

RECEIVED

AUG 22 2008

DEPARTMENT OF
WATER RESOURCES

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

DEV

Please print or type. Attach pages with additional information. Instructions are included at the end of this form. Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case IDWR will produce new water right number(s) for the split(s).

Water Right No(s)	Adjudication Claim No(s)	Split(s)	Water Right No(s)	Adjudication Claim No(s)	Split(s)
UC-97-2073					

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts.
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are on file with the county Planning and Zoning or Recorder's Office).
- OR**
- D. If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency or equivalent **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s)

Clarence & Violet Stengle

Rt 6

Prest River Id. 83856

4. New Owner/Claimant(s)

Estate of Albert Shoun

Name Connector (Check one): ☐ and, ☐ or, ☐ and/or

New Mailing Address

30 E. 33rd Ave

City, State and ZIP Code

Spokane, WA 99203-2607

New Telephone Number

(509) 838-5345 Email: clauben@comcast.net

5. Date you acquired the property

Mar 9, 1961

6. If the change in ownership affects the entire water right for each water right or adjudication claim number listed in line 1, then skip this line and go to line 7. If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (you may copy this page, if necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right will not be split, skip this area and proceed to line 7)		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Water Right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		
Water Right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		
Water Right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		

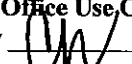
For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him/her for all matters related to your claims.

7. Signature(s) of New Owner(s) or Claimant(s)

 PR
 (title if applicable)
 (title if applicable)

