

Return Address:

Land Title + Escrow
111 E. George Hopper Rd.
Burlington, WA 98233



201707250031

Skagit County Auditor

\$76.00

7/25/2017 Page

1 of

3 11:20AM

Order Number: 01-163803-OE

State of Washington

County of Skagit

Land Title and Escrow

LACK OF PROBATE AFFIDAVIT

BEFORE ME, this undersigned authority, on this day personally appeared Karen Faley Benedict
Affiant(s), being by me first duly sworn upon his/her oath, did depose and say:

1. This affidavit is made pursuant to RCW 82.45.197.
2. The full name of the decedent is: Roy Loren Benedict
3. The decedent died on 21st (date) at MT Vernon (City), Skagit (County), Washington (State).
Nov 2013
4. My/ Our relationship to the decedent is as follows:
Spouse
5. ☒ I am/ We are the rightful heirs to the property described herein.
6. ☐ Decedent left no last Will; or ☒ Decedent left a Will that is not being probated.
7. The property subject to this affidavit is described as (see Exhibit A attached hereto)

Abbreviated legal:

Lot 57, "PLAT OF EAGLEMONT PHASE 1A," as per plat recorded in Volume 15 of Plats, pages 130 through 146, inclusive, records of Skagit County, Washington.

Situate in the City of Mount Vernon, County of Skagit, State of Washington.

Tax ID Number: 4621-000-057-0006/P104324

8. The Affiant acknowledges that a certified copy of the deceased Death Certificate will be attached to this document prior to recording if required by the County.
9. The deceased is survived by the following heirs:

Full Name	Age	Relationship
<u>Karen Faley Benedict</u>	<u>68</u>	<u>Spouse</u>

Full Name	Age	Relationship
Full Name	Age	Relationship
Full Name	Age	Relationship
Full Name	Age	Relationship
Full Name	Age	Relationship
Full Name	Age	Relationship

Karen Fahey Benedict
Affiant's Signature

Karen Fahey Benedict
Printed Name of Affiant

1316 Alpine View Drive
Mount Vernon WA 98274
Address

State of: Washington

County of: Skagit

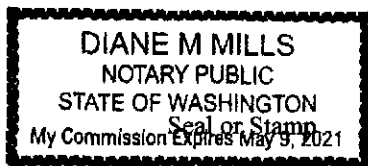
I certify that I know or have satisfactory evidence that Karen Fahey Benedict is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 7.24.17

Diane M Mills
Signature

Notary Public
Title

My appointment expires: 5.09.2021



Schedule "A-1"

01-163803-OE

DESCRIPTION:

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