

When Recorded Return to:

Elliott W Johnson Inc PS
711 S. First St
Mount Vernon, WA 98273



200605150145

Skagit County Auditor

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Lack of Probate Affidavit

Grantor(s):

Karen E. Tavalero as Agent for Ruth L. Ridgeway

Jackie Kiter as Personal Representative Under Will
of Thomas Elmer Ridgeway, Deceased

Grantee(s):

Ruth L. Ridgeway

Legal Description (abbreviated):

Lts 45 & 46, Plat of Dewey Beach Addn #4, Skagit
County, WA

Assessor's Tax Parcel Number:

3904-000-046-0007 (P65110)

3904-000-045-0008 (P65109)

In the Matter of the Estate of

Thomas Elmer Ridgeway,

Deceased.

Lack of Probate Affidavit

Karen E. Tavalero as Agent/Attorney-in-Fact for Ruth L. Ridgeway and Jackie Kiter as Personal Representative Under Will of Thomas Elmer Ridgeway Deceased, being first duly sworn, depose and say:

Lack of Probate Affidavit

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Elliott W. Johnson Inc. P.S.
711 South First Street
Mount Vernon, WA 98273
(360) 336-6502 Fax 336-5616
Email Elliott@EWJLaw.com

1. Ruth L. Ridgeway is the surviving spouse of **Thomas Elmer Ridgeway** who died at a resident of Skagit County, Washington, at Anacortes on January 20, 2005. Karen E. Tavalero is Agent/Attorney-in-Fact for Ruth L. Ridgeway under General-Durable Power of Attorney dated November 22, 2004, and recorded under Skagit County Auditor's File No. 200603150092 on March 15, 2006. Jackie Kiter is decedent's daughter and the designated personal representative under Decedent's Last Will and Testament.

2. The decedent executed a Last Will and Testament dated February 10, 2004, providing for the disposition of Decedent's community and separate property assets. Said Last Will and Testament has been filed under Skagit County Superior Court No. 05-4-00272-7. Decedent's surviving spouse and surviving children do not intend to probate decedent's Will. A true and correct copy of decedent's Will is attached hereto and incorporated herein. Attached also is a true and correct copy of the death certificate that was issued herein.

3. Except as provided in Decedent's Last Will and Testament, Decedent did not execute any agreements to convey, conveyances, mortgages, deeds of trust, lien agreements or other instruments for the purpose of conveying or encumbering the assets listed below, any portion thereof, or any interest therein other than the instruments which have been duly recorded in the office of the Auditor of the location of the asset.

4. There are no unpaid creditors of said Decedent or of the former marital community nor unpaid funeral expenses or expenses of last illness. The estate is fully solvent.

5. The decedent left surviving, in addition to the undersigned, the following children:

<u>Name/Address</u>	<u>Relationship</u>	<u>Age</u>
Jacqueline S. Kiter PO Box 1146 Duvall, WA 98019	Daughter	L

Peter G. Ridgeway <u>5105 Mainview Dr</u> <u>Missoula, MT. 59803</u>	Son	L
--	-----	---

Patrick T. Ridgeway 815 Second Street SE Cutbank, MT 59427	Son	L
--	-----	---

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6. The decedent did not receive any medical assistance paid for or provided by the Washington State Department of Social and Health Services (DSHS) including nursing facility services, home or community-based services, hospital, prescription drugs or any other services.

7. Decedent's separate property consists of the following, which will be distributed in accordance with Decedent's Will:

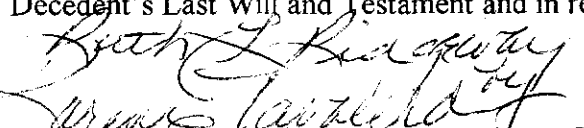
Personal items listed in Decedents will to family members
Sale of remaining personal items monies to be equally divided between surviving children
All checking and savings accounts in Decedents individual account
Stock and Mutual Funds Accounts to be equally divided between , Peter G. Ridgeway,
Patrick T. Ridgeway, and Jacqueline S Kiter

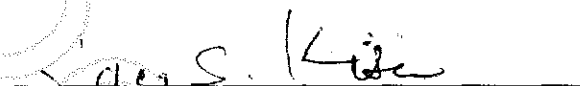
8. Decedent's Will provides that all community real property is to be distributed to Decedent's surviving spouse, Ruth L. Ridgeway. Property characterized as community at the time of Decedent's death consists of the following described real estate:

1. Residence at 15322 Dewey Crest Lane, Anacortes, Skagit County, WA

Lots 45 and 46, Plat of Dewey Beach Addition #4, Skagit County, Washington, according to the recorded plat thereof in the office of the auditor of Skagit County, Washington, in Volume 7 of Plats, page 50.

