

Return Address:

LAND TITLE AND ESCROW  
P.O. BOX 445  
BURLINGTON, WA 98233



201704140173

Skagit County Auditor \$76.00  
4/14/2017 Page 1 of 4 3:55PM

Land Title #01-161009 fe **AFFIDAVIT (LACK OF PROBATE)**

The undersigned affiant/grantee LORI WEEKS  
~~JEAN S. HARRIS~~, being first duly sworn  
*Name of Affiant*

deposes and states as follows: That they are a rightful heir as listed on heirs at law, to the real

property described below, and is SPOUSE Guardian of the Person and of the Estate  
of Jean S. Harris *Relationship to decedent*  
of FRANK ELSWORTH HARRIS spouse, who died on DECEMBER 11, 2015  
*Decedent/Grantor* *Date*

at MOUNT VERNON SKAGIT WASHINGTON  
*City* *County* *State*

**REAL PROPERTY SUBJECT TO THE AFFIDAVIT:**

Abbreviated Legal Description:  
LOT 12, "PLAT OF BLACKBURN RIDGE PHASE 2," AS PER PLAT RECORDED ON  
OCTOBER 31, 2000, UNDER AUDITOR'S FILE NO. 200010310122, RECORDS OF  
SKAGIT COUNTY, WASHINGTON.

Assessor's Property Tax Parcel/Account Number: P117367  
(Attach full legal description of the property)

- Decedent left no Last Will and Testament.
- Decedent left a Last Will and Testament which HAS NOT been Probated or Revoked.

"Heirs at law" includes surviving spouse, children, adopted children, issue of predeceased child or adopted child, parents, brothers and sisters of the decedent. Affiant hereby identifies all heirs at law of the decedent: (use additional pages if necessary)

UNION  
Daniel Naris grandson

Full name, age, relationship, address

8150 SW 145<sup>th</sup> St.

Dunmellon FL 34432

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

DOCUMENT

UNFILED

Dated: APRIL 14, 2017

LORI WEEKS, GUARDIAN OF THE PERSON AND OF THE ESTATE OF  
JEAN S. HARRIS, SKAGIT COUNTY SUPERIOR CAUSE NO. 16-4-00142-4

Affiant's full name

928 890-8118

Telephone number

PO Box 16810

Amecortes WA Street

98221

City

State

Zip Code

Lori Weeks

Signature

4/14/17

Date

guardian  
for Jean Harris

State of \_\_\_\_\_

County of \_\_\_\_\_

I know or have satisfactory evidence that \_\_\_\_\_

(name of person)

is the person who appeared before me, and said person acknowledged that (he/she) signed this affidavit and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this affidavit.

Dated: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Notary Public

(SEAL OR  
STAMP)

Residing at: \_\_\_\_\_

Notary Public in and for the State of \_\_\_\_\_

My appointment expires: \_\_\_\_/\_\_\_\_/\_\_\_\_

UNFILED DOCUMENT

State of Washington }  
County of Skagit } SS:

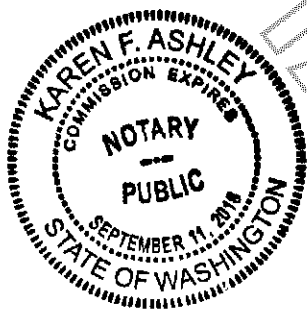
I certify that I know or have satisfactory evidence that Lori Weeks  
signed this instrument, on oath stated that

She is  
authorized to execute the instrument and acknowledged it as the

Guardian  
of The Person and of the Estate of Jean S. Harris, Skagit to be the free and voluntary act of such  
County Superior Court Cause No. 16-4-00142-4  
party for the uses and purposes mentioned in this instrument.

Dated: April 14, 2017

Karen Ashley *Karen Ashley*  
Notary Public in and for the State of Washington  
Residing at Sedro-Woolley  
My appointment expires: 9/11/2018



UNINCORPORATED QUAL DOCUMENT