

LACK OF PROBATE AFFIDAVIT (SEPARATE PROPERTY)

STATE OF WASHING	ΓΟN) })
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COUNTY OF SKAGIT	And the second	and the second s)

JOHN YANDLE, being first duly sworn, on oath deposes and says:

Affiant is the lawful surviving spouse [] surviving child [X] other [] (identify:) of JEAN GRADIE YANDLE who died on May 24, 1998 at Skagit County, State of Washington being a resident of Skagit County, State of Washington. (A copy of the death certificate is attached hereto.)

That among items of property was real estate located in Skagit County, Washington, described as follows:

RESERVE TO MONTBORNE LOTS 6 & 7 INCLUDES MOBILE 10423 LAMPL 69 60X12 PC 19 TGW PTN 100 FT WIDE ABND NP RLY/W ELY C/L SD R/W & BTW SWLY EXT NWLY & SELY LI SD LT 7, Tax ID # P74730/4136-007-0007

That affiant has hereinbelow identified each and all of the heirs at law of decedent, including but not limited to his/her spouse, children, adopted children, and 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).

LACK OF PROBATE AFFIDAVIT - 1

That the heirs at law of the decedent are (list all of the heirs at law, using the reverse side or attaching a list if necessary):

- 1. Milton T. Yandle, Deceased (Skagit County Superior Court Probate No. 04-4-00316-4)
- 2. John Yandle,

Address: 13242 Satterlee Road, Anacortes, WA 98221

3. Steve Yandle

Address:13242 Satterlee Road, Anacortes, WA 98221

That affiant knows of [X] his [] her 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):

[CHECK THE FOLLOWING ITEMS WHICH APPLY:]

[X]	That the decedent was married to M	ilton Townsend Yandle on the date said real property
	was acquired.	

- [X] That the decedent left no Will.
- [] That the decedent left a Will, a copy of which is attached.
- [X] That the decedent's estate is not being probated.

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and the second	
	That the decedent's estate is subject to probate proceedings in County,
	State of, under No
[X]	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. A copy of the release/discharge is attached hereto.
[]	That State and/or Federal succession or inheritance taxes are due, but have not been paid.
[X]	That all creditor's claims against the estate of the decedent have been paid, including any
	claims by the State of Washington for assistance pursuant to the provisions of RCW
	43.20B.080.
[X]	That the value of the decedent's estate at date of death, including all real and personal
	property, was approximately \$80,000.00, including the value of community property of
	decedent and decedent's surviving spouse of approximately \$80,000.00, and including the
	value of decedent's separate property of approximately \$ none.
	This affidavit is made to induce any and all TITLE INSURANCE COMPANY'S (the
Compa	any) to insure real property covered by the Company's order number set forth, in which
decede	nt held an interest at the time of his/her death. Affiant urges the Company to issue its
policy	of title insurance in full reliance upon the representations set forth herein.
`	DATED: 4 Feb ,2005
	DATED: 9 PP , 200)
(Signat	rute) / /

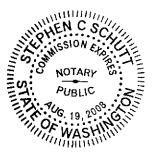
JOHN YANDLE (Print or type Affiant's full name)

LACK OF PROBATE AFFIDAVIT - 3



2/7/2005 Page 3 of 6 3:36PM

13242/Satterlee Koad, Anacortes, WA 98221 (360) 293-	-9649		
(Full address and telephone number)			
Silutt 12		5/	
SUBSCRIBED and SWORN TO before me this	_day of	146	,2005
Stephen C. Schutt			
Notary Public in and for the State of Washington			
residing at Anacates wa			
My commission expires: A 08			