9. This affidavit is made to induce Title Companies to issue their policies of title insurance on real property passing to the surviving spouse by virtue of said community property designation under Decedent's Last Will and Testament and in reliance upon the representations herein set forth.


Ruth L. Ridgeway
By Karen E. Tavalero, her attorney-in-fact


Jackie Kiter
Designated Personal Representative Under
Will of Thomas Elmer Ridgeway, Deceased



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Elliott W. Johnson Inc. P.S.
711 South First Street
Mount Vernon, WA 98273

(360) 336-6502 Fax 336-5616
Email Elliott@EWJLaw.com

STATE OF WASHINGTON
COUNTY OF SKAGIT

SS.

I certify that I know or have satisfactory evidence that **Karen E. Tavalero** is the person who appeared before me, and said person acknowledged that she signed this instrument, on oath stated that she was authorized to execute the instrument and acknowledged as **Agent/Attorney-in-Fact for Ruth L. Ridgeway** to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

GIVEN UNDER MY HAND AND OFFICIAL SEAL this 9th day of May, 2006.



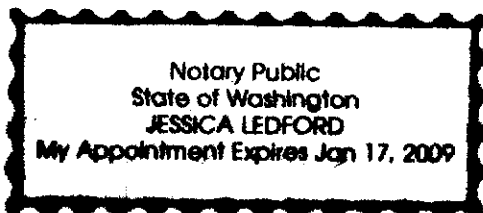
Printed Name CHRISTINA J. DILLEY
NOTARY PUBLIC in and for the State of Washington
My Commission Expires 2-1-2009

STATE OF WASHINGTON
COUNTY OF Snohomish

SS.

I certify that I know or have satisfactory evidence that **Jackie Kiter** is the person who appeared before me, and said person acknowledged that she signed this instrument, on oath stated that she was authorized to execute the instrument and acknowledged as **Personal Representative designated in the Last Will and Testament of Thomas Elmer Ridgeway, Deceased**, to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

GIVEN UNDER MY HAND AND OFFICIAL SEAL this 17th day of March, 2006.



Printed Name Jessica Ledford
NOTARY PUBLIC in and for the State of Washington
My Commission Expires Jan 17 2009

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711 South First Street
Mount Vernon, WA 98273

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WILL OF THOMAS E. RIDGEWAY

I, Thomas Elmer Ridgeway, a resident of Anacortes, Washington, Skagit County, declare that this is my will.

1. I revoke all will and codicils that I have previously made.
2. I am married to Ruth L. Ridgeway, and all references in this will to my wife are to her.

I am the father of the following children, whose names and dates of birth are:

Peter G. Ridgeway September 28, 1943
 Patrick T. Ridgeway October 3, 1947
 Jacqueline S. Kiter October 3, 1947

And my grandchildren are:

Allison D. Olsen February 5, 1971
 Jenna L. Umbehocker September 5, 1972
 Pamela Kinzle June 9, 1967
 Chris Winn March 18, 1966
 Bradley Ridgeway October 1970

And great-grandchildren are:

Halle D. Olsen
 Samuel Kinzle
 Joshua Kinzle
 Sarah Kinzle
 Jourdan Winn
 Lucy Ridgeway
 Nicholas Winn
 Lauren Umbehocker
 Elizabeth Root
 Jessica Root
 Joseph Root

1. I make the following specific gifts of personal property:

I give the property commonly known as my share of 2519 West Second Street, Anacortes, Washington, to my wife or, if she does not survive me by 45 days, to her children.

2. I give the following specific gifts of personal property

All my mechanical and woodworking tools, power and hand tools, 10" craftsman table saw, and attached sander, tool boxes to Patrick Ridgeway.

