When recorded return to: Ellen Roff 696 Gladstone Drive

Camano Island, WA 98282



Skagit County Auditor 12/22/2017 Page

1 of 3

\$76.00 3 1:35PM

Filed for record at the request of:



425 Commercial St Mount Vernon, WA 98273

Escrow No.: 620033194

CHICAGO TITLE
1020033194

DOCUMENT TITLE(S)

Inheritance Lack of Probate Affidavit

| REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED: N/A | | |
|--|--|--|
| Additional reference numbers on page of document | | |
| GRANTOR(S) | | |
| Gordon Roth | | |
| ☐ Additional names on pageof document | | |
| GRANTEE(S) | | |
| Ellen Roff | | |
| ☐ Additional names on page of document 》 | | |
| TRUSTEE | | |
| N/A | | |
| ABBREVIATED LEGAL DESCRIPTION | | |
| Lot(s): 52 and 53 CEDARGROVE ON THE SKAGIT Tax/Map (b): | | |
| Complete legal description is on page of document | | |
| TAX PARCEL NUMBER(S) | | |
| P64112 / 3877-000-052-0001 and P64113 / 3877-000-053-0000 | | |
| Additional Tax Accounts are 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 provided herein. | | |
| "I am signing below and paying an additional \$50 recording fee (as provided in RCW 36.18.010 and referred to as an emergency nonstandard document), because this document does not meet margin and formatting requirements. | | |
| Furthermore, I hereby understand that the recording process may cover up or otherwise obscure some part of the text of the original document as a result of this request." | | |
| Signature of Requesting Party | | |
| Note to submitter: Do not sign above nor pay additional \$50 fee if the document meets margin/formatting requirements | | |
| Hara to provide the provide and the ball and the table to a terminate the provide the prov | | |

| After recording, return to: | |
|--|--|
| | |
| | |
| | RoFF |
| Grantor (Name of Decedent): | 1703) |
| Grantee (Heirs): KO++ | |
| Abbreviated Legal Description: Lot(s): 52 and 53 CEDARGROVE ON T | , , , |
| Tax Parcel No.(s): P64112 3877-000-052-0001 and P64113 / 3877-000-0 | 053-0000 |
| INHERITANCE LACK OF PROBATE AFF | IDAVIT |
| (To Be Recorded for Excise Tax Affidavit Claiming Exempt | |
| STATE OF Washing ton | |
| COUNTY OF SKagit | |
| The undersigned, Ellen Ross executes this | affidavit relating to the estate of |
| Cordon ROFF (herein "Decedent"), who died on | Dec 5, 2016, |
| | ∴ then being a resident of the |
| | ite of Washington. |
| (A copy of the death certificate is attached hereto.) | |
| The undersigned, being first duly sworn, on oath deposes and says: | agas and the measurement of the second of th |
| 1. This Affidavit is to be recorded as an affirmation of facts showing | that am a rightful heir to the |
| property described below. | AGIT COUNTY WASHINGTON |
| | REAL ESTATE EXCISE TAX |
| The undersigned is (check one): the lawful surviving spouse of the Decedent | DEC 2.2-2017 |
| Registered domestic partner of the Decedent | |
| Surviving child of the Decedent | Amount Paid \$4 |
| One (1) of the joint tenants named in that certain instrument creating | Skagit Co. Treasurer/Man/ |
| survivorship identified in that certain deed recorded on | |
| [mm/dd/yyyy], under Recording No. | |
| | |
| County, Washington. | |
| other (identify:) | |
| Affidavit (Lack of Probate) WA0000080.doc / Updated: 11.14.16 | Printed: 12 14.17 @ 03:42 PM by AMW WA-CT-FNRV-02150.620019-620033194 |

INHERITANCE LACK OF PROBATE AFFIDAVIT

(To Be Recorded for Excise Tax Affidavit Claiming Exempt Transfer of Ownership)
(continued)

Names of All Heirs of the Decedent

| 3. | That all the heirs at law of the decedent that were living at the time decedent's death are listed below. [Use the reverse side or attach a list if necessary] | | |
|--|---|--|--|
| | Name and relationship: David A ROFF Son | | |
| | Name and relationships Douglas B Roff Son | | |
| | Name and relationship: Kim D. ROFF Opheim Daughter | | |
| | Name and relationship: Kara R Jensen Daughter | | |
| <u>De</u> | scription of the Property | | |
| 4. That among the items of real property owned by the Decedent at the time of death was real esta located in the County of Skagit, State of Washington, and described as follows: | | | |
| | Lots 52 and 53, CEDARGROVE ON THE SKAGIT, according to the Plat thereof recorded in Volume 9 of Plats, pages 48 through 51, records of Skagit County, Washington. | | |
| | Situated in Skagit County, Washington. | | |
| 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. | | |
| IN | WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below. | | |
| | Et llow Roff 12/15/17 Signature Date | | |
| Pri | Ellen Roff nt Name | | |
| Sta | ate of Washington | | |
| Со | unty of TSLAMD | | |
| Sig | ned and sworn to (or affirmed) before me on 13-15-2017 by ELLEN ROFF (name of person making statement). | | |
| | | | |
| | NOTARY PUSH Notary Public in and for the State of Washington, | | |
| STATE OF WASHING esiding at: SCAND COUNTY Commission Expires Falls My Spires F | | | |
| | Washing Sesiding at: 45400 Commission Expires Februs My appointment expires: | | |