## 202207220081

07/22/2022 03:47 PM Pages: 1 of 6 Fees: \$208.50

Skagit County Auditor, WA

Return Address:	REVIEWED BY SKAGIT COUNTY TREASURER
Sandra E Klier	DEPUTY <u>Kaylee Oudman</u> DATE 07/22/2022
8323 Cedar Grove Avenue	
Concrete WA 98237	

GNW 22-16179

## **AFFIDAVIT (LACK OF PROBATE)**

The undersigned affiant/grantee			, being first duly sworn
deposes and states as follows: That	Name of they are a rightful heir a		law, to the real property
the real property described below,	, and is <u>spouse</u>	Relationship to d	
		keiadonsnip to d	ecedent
of Peter A. Klier-Laenger		, who died on	September 7, 2017
Decedent/0	Grantor		Date .
at Junction City, OR			
City	County	•	State
REAL PROPERTY SUBJECT TO full. legal. pg. 4 Abbreviated Legal Description: Lo		Skagit	
Assessor's Property Tax Parcel/Ac (Attach full legal description of the		3877-000-004-0000	)
Decedent left no Last Will and	d Testament.	OT been Probated	or Revoked.
"Heirs at law" includes surviving predeceased child or adopted ch Affiant hereby identifies all heirs necessary)	nild, parents, brothers an	d sisters of the dec	edent.
			(Page 1 of 3)

REV 84 0017 (1/3/17)

Sandra E. Klier, 54, spouse
8323 Cedar Grove Ave, Concrete WA 98237
Full name, age, relationship, address
Connor Elisha V Klier, 18, son
8323 Cedar Grove Ave, Concrete WA 98237
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
Dated: July 18, 2022
Sandra E. Klier
Affiant's full name
Telephone number
8323 Cedar Grove Avenue
Street
Concrete WA 98237
City State Zip Code
8.1/ 07-19-2022
Signature   Date

(Page 2 of 3 )

REV 84 0017 (1/3/17)

State of WA	County of Skazit
I know or have satisfactory eviden	nce that Sandra E. Klier
	(name of person)
is the person who appeared before and acknowledged it to be (his/he affidavit.	e me, and said person acknowledged that (he/she) signed this affidavit r) free and voluntary act for the uses and purposes mentioned in this
Dated: 7/19/2022	Signature of Notany Rublic, 1
(SEAL OR STAMP)	Katfile M. Hickman
(SEAL OR STAMP)	Residing at: Crevett
Manual Manual Control of the Control	Notary Public in and for the State of <u>W74</u>
01442 01442 01466 010666 0314 03-25	My appointment expires: 1/3 /2025
01442 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

(Page 3 of 3 )

REV 84 0017 (1/3/17)

## **EXHIBIT A**

**LEGAL DESCRIPTION:** Real property in the County of Skagit, State of Washington, described as follows:

Lot 4, CEDARGROVE ON THE SKAGIT, according to the plat thereof, recorded in Volume 9 of Plats, pages 48 to 51, records of Skagit County, Washington. Situated in Skagit County, Washington.

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						1-4	
	•	OF	REGON HEALTH	AUTHORITY			- <del>-</del>
-	13615	CEN	TER FOR HEALT	*	S	136-2	2017-024199
Legal Name	AG NO. Firsi	Middle	CERTIFICATE O	F DEATH	Suffix	S Death Da	TATE FILE NUMBER
CCGCS (Value	Peter	Andreas	Klier-Laeng	er	<b>V</b> 2	- 1	 I September 07, 201
Sex		Ago	7	· · · · · ·	County	of Death	i September 07, 201
Male Birthdate		56 years Birthotace			Lane	Was Decedent E	ver in U.S.
	Ç 1960	Berlin, Germai	ny			Armed Forces?	No
Residence: 8323 Cedar (	Grove Avenue			City/Town			
Residence County  Skagit		I	or Foreign Country Shington	Z p Code + 4	8237	Inside Cit	y Limits?
Marital Status at Ti	me of Death	Spou	ise's Name Prior to First Mar			1110	
R Married  Father's Name  Office Albert D		Sar	ndra Elmede Klier	Mother's Name Prior	to First Marriage		
Kurt Albert R	einhold Rober	t Laenger Telephone Num	nher Relationship to	Decedent Mailing Ad	drass		
	de Klier	Not Availa	able Spouse			Avenue, Co	ncrete, WA 98237
Sandra Elfrie Place of Death Other - Mote	I		Facility Name				
Location of Death			Gity/Town or Location Junction City	n of Death	State	0	Zip Code + 4 97448
Method of Disposition	on .	Place of Disposition				Oregon {City/Town and S	
Cremation Name and Complete	le Address of Funera	Andreason's S	Springfield Cremation	n Center	Spring	gfield, Orego	on
	Cremation & B	Surial Services, ! Funeral Director's S	Springfield	320 N 6th		ringfield, On OR License Num	
Date of Disposition		LRUGLE! DIRECTO: P.O.					ider
TBD		▶ .	-	rf .	Licentralically		
Registrar's Signat		<b>•</b>	Stephen P Dockendo	Date Received	Electronically Signed	CO-3929 Local File Number	er
		<b>•</b>	-	Date Received	Electronically Signed	CO-3929	21
Registrar's Signat  Jennifer A.		<u>•</u>	-	Date Received	Electronically Signed	CO-3929	er
Registrar's Signat  Jennifer A.		<u>•</u>	-	Date Received	Electronically Signed	CO-3929	45-2CCS (01
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Registrar's Signat  Jennifer A.	Woodward  I CERTIFY THAT	THIS IS A TRUE AN	Stephen P Dockendo	Date Received Septem	Electronically Signed ther 13, 2017	CO-3929 Local File Number	45-2CCS (01 170912773*
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Beibehollung Dt. Staatsburgerschaft Andrag



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