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I give Allison D. Olsen one gold coin,
I give Jenna L. Umbehocker, one gold coin.
I give Pamela Kinzle, one gold coin
I give Chris Winn, one gold coin.

These coins are in envelopes with receiver's name on outside

I give Patrick Ridgeway, Elgin lovelier watch, and 32 caliber savage automatic with holster,
& two clips, box of ammo, mahogany jewelry case and all contents of several watches, cuff
links & tie tacks, airforce 1944 binoculars & case

The One dollar silver certificates are to be given one each to each grandchild as listed
above, if not already received. The residual silver certificates (8) to be divided between Lisa
Root and Karen Tavalero.

My Glenn Miller Albums (white cover and gold cover), will be given to Allison Olsen and
Jenna Umbehocker, flip a coin to decide choice.

My computer & peripheral equipment to be given to Patrick Ridgeway.

12 pictures with stickers on back that designate receiver of items.

Other items in the house that are mine will be designated with stickers on who I wish to
receive those items.

All checking and saving accounts in my name, stock certificates and mutual fund accounts
(List of accounts and numbers in possession of Patrick Ridgeway and Jacqueline Kiter) and
any money from the sale of the remainder of my personal property shall be equally divided
between, Peter G. Ridgeway, Patrick T. Ridgeway and Jacqueline S. Kiter

3.1 give my residuary estate, i.e., the rest of my property not otherwise specifically and
validly disposed of by this will or in any other manner, to my wife, Ruth, or if she fails to
survive me by 45 days to her children in equal shares. If any primary beneficiary of a
specific gift made in this will fails to survive me by 45 days, the surviving beneficiaries of
that gift shall equally divide the deceased beneficiary's share. If a primary beneficiary of a
specific gift made in this will fails to survive me by 45 days, and there are no named
alternate beneficiaries, my executor, Jacqueline Kiter, will determine who that gift shall go
to.

My executor, Jacqueline S. Kiter, shall resolve any dispute or question arising over any
personal item named above.

- a. I nominate Jacqueline Sandra Kiter as executor, to serve without bond. If
Jacqueline Kiter shall for any reason fail to qualify or cease to act as
executor, I nominate Jenna Lynn Umbehocker as executor, also to serve
without bond. I direct that my executor take all actions legally permissible



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to have the probate of my estate done as simply as possible, including filing a petition in the appropriate court for the independent administration of my estate.

I hereby grant to my executor the following powers, to be exercised as he or she deems to be in the best interest of my estate:

- i. To retain property without liability for loss or depreciation resulting from such retention.
- ii. To dispose of property by public or private sale, or exchange or otherwise, and receive or administer the proceeds as part of my estate.
- iii. To vote stock, to exercise any option or privilege to convert bonds, notes, stocks or other securities and to exercise all of the rights and privileges of a person owning similar property in his own right.
- iv. To lease any real property that may at any time form part of my estate.
- v. To abandon, adjust arbitrate, compromise sue on or defend and otherwise deal with and settle claims in favor of or against my estate.
- vi. To continue, maintain, operate or participate in any business which is a part of my estate, and to effect incorporation, dissolution or other change in the form of organization of the business.
- vii. To pay all debts, and all taxes that may by reason of my death, be assessed against my estate or any portion of it whether passing by probate or not, provided that such debts and taxes shall be first satisfied out of my residuary estate.
- viii. If any person not my child who receives property under this will is a minor at the time of distribution, I direct my executor to distribute the property to the minor's custodian or guardian under the provision of the Uniform Gifts to Minors Act, or the Uniform Transfers to Minor's Act, if either is applicable.
- i. To do all other acts, which in his or her judgment may be necessary or appropriate for the proper and advantageous management, investment and distribution of my estate.

The foregoing powers, authority and discretion granted to my executor are intended to be in addition to the powers, authority and discretion vested in her by operation of law by virtue of her office, and may be exercised as often as is deemed necessary or advisable, without application to or approval by any court in any jurisdiction.



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- b. If my wife and I should die simultaneously or under such circumstances as to render it difficult or impossible to determine by clear and convincing evidence who predeceased the other, I shall be conclusively presume to have survived my wife for purposes of this will.

I subscribe my name to this will this ___ day of _____ 2003, at Anacortes, Skagit County, Washington, and do hereby declare that I sign and execute it as my free and voluntary act for the purposes therein expressed, and that I am of the age of majority or otherwise legally empowered d to make a will, and under no constraint or undue influence.

