AFN #2014002133 Recorded 12/11/2014 at 10:11 AM DocType: LW&T Filed by: Neil Shawn Basford Page: 1 of 3 Auditor Timothy O. Todd Skamania County, WA

WHEN RECORDED RETURN TO:  Neil Basford					
Po Box	612	<del>.</del>			
Carson,	$\omega_A$	98610			

DOCUMENT TITLE(S)
Last Will
REFERENCE NUMBER(S) of Documents assigned or released:
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LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter):
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## Last Will

## of

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NEIL SHAWN BASFORD					
I, NEIL SHAWA BASTORD , being of legal age and of sound and disposing mind, memory, and understanding, and not acting under fraud, duress or the undue influence of any person whomsoever, do hereby make, publish and declare this to be my Last Will, and I do hereby expressly revoke any and all former wills and codicils by me made.					
ARTICLE I					
I hereby declare that I am a/an unmarried/married man/woman (delete inappropriate selections), and that the name of my living spouse, if any, is The name(s) of my living child(ren) is/are (if none, so state):					
My nearest living relatives, and their relationship to me, are (if none, so state): JOESPH EDWARD BASFORD (BROTHER)					
ARTICLE II  I direct that all of my just debts, expenses of last illness, funeral expenses and all proper claims and charges against my estate be paid as soon as may conveniently be done after my death.  ARTICLE III  I give and devise the following sum(s) of money and/or specific items of property in the following manner:  RECIPIENT  MONEY OR PROPERTY DEVISED  AOUS FORD TAURES					
Any bequest listed above in favor of a person or organization not living or in existence at the time of my death shall lapse, and the money and/or property so devised shall become a part of my estate residue.  ARTICLE IV  1 give and devise all of the rest and residue of my estate, of whatsoever nature and wherever it may be found, as follows:					
(OVER)					

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If any surviving child of mine is less than 18 years of age of the survivor thereof the unable or unwilling to so serve, then and in that event I nomine or the survivor thereof, as alternate guardian(s).	of, as guardian(s) of any su	I nominate and appoint uch child. Should the foreg	coing person(s)
I hereby nominate and appoint ROBBE L.  my estate. Should he/she be unable or unwilling to so serve, the BASFORD as alternate personal representation as alternate personal representations.	n and in that event I nomi entative. Either person na	amed in this Article may so	PH E.
IN WITNESS WHEREOF, I have hereunto set my hand on (date)	x Nail S.	Bashord	STATE
$\sim$ $\sim$ $\sim$	NEIL S. P	TYPE OR PRINT NAME	
WITNESS SIGNATURES:  Audi	1507 STATION	MASHING OF THE CAP.	lissa A. Anclersa Stak rtary 8-19-16
This instrument was, on the above date, signed by 114 his/her Will. At his/her request and in his/her presence, and in the ing witnesses. At the time this Will was signed, we believe that ing voluntarily and not under fraud, duress or undue influence.		we have signed our names of sound mind and memor	lared this to be hereto as attest- ry and was act-
	Melissa WITNES	WITNESS SIGNATURE SS, NAME (TYPED OR PRINTED)	ion
	346 NW , Stevense	KODSKYCLY S ADDRESS M LJA STA	4. 98648 TE ZIP
		WITNESS SIGNATURE	
	NATHAN (WITNES	SS NAME (TYPED OR PRINTED)  VAN COUVER  ADDRESS	AUE
	STEVENSON	L WA- STA	98648 TE ZIP

While legally effective if properly completed and executed, this will form does not represent your only estate planning option. The publisher strongly recommends that you consult an attorney in connection with planning your estate, particularly if you desire to leave property in trust for others, such as children not of majority age.

<sup>\*</sup> If you wish to require your personal representative to post a bond, delete this sentence.