

WHEN RECORDED RETURN TO:

Mollie McAdams
16847 NW Countryridge Drive
Portland, OR 97229

DOCUMENT TITLE(S):

Lack of Probate Affidavit

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

THE GRANTOR:

Morris Edward Jones

SKAMANIA COUNTY
REAL ESTATE EXCISE TAX
32151
OCT 17 2016

THE GRANTEE:

To The Public

PAID *Exempt*
Deputy
SKAMANIA COUNTY TREASURER

LEGAL DESCRIPTION:

Lot 1 of MF7 WACOMAC REPLAT SHORT PLAT, recorded in Book T of Short Plats, Page 116, records of Skamania County, Washington.

TAX PARCEL NUMBER(S):

02-07-29-2-2-2100-00

Skamania County Assessor
Date *10-17-16* Parcel# *2-7-29-2-2-2100*
Am

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

Title Insurance Commitment No.: 516-0200JACounty: SkamaniaSTATE OF WA)

SS:

COUNTY OF SKAMANIA)

MOLLIE M. MCADAMS (herein, "Affiant"), being first duly sworn, on oath deposes and says:

That Affiant 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): _____

All with respect to the estate of MORRIS E. JONES (herein "Decedent"), who died on 10/5/14, in the County of TEXAS, State of MISSOURI, then being a resident of the City of KELSO, County of COWLITZ, State of WA. (A copy of the death certificate is attached hereto.)

That Affiant has herein below identified each and all of the heirs at law and next of kin of decedent, including but not limited to children, adopted children, the issue of any predeceased child or adopted child (if decedent left no surviving children, then Affiant has listed below all of the surviving parents, brothers and sisters of decedent), spouse, registered domestic partner, and *including 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 KIRK JONES - SON

Address: 12320 SW DENFIELD ST Beaverton OR 97005

Name & relationship MOLLIE M. MCADAMS - DAUGHTER

Address: 16847 NW COUNTRYRIDGE DR, PORTLAND OR 97229

Name & relationship _____

Address: _____

Name & relationship _____

Address: _____

That among items of real property owned by the Decedent at the time of death was real estate located in SKAMANIA County, Washington, and described in the above referenced Title Insurance Commitment.

As to the Decedent, said real estate 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 property was purchased the Decedent was:
 - ☐ married to _____.
 - ☒ 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)
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.

That, with respect to the property, if any, owned by the Decedent in joint tenancy as described above, at all times from the time of the execution of the instrument by which the joint tenancy was created to the death of the Decedent, each of the joint tenants recognized that the above described joint tenancy property was held in joint tenancy, and that the interest of no one or more of said joint tenants has ever been 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 said joint tenancy continued in full force until the death of the

Decedent with respect to the interest of the Decedent and, if there are two or more surviving joint tenants, including the Affiant, the joint tenancy continues with respect to the interests of the said surviving joint tenants.

That Affiant knows of the Affiant's own knowledge, and so states, that each and all of the obligations against the estate of said 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 \$ 200,000, including the value of community property of Decedent and Decedent's surviving spouse, if any, of approximately \$ 0, and including the value of Decedent's separate property, if any, of approximately \$ 195,000, and including the full value of all other property, if any, held by the Decedent in joint tenancy of approximately \$ 0.

This affidavit is made to induce COLUMBIA GORGE TITLE INSURANCE COMPANY (the Company) to insure real property covered by the Company's order number set forth above; in which Decedent held an interest at the time of the Decedent's death. Affiant urges the Company to issue its policy of title insurance in full reliance upon the representations set forth herein. The Affiant, for the Affiant and for the Affiant's heirs, executors and administrators, covenants to indemnify said Company or any other person, including a purchaser of said real estate, for any loss arising from reliance on any misstatement of fact herein.

DATED: AUG. 9, 2016

(Signature)

MOLLIE M. MCADAMS

(Print or type Affiant's full name)

16847 NW COUNTRY RIDGE DR

(Full address and telephone number)

PORTLAND, OR 97229



SUBSCRIBED and SWORN TO before me this 9th day of August, 2016

Kali Lefebvre
Notary Public in and for the State of Oregon
~~Washington~~, residing at 400 E Main St. Ste 210
Millsboro, OR 97123

LAST WILL AND TESTAMENT

OF

MORRIS E. JONES

I, MORRIS E. JONES, Social Security Number 492-40-8405, of the State of Washington, declare that this is my LAST WILL AND TESTAMENT and I revoke all other wills and codicils previously made by me.

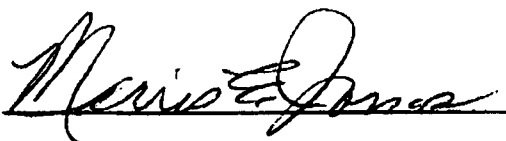
FIRST: I appoint my son-in-law, KEVIN MC ADAMS as my Personal Representative concerning this Will. If my son-in-law, KEVIN MC ADAMS is unable or fails to serve, I then appoint my brother, JUDSON M. JONES to serve as my Personal Representative.

a. I request that my Personal Representative be permitted to serve without bond or surety thereon and without the intervention of any court, except as required by law. I direct that my Personal Representative act in unsupervised administration so as to administer my estate with a minimum of court supervision. If it becomes necessary to have ancillary administration of my estate in any jurisdiction where my Personal Representative is unable or does not desire to qualify as ancillary legal representative, I appoint as such ancillary legal representative such individual or corporation as my Personal Representative shall designate, in writing.