Signed

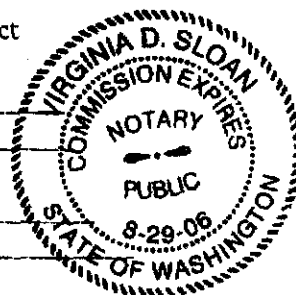
[Handwritten signature]

On this 10th day of February 2003, Thomas Elmer Ridgeway declared to us, the undersigned, that this instrument was his will and requested us to act as witnesses to it. He thereupon signed this will in our presence, and in the presence of each other, subscribe our names as witnesses and declare we understand this to be his will and that to the best of our knowledge the testator is of the age of majority, or is otherwise legally empowered to make a will and under no constraint or undue influence.

We declare under penalty of perjury that the foregoing is true and correct

Name Virginia D. Sloan, residing at Burlington
City of Burlington, County of Skagit, State of WA.

Name _____, residing at _____
City of _____, County of _____, State of _____



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STATE OF WASHINGTON DEPARTMENT OF HEALTH

Local File Number 48-05		Washington State Certificate of Death		State File Number	
1. Legal Name (Include AKA's if any) First Middle LAST Suffix Thomas Elmer RIDGEWAY				2. Death Date Jan 20, 2005	
3. Sex (M/F) M	4a. Age - Last Birthday 81	4b. Under 1 Year Months Days 0 0	4c. Under 1 Day Hours Minutes 0 0	5. Social Security Number 395-16-8561	6. County of Death Skagit
7. Birthdate Jul 16, 1923		8a. Birthplace (City, Town, or County) Elkhorn		8b. (State or Foreign Country) Wisconsin	
9. Decedent's Education Some college, but no degree		10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify. No			
11. Decedent's Race(s) White				12. Was Decedent ever in U.S. Armed Forces? Yes	
13a. Residence: Number and Street (e.g., 624 SE 5th St.) (Include Apt. No.) 2519 West 2nd				13b. City or Town Anacortes	
13c. Residence: County Skagit		13d. Tribal Reservation Name (if applicable)		13e. State or Foreign Country Washington	13f. Zip Code + 4 98221
13g. Inside City Limits? ☒ Yes ☐ No ☐ Unk		14. Estimated length of time at residence. 10y			
15. Marital Status at Time of Death Married		16. Surviving Spouse's Name (Give name prior to first marriage) Ruth Louise Aldrich			
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED). Estimator				18. Kind of Business/Industry (Do not use Company Name) Electric Contracting	
19. Father's Name (First, Middle, Last, Suffix) Elmer (nmn) Ridgeway				20. Mother's Name Before First Marriage (First, Middle, Last) Munro (nmn) Kinney	
21. Informant's Name Jackie Riter		22. Relationship to Decedent Daughter		23. Mailing Address: Number and Street or RFD No. City or Town State Zip 12513 Chain Lake Road Snohomish WA 98290-	
24. Place of Death, if Death Occurred in a Hospital Inpatient				24. Place of Death, if Death Occurred Somewhere Other than a Hospital:	
25. Facility Name (If not a facility, give number & street or location) Island Hospital				26a. City, Town, or Location of Death Anacortes	26b. State WA
28. Method of Disposition Cremation				29. Place of Final Disposition (Name of cemetery, crematory, other place) Northwest Crematory	
31. Name and Complete Address of Funeral Facility Evans Funeral Chapel 1105 32nd Street Anacortes, WA 98221-				32. Date of Disposition Jan 21, 2005	
33. Funeral Director Signature X <i>Joseph Wahram</i>					
34. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Add additional lines if necessary. IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. aortic stenosis Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST b. renal failure due to c. low cardiac output d. Diabetes II, rheumatoid arthritis					
35. Other significant conditions contributing to death but not resulting in the underlying cause given above Diabetes II, rheumatoid arthritis				36. Autopsy? ☐ Yes ☒ No	
37. Were autopsy findings available to complete the Cause of Death? ☐ Yes ☒ No				38. Manner of Death ☒ Natural ☐ Homicide ☐ Accident ☐ Undetermined ☐ Suicide ☐ Pending	
39. If female ☐ Not pregnant within past year ☐ Not pregnant, but pregnant within 42 days before death ☐ Pregnant at time of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year		40. Did tobacco use contribute to death? ☒ Yes ☐ Probably ☐ No ☐ Unknown			
41. Date of Injury (mm/dd/yyyy) 1/20/05		42. Hour of Injury (24hrs) 20:25		43. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area) At Home	
44. Location of Injury: Number & Street: City or Town: County: State: Zip Code + 4:				45. Describe how injury occurred	
46. Date of Injury (mm/dd/yyyy) 1/20/05				47. If transportation injury, specify: ☐ Driver/Operator ☐ Pedestrian ☐ Passenger ☐ Other (Specify)	
48a. Certifying Physician - To the best of my knowledge, death occurred at the time, place, and cause stated on this certificate. Gavin I. Gordon				48b. Medical Examiner/Coroner - On the basis of examination, and/or investigation, at my office, death occurred at the time, place, and cause stated on this certificate. X	
49. Name and Address of Certifier - Physician, Medical Examiner or Coroner (Type or Print) Gavin I. Gordon M.D. 1213 24th Street, Suite 100, Anacortes, WA 98221				50. Hour of Death (24hrs) 20:25 PM	
51. Name and Title of Attending Physician if other than Certifier (Type or Print)				52. Date Signed (mm/dd/yyyy) January 21, 2005	
53. Title of Certifier M.D.		54. License Number MD00030111		55. ME/Coroner File Number	
56. Was case referred to ME/Coroner? ☐ Yes ☒ No				57. Registrar Signature Sandra Berlitz, Deputy	
58. Date Received (mm/dd/yyyy) JAN 21 2005				59. Amendments	



