real property unto the grantee forever. The above named grantor retains a like undivided one-half of that same real property, and it is the intent and purpose of this instrument to create and there hereby is created an estate by the entirety between husband and wife as to this real property.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ None. However, the actual consideration consists of or includes other property of value given or promised which is the whole part of the consideration (indicate which) (The sentence between the symbols @, if not applicable, should be deleted. See ORS 93.030.) WITNESS grantor's hand this 26th day of May, 1995.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.030.

STATE OF OREGON, County of Skamania
This instrument was acknowledged before me on May 26th, 1995, by James Buehling and Virginia Buehling
Cynthia Nixon
Notary Public for Oregon
My commission expires 1-19-97

OFFICIAL SEAL
CYNTHIA NIXON
NOTARY PUBLIC - OREGON
COMMISSION #150-021242
BY COMMISSION EXPIRES JAN. 19, 1997

FILED FOR RECORD STATE OF OREGON, SKAMANIA CO. WASH BY James Buehling County of Skamania
I certify that the within instrument was received for record on the 11th day of July, 1995 at 11:14 AM o'clock AM, and recorded in book/reel/volume No. 158-113 page 113 or in fee file/instrument/microfilm/reception No. 158-113-113 Record of Deeds of said County. Witness my hand and seal County attested.

AUDITOR GARY M. OLSON
By Gary M. Olson TITLE Deputy

Grantor's Name and Address
Grantor's Name and Address
After recording return to Grantor, Address, Zip:
Y James & Virginia Buehling
955 Montgomery
Cross Bay, OR 97420
Mail separated return and all fee statements to Grantor, Address, Zip:
X James & Virginia Buehling
955 Montgomery
Cross Bay, OR 97420

FORM No. 100 - DEED CREATING AN ESTATE BY THE ENTIRETY - Husband and Wife or Wife to Husband. COPYRIGHT 1983 STEVENS & LAM PUBLISHING CO. PORTLAND, OR 97204

NA **125623** DEED CREATING ESTATE BY THE ENTIRETY **BOOK 158 PAGE 113**

KNOW ALL MEN BY THESE PRESENTS, That Virginia H. Buehling, formerly Virginia H. Abrahams, hereinafter called the grantor, the spouse of the grantee hereinafter named, for the consideration hereinafter stated, has bargained and sold and by these presents does grant, bargain, sell and convey unto James G. Buehling, herein called the grantee, an undivided one-half of the following described real property situated in Skamania County, Washington

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REAL ESTATE EXCISE TAX **19161** JUL 1 1996 PAID Exempt SW

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

together with all and singular the tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining:

TO HAVE AND TO HOLD an undivided one-half of the above described real property unto the grantee forever. The above named grantor retains a like undivided one-half of that same real property, and it is the intent and purpose of this instrument to create and there hereby is created an estate by the entirety between husband and wife as to this real property.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$None

However, the actual consideration consists of or includes other property of value given or promised which is the whole part of the consideration (indicate which) 0 (The sentence between the symbols 0, if not applicable, should be deleted. See ORS 91.030.)

WITNESS grantor's hand this 26th day of May, 1995

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STATE OF OREGON, County of Skamania

This instrument was acknowledged before me on May 26th, 1995

James Buehling Corinna Nicos
Notary Public for Oregon
My commission expires 1-19-97

OFFICIAL SEAL
CORINNA NICOS
NOTARY PUBLIC - OREGON
COMMISSION NO. 021242
MY COMMISSION EXPIRES JUL 12, 1997

FILED FOR RECORD STATE OF OREGON
SKAMANIA CO. WASH
BY James Buehling County of Skamania

I certify that the within instrument was received for record on the Jul 1 day of July, 1996 at 11:10 AM o'clock AM, and recorded in book/reel/volume No. 158 page 113 or in fee/file/instrument/microfilm/reception No. 158-113 Record of Deeds of said County.

Witness my hand and seal County attested.

By GARY H. OLSON TITLE Deputy

County's Name and Address
County's Name and Address
After recording return to Office, Address, City:
Y James & Virginia Buehling
955 Montgomery
Cross Bay, OR 97420
Mail (optional) return and all fee statements to (Name, Address, City):
Y James & Virginia Buehling
955 Montgomery
Cross Bay, OR 97420

MAILED
SEARCHED
INDEXED
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FORM No. 100 - DEED CREATING AN ESTATE BY THE ENTIRETY - Husband and Wife or Wife to Husband

125623 DEED CREATING ESTATE BY THE ENTIRETY BOOK 158 PAGE 113

KNOW ALL MEN BY THESE PRESENTS, That Virginia H. Buehling, formerly Virginia H. Abrahams, hereinafter called the grantor, the spouse of the grantee hereinafter named, for the consideration hereinafter stated, has bargained and sold and by these presents does grant, bargain, sell and convey unto James G. Buehling, herein called the grantee, an undivided one-half of the following described real property situated in Skamania County, Washington, to-wit:

The Northeast Quarter of the Northeast Quarter of the Northeast Quarter of the Southeast Quarter of Section 27, Township 4, Range 7, East of the Willamette Meridian, Skamania County, Washington. Excepting that portion as recorded in bk Y, pg 56 of Skamania County Auditors Records.