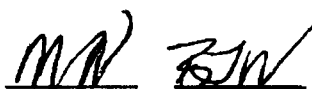
b. I direct my Personal Representative to pay the expenses of my last illness, the expenses of a funeral appropriate to my station in life and custom of living (including a suitable monument or marker for my grave), and written charitable pledges which I have made. I grant my Personal Representative the power to extend or renew any debt for such time as my Personal Representative shall deem appropriate.

c. All estate, inheritance, succession and other death taxes with respect to all property passing under this my Will shall be paid from and borne by the principal of my residuary estate, without regard to reimbursement, as if such taxes were administration expenses. My Personal Representative may pay such taxes at any time deemed advisable, whether or not then due and payable.

d. My Personal Representative is requested to settle my estate as soon after my death as may be practicable, and to pay or deliver every legacy or bequest to my beneficiaries without waiting any time that may be believed to be customary in probate matters.



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e. I have served in the Armed Forces of the United States. Therefore, I direct my Personal Representative to consult with a Legal Assistance Attorney at the nearest military installation and with the Department of Veterans Affairs and the Social Security Administration to ascertain if there are any benefits to which my family members are entitled by virtue of my military service.

f. I may leave a letter of intent with the executed copy of this Will for the purpose of giving guidance to my Personal Representative. I request, but do not require, that my Personal Representative honor my wishes therein expressed.
...AGEE

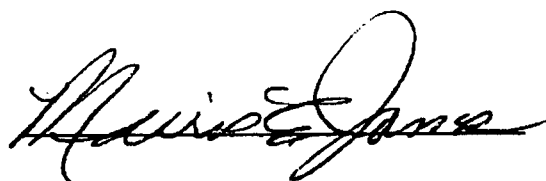
SECOND: I give, devise and bequeath, absolutely and forever, all of my estate and property of which I may be seized or possessed, or to which I may be entitled, at the time of my death, wherever situated or of whatever nature, be it real, personal, or mixed, to my daughter, MOLLIE MAUREEN MC ADAMS, my son, KIRK SIMMONS JONES.

a. If any of my children shall not survive me, then I give the share of that deceased child to my surviving children.

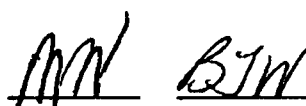
b. If none of my children survive me, then I give, devise, and bequeath, absolutely and forever, all of my estate and property of which I may be seized or possessed, or to which I may be entitled, at the time of my death, wherever situated or of whatever nature, be it real, personal, or mixed, to the descendants of my child or children, who are to take per stirpes and not per capita, in shares of substantially equal value to be divided as they may agree. In order to receive a share of my estate under this paragraph, a descendant of any child of mine must survive me.

c. If they are unable to agree, the division among my children and the descendants of any of my children who fail to survive me shall be made by my Personal Representative, in that person's sole and absolute discretion. I empower my Personal Representative to sell any or all of such property, if such property is not distributed in kind hereunder, and to distribute the proceeds among my said children in substantially equal shares. Any determination of my Personal Representative as to what should pass or be sold under this paragraph and to whom it should pass or be delivered or at what price it should be sold shall be conclusive.

THIRD: If there is a complete failure of takers under the preceding paragraphs, the property undisposed of shall go to my heirs determined at the time of my death, pursuant to the Statutes of Descent and Distribution in effect, in the state of my domicile, at the time of my death.



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FOURTH: Except as otherwise provided in this Will, I have intentionally failed to provide for any other relatives or other persons, whether claiming to be an heir of mine or not. Insofar as I have failed to provide in this Will for any of my issue now living or later born or adopted, such failure is intentional and not occasioned by accident or mistake.

FIFTH: Any beneficiary who fails to survive until one hundred twenty (120) hours after my death shall be deemed to have predeceased me, and the gift to that beneficiary shall be disposed of accordingly.

SIXTH: The term "Personal Representative" as used in this Will means Executor, Executrix, Independent Executor, or any other title of like import which is used to describe such a fiduciary.

SEVENTH: In addition to any powers granted by the laws of the state in which this Will is probated, I hereby authorize and empower the fiduciaries named in this Will, to the extent of the discretion herein granted, to sell, exchange, convey, transfer, assign, mortgage, pledge, lease or rent the whole or any part of my real or personal estate, to invest, reinvest, or retain investments of my estate, to perform all acts and to execute all documents which my fiduciaries may deem necessary or proper in regard to my property. If any of my fiduciaries elect to receive compensation for services, such compensation will be that allowed by law.