368

Health

146 8 20922 STATE FILE MANBER

1. NAME First		Middle	Last	2. SEX (M /F)	3. DEATH DATE IN	do Dec Vol
JEAI		GRADIE	YANDLE	Female	1	4. 1998
. 4 AGE LAST BIRTH 5. UNDER 1 DAY (Yre) MCB		1 DAY 7 BIRTHDATE (Mo, Day, Yr	a BIRTHPLACE	9. WAS DECEDE	VT EVER 10 OC	WINTY OF DEATH
68	DATS BOURS	10/5	(City, State or Foreign Country) Marion, NC	IN U.S. ARMET (Yes / No)	FORCES?	1
11. CITY, TOWN OR LOCATION OF	DEATH	12. PLACE OF DEATH- 20	BOX FOR PLACE THEN GIVE ADDRESS O	OR INSTITUTION NAME		Skagit 13 SMOKING IN LAST
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<u>Sedro-Woolley</u>	· W	300 W Mc	ore Street			No
 MARITAL STATUS—Merried. Never Married, Widowed. 	15. BUPVIVING SE	POUSE (if wife, give malden name)	18 SOCIAL SEC		ECEDENT'S EDUCAT	TON
Divorced (Specify)			• <u> </u>	1	ipecify only highest g	· · · · · .
Married	Milto	on Yandle	•	Elerne	Hary/Secondary (0-1)	2) Coffege (1-4 or 5+)
18 USUAL OCCUPATION (Give kind	of work done 19	KIND OF BUSINESS OF INDUSTRY	20. Was Decedent of	Hispanic origin or descent? (An	Cashul (Specify 13)	PACE (Brenth)
during most of working life. DO N		- (/ 	Yes or No. II Yes,	apacity Cuban, Mexican, Fueric	Ricen, etc.)	record (abbrevia)
Food Sorter		Food Cannery	(Yee / No) Spe	кну: No		White
22. RESIDENCENUMBER AND ST	REET	23. CITY/TOWN, OR LOCATION	24. INSIDE CITY 25A COUNTY LIMITS?	258. LENGTH OF	26. STATE	27. ZIP CODE
300 W Moore St	root	Sedro-Woolley	(Yet / No)	•	١	
28 FATHER'S NAME FIRST, MIDDI	- .	Senta_Montre	— د ۱۰۰۰ ا		WA	98284
· .	LE, DASI	and the second		ST, MIDDLE, MAIDEN SURNAM		
Zeb Wooten		<u> </u>	Julia			
30. INFORMANT-NAME		31, MAILING ADDRI		CITY OR TOWN	817	NTE ZIP
John Yandle		1369 Cf	ristenson Road	Anacorte	s, WA	98221
32 BURIAL, CREMATION 33, D	DATE (Mo, Day, Yr).	34. CEMETERY/CREMATORYNAI	ME / J /	35. LOCATIONCITY		
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& Lichard L	U.	Lemley Chpael	1008 3rd St			4 00004
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May 26, 1998	Section 15	Early AM hrs	3 L	Marian	-	THE SECTION OF THE SECTION
42. NAME AND TITLE OF ATTENDIN	G PHYSICIAN & OTHER I	<u>- </u>	48. PRONOUNCED DEAD	Sman Paris No.		
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				Name of the second		
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T.W. Martin, M		<u>l8 Hospital Dri</u>	<u>ve Sedro-Wool</u>	<u>ley, WA 9828</u>	34	NJA-216
50 ENTER THE DISEASES, INJ	IURIES, OR COMPLIC	ATIONS WHICH CAUSED THE	DEATH:			
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condition resulting in death).	A 1 1	Grythmiz	tom Cardi	myopeth	1 106	"Sidde-
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51. OTHER BIGNIFICANT CONDITIO	NS CONDITIONS CONT	FRIBUTING TO DEATH BUT NOT RES	ALTING IN THE UNDERLYING CAUSE GI	VEN ABOVE: 52. AUTOPEN	7 53 WAS	CASE REFERRED TO
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58 INJURY AT WORK? 56 (Yes / No)	PLACE OF INJURY-AT	HOME FARM STREET	TORRE	akag	t County	Auditor
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SOME OF WASHINGTON-DEPARTMENT OF HEALTH

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/hatcom		1		Washin	gton	9	8225		₩ D₩ D
Estimated length of time at	residence.	5. Marital Status at Widowed	Time of Death	46. Surviving Sp	ouse's Name (Give nam	na prior in fr	egalnam far	1	
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John Yandle	Į.	Son				_	rtes.	WA C	98221
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