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14. I represent the person as: ☐ Self ☐ Parent ☐ Guardian ☐ Informant ☐ Funeral Director ☐ Other (Specify) _____ Telephone Number: _____

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

15. Signature: _____ 16. Date: _____ 17. Address: _____

All vital records are registered as received. An item may be changed by affidavit only once. Subsequent changes must be made by court order. The incorrect certificate must be returned within one year of the date it was issued to receive a replacement copy free of charge.

All changes must be established by documentary proof submitted with the affidavit

Examples of documentary proof:	Certificate of Naturalization	Medical Record	School Record
	Hospital Records	Military Record (DD-214)	Voter's Registration Card (if it bears an effective date)
	Insurance Records	Birth Record	Alien Registration Card (front and back)
	Marriage/Divorce Records	Passport	

Birth Certificates:

- Only a parent, legal guardian (if the child is under 18), or the adult themselves (if 18 or older) may change the birth certificate.
- The proof(s) must match exactly the asserted true fact(s). For example, if the affidavit says the name is Mary Ann Doe, then the proof must show the name to be Mary Ann Doe. Mary A. Doe or M.A. Doe does not prove the name is Mary Ann Doe.
- Proof must be five (or more) years old or have been established within five years of birth.
- Up to age one, the parent(s) or legal guardian may change the child's last name with an affidavit for correction, provided:
 - This is a one time only change. Subsequent changes will require a certified copy of a court ordered name change.
 - The new last name may be the mother's maiden name or father's name (if present on the certificate) or any combination of the two.
 - After age one, last name changes require a certified copy of a court ordered name change. Minor spelling changes may be made with an affidavit and documentary proof.
- Parent(s) may change their child's first or middle name by completing and signing an affidavit for correction (until their child's 18th birthday).
- This affidavit cannot be used to add a father to a birth certificate. (Use the paternity affidavit - form DOH/CHS 021)**

Death Certificates:

Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information.

The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

If it is less than sixty days from date of death please contact the county health department where the death occurred to make changes.

Marriage/Dissolution (Divorce) Certificates:

- Personal fact(s) (minor spelling changes in name, date or place of birth or residence) may be changed by affidavit (with proof) by the person.
- To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must sign the affidavit.

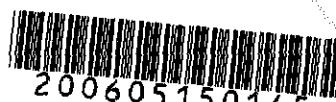
DOH/CHS 023 (Rev. 9/2002)

CERTIFIED

JAN 24 2005

Howard Leibrand
 Skagit County Health Department
 Howard Leibrand M.D., Health Officer

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