EIGHTH: If any part of this Will shall be invalid, illegal, or inoperative for any reason, it is my intention that the remaining parts, so far as possible and reasonable, shall be effective and fully operative. My Personal Representative may seek and obtain court instructions for the purpose of carrying out as nearly as may be possible the intention of this Will as shown by the terms hereof, including any terms held invalid, illegal, or inoperative.

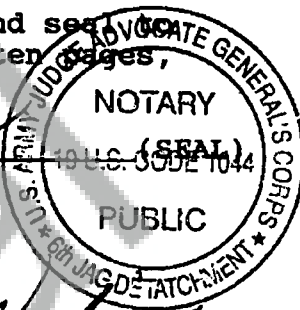
IN WITNESS WHEREOF, I have at Vancouver, Washington
this 10 day of April, 1979, set my hand and seal to this my LAST WILL AND TESTAMENT, consisting of 4 typewritten pages, each page bearing my handwritten signature.

Morris E. Jones (SEAL)
MORRIS E. JONES

Morris E. Jones

IN WITNESS WHEREOF, I have at Vancouver Washington
 this 10 day of April, 1999, set my hand and seal to
 this my LAST WILL AND TESTAMENT, consisting of 4 typewritten pages,
 each page bearing my handwritten signature.

Morris E. Jones
 MORRIS E. JONES



The foregoing instrument was, at Vancouver Washington

this 10 day of April, 1999, signed, sealed, published
 and declared by MORRIS E. JONES, the testator, to be his LAST WILL AND
 TESTAMENT in the presence of all of us at one time, and at the same
 time we, at his request and in his presence and in the presence of each
 other, have hereunto subscribed our names as attesting witnesses, and
 we do so verily believe that the said testator is of sound and
 disposing mind and memory at the date hereof.

Mark Nozaki BOBBIE JO WILLIAMS

OF Went Linn OF Portland OF _____

Oregon OREGON _____

Morris E. Jones PAGE 4
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State of

Washington

County of

ClackWE, MORRIS E. JONES, Mark Nozaki,

BOBBY-JO WILLIAMS, and _____,
 the testator and the witnesses, respectively, whose names are signed to
 the attached or foregoing instrument, being first duly sworn, do hereby
 declare to the undersigned authority that MORRIS E. JONES signed and
 executed the instrument as his last will and that he had signed
 willingly or directed another to sign for him and he executed it as his
 free and voluntary act for the purposes therein expressed; and that
 each of the witnesses, in the presence and hearing of MORRIS E. JONES,
 signed the will as witness and that to the best of each witnesses'
 knowledge MORRIS E. JONES was at that time an adult, of sound mind and
 under no constraint or undue influence.

[Signature]
 Witness

[Signature]
 Witness

[Signature]
 Witness

Subscribed, sworn to and acknowledged before me by MORRIS E. JONES, the testator, who is known to me to be
 eligible for Legal Assistance under the provisions of 10 USC section 1044a or regulations of the Department of Defense,
 and subscribed and sworn to before me by Mark Nozaki, BOBBY-JO WILLIAMS, and
 _____, the witnesses, this 16th day of April, 1999. This acknowledgment is
 executed in my official capacity under the authority granted by Title 10, United States Code, Section 1044a, which also
 states that no seal is required on this acknowledgment.

(Sign) James D. Boldt
 (Print) James Boldt

OFFICIAL CAPACITY Legal Assistance Officer
 RANK/COMPONENT MAJ USA

MISSOURI

CERTIFICATION OF DEATH

DATE FILED: OCTOBER 7, 2014

STATE FILE NUMBER: 124-14-028265

DECEDENT NAME: MORRIS EDWARD JONES

SEX: MALE

DATE OF DEATH: OCTOBER 5, 2014

COUNTY OF DEATH: TEXAS

DATE OF BIRTH: SEPTEMBER 12, 1937

MARITAL STATUS: DIVORCED

EVER IN ARMED FORCES: YES

SOCIAL SECURITY NUMBER: [REDACTED]

RESIDENCE ADDRESS: 1504 LORD STREET
KELSO, WASHINGTON

SURVIVING SPOUSE:
(IF WIFE, MAIDEN NAME):

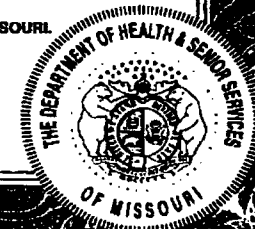
FUNERAL HOME: EVANS FUNERAL HOME
(I713) MANNER: NATURAL

CARDIAC DYSRHYTHMIA - MINUTES
RESPIRATORY FAILURE - MINUTES
EXSANGUINATION - MINUTES
RUPTURED ABDOMINAL AORTIC ANEURYSM - MINUTES

ISSUED ON BEHALF OF MO DEPT HEALTH & SENIOR SERVICES: TEXAS
THIS IS A TRUE CERTIFICATION OF NAME AND DEATH FACTS AS RECORDED BY THE BUREAU OF VITAL RECORDS, JEFFERSON CITY, MISSOURI

DATE ISSUED: OCTOBER 8, 2014

Craig B. Ward
Craig B. Ward
State Registrar of Vital Statistics



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