REAL ESTATE EXCISE TAX 18161 JUL 1 1996

Paid Exempt

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

together with all and singular the tenements, hereditaments, and appurtenances thereto belonging or in anywise appertaining:

TO HAVE AND TO HOLD an undivided one-half of the above described real property unto the grantee forever. The above named grantor retains a like undivided one-half of that same real property, and it is the intent and purpose of this instrument to create and there hereby is created an estate by the entirety between husband and wife as to this real property.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$None

However, the actual consideration consists of or includes other property of value given or promised which is the whole consideration (indicate which) (The sentence between the symbols @, if not applicable, should be deleted. See ORS 93.030.)

WITNESS grantor's hand this 26th day of May, 1995

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LANDS USES AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930.

STATE OF OREGON, County of Skamania

This instrument was acknowledged before me on May 26th, 1995.

James Buehling

Notary Public for Oregon

My commission expires 1-19-97

OFFICIAL SEAL
CORINNA NIXON
NOTARY PUBLIC - OREGON
COMMISSION NO. 021242
MY COMMISSION EXPIRES 01-19-97

FILED FOR RECORD STATE OF OREGON,
SKAMANIA CO. WASH
BY James Buehling County of Skamania

JUL 1 11 14 AM '96

I certify that the within instrument was received for record on the day of 1996 at o'clock M., and recorded in book/reel/volume No. page or as fee/file/instrument/microfilm/reception No. Record of Deeds of said County.

Witness my hand and seal County attested.

NAME TITLE
By Deputy

James & Virginia Buehling
955 Montgemery
Cres Bay, OR 97420

James & Virginia Buehling
955 Montgemery
Cres Bay, OR 97420

Notary Public for Oregon
GARY M. OLSON
AUDITOR

Notary Public for Oregon
GARY M. OLSON

FORM No. 100 - DEED CREATING AN ESTATE BY THE ENTIRETY - Husband to Wife or Wife to Husband. COPYRIGHT 1983 STEVEN M. LAW PUBLISHING CO. PORTLAND, OR 97204

NA 125623 DEED CREATING ESTATE BY THE ENTIRETY BOOK 158 PAGE 113

KNOW ALL MEN BY THESE PRESENTS, That Virginia H. Buehling, formerly Virginia H. Abrahams, hereinafter called the grantor, the spouse of the grantee hereinafter named, for the consideration hereinafter stated, has bargained and sold and by these presents does grant, bargain, sell and convey unto James G. Buehling, hereinafter called the grantee, an undivided one-half of the following described real property situated in Skamania County, Washington, to-wit:

The Northeast Quarter of the Northeast Quarter of the Northeast Quarter of the Southeast Quarter of Section 27, Township 4, Range 7, East of the Willamette Meridian, Skamania County, Washington. ----- Excepting that portion as recorded in Bk Y, pg 56 of Skamania County Auditors Records.

REAL ESTATE EXCISE TAX 19161 JUL 1 1996 PAID Example SW

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)


together with all and singular the tenements, hereditaments, and appurtenances thereto belonging or in anywise appertaining:

TO HAVE AND TO HOLD an undivided one-half of the above described real property unto the grantee forever. The above named grantor retains a like undivided one-half of that same real property, and it is the intent and purpose of this instrument to create and there hereby is created an estate by the entirety between husband and wife as to this real property.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$None.
However, the actual consideration consists of or includes other property of value given or promised which is the whole of the consideration (indicate which) (The sentence between the symbols @, if not applicable, should be deleted. See ORS 93.030.)
WITNESS grantor's hand this 26th day of May, 1995.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.030.

STATE OF OREGON, County of Skamania
This instrument was acknowledged before me on May 26th, 1995, by James G. Buehling and Virginia H. Buehling.

 Courtna Niles
Notary Public for Oregon
My commission expires 1-19-97

FILED FOR RECORD STATE OF OREGON, SKAMANIA CO. WASH BY James G. Buehling County of Skamania
I certify that the within instrument was received for record on the Jul 1 day of July, 1996 at 11:10 AM o'clock AM, and recorded in book/reel/volume No. 158 page 113 or in fee/file/instrument/microfilm/reception No. 97420 Record of Deeds of said County.
Witness my hand and seal County attized.

By GARY H. OLSON Auditor
NAME GARY H. OLSON TITLE Auditor
By James G. Buehling Deputy

County's Name and Address
County's Name and Address
After recording refer to Phone, Address, City:
Y James & Virginia Buehling
955 Montgomery
Cross Bay, OR 97420
After recording attorney send all fee statements to (Phone, Address, City):
X James & Virginia Buehling
955 Montgomery
Cross Bay, OR 97420