

Skamania County, WA
Total: \$106.50
ALP
Pgs=4
Request of: COLUMBIA GORGE TITLE

2020-000246

01/30/2020 03:33 PM



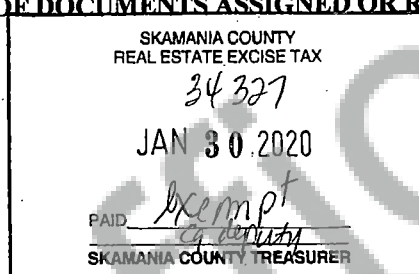
WHEN RECORDED RETURN TO:

Marlon Morat
761 Old State Road
Carson, WA 98610

DOCUMENT TITLE(S):
INHERITANCE LACK OF PROBATE AFFIDAVIT

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR:
Shirley Ann Morat



GRANTEE:
Gregory Marc Morat, Cindy Dawn Larson and Marlon Ross Morat, being all of the heirs of Shirley Morat, deceased

LEGAL DESCRIPTION:
Lot 6 of the JIMMY V. ACRES PLAT, according to the recorded Plat thereof, recorded in Book 'B' of Plats, Page 116, in the County of Skamania, State of Washington.

TAX PARCEL NUMBER(S):
03-08-17-3-0-1423-00

Skamania County Assessor

Date 1-30-20 Parcel# 03081730142300

ym

After recording, return to:

INHERITANCE LACK OF PROBATE AFFIDAVIT
(To Be Recorded for Excise Tax Affidavit Claiming Exempt Transfer of Ownership)

STATE OF Washington
COUNTY OF Skamania SS:

The undersigned, MARLON R MORAT, executes this affidavit relating to the estate of SHIRLEY MORAT (herein "Decedent"), who died on 1-12-2019, in the County of SKAMANIA, State of WASHINGTON, then being a resident of the City of _____, County of SKAMANIA, State of WASHINGTON (A copy of the death certificate is attached hereto.)

The undersigned, being first duly sworn, on oath deposes and says:

1. This Affidavit is to be recorded as an affirmation of facts showing that I am the rightful heir to the property described below.

Relationship of the Affiant to the Decedent

2. The undersigned is (check one):

- ☐ the lawful surviving spouse of the Decedent
- ☐ Registered domestic partner of the Decedent
- ☒ Surviving child 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:) _____

Names of All Heirs of the Decedent

3. That all the heirs at law and next of kin of the decedent that were living at the time decedent's death are listed below. Heirs at law and next of kin of decedent include, but are not limited to:
(a) a spouse or registered domestic partner, and

(b) children, adopted children, the children 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).

[Use the reverse side or attaching a list if necessary]

Name & relationship MARLOW ROSS MORAT SON

Name & relationship GREGORY MARC MORAT SON

Name & relationship CINDY DAWN MORAT LARSON DAUGHTER

Name & relationship _____

Description of the Property

4. That among the items of real property owned by the Decedent at the time of death was real estate located in the County of SKAMANIA, State of Washington, and described as follows:

[INSERT either complete legal description, or refer to attachment for full legal description]

5. Status of the Will (if any)

- ☒ The decedent left a Will that devises real property.
☐ The decedent left no Will that devises real property.

DATED: 1-29-, 2020

Marlow Ross Morat
(Signature)

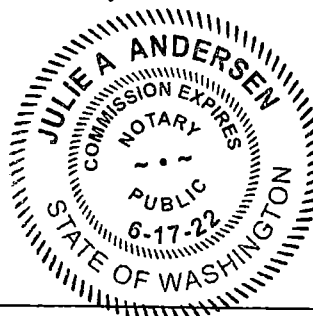
MARLOW ROSS MORAT
(Print or type full name)

761 OLD STATE RD CARSON WA 360-624-8381
(Full address and telephone number)

State of Washington
County of Skamania

SUBSCRIBED and SWORN TO before me this 29 day of January, 2020
by Marlow Ross Morat, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Julie A Andersen
Notary Public in and for the State of Washington
residing at Carson, Washington



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2019-001605

LOCAL FILE NUMBER: 159

DATE ISSUED: 01/15/2019

FEE NUMBER:

FIRST AND MIDDLE NAME(S): SHIRLEY

LAST NAME(S): MORAT

AKA: SHIRLEY ANN MORAT

COUNTY OF DEATH: CLARK

DATE OF DEATH: JANUARY 12, 2019

HOUR OF DEATH: 07:05 PM

SEX: FEMALE

AGE: 89 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: NOVEMBER 28, 1929

BIRTHPLACE: GRAND RAPIDS, MI

MARITAL STATUS: WIDOWED

SPOUSE: NOT APPLICABLE

OCCUPATION: HOMEMAKER

INDUSTRY: OWN HOME

EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED

US ARMED FORCES: NO

INFORMANT: MARLON MORAT

RELATIONSHIP: SON

ADDRESS: 761 OLD STATE ROAD CARSON, WASHINGTON 98610

CAUSE OF DEATH:

A: LATE EFFECTS OF CEREBRAL VASCULAR ACCIDENT

INTERVAL: UNKNOWN

B:

INTERVAL:

C:

INTERVAL:

D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: ALZHEIMER'S DISEASE; ATRIAL FIBRILLATION; SEIZURE DISORDER

DATE OF INJURY:

HOUR OF INJURY:

INJURY AT WORK:

PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:

COUNTY:

DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

AKA:

AKA:

PLACE OF DEATH: HOSPICE

FACILITY OR ADDRESS: COMMUNITY HOSPICE

CITY, STATE, ZIP: VANCOUVER, WASHINGTON 98686

RESIDENCE STREET: 162 VADA ROAD

CITY, STATE, ZIP: CARSON, WA 98610

INSIDE CITY LIMITS: NO

COUNTY: SKAMANIA

TRIBAL RESERVATION: NOT APPLICABLE

LENGTH OF TIME AT RESIDENCE: 14 YEARS

FATHER/PARENT: CORNELIUS VANDERHYDE

MOTHER/PARENT: JOHANNE MEIR

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: LOWER COLUMBIA CREMATORY

CITY, STATE: VANCOUVER, WASHINGTON

DISPOSITION DATE: JANUARY 15, 2019

FUNERAL FACILITY: CASCADIA CREMATION & BURIAL SERVICES

ADDRESS: 6303 E 18TH STREET STE A

CITY, STATE, ZIP: VANCOUVER, WASHINGTON 98661

FUNERAL DIRECTOR: JOHN A. BRUTTO, II

MANNER OF DEATH: NATURAL

AUTOPSY: UNKNOWN

WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE

CAUSE OF DEATH: NOT APPLICABLE

DID TOBACCO USE CONTRIBUTE TO DEATH: NO

PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: CHARLOTTE E. WHITE, ARNP

TITLE: ARNP

CERTIFIER ADDRESS: 14508 NE 20TH AVE STE 201

CITY, STATE, ZIP: VANCOUVER, WA 98686

DATE SIGNED: JANUARY 15, 2019

CASE REFERRED TO ME/CORONER: NO

FILE NUMBER: NOT APPLICABLE

ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: TARA VAWTER

DATE RECEIVED: JANUARY 15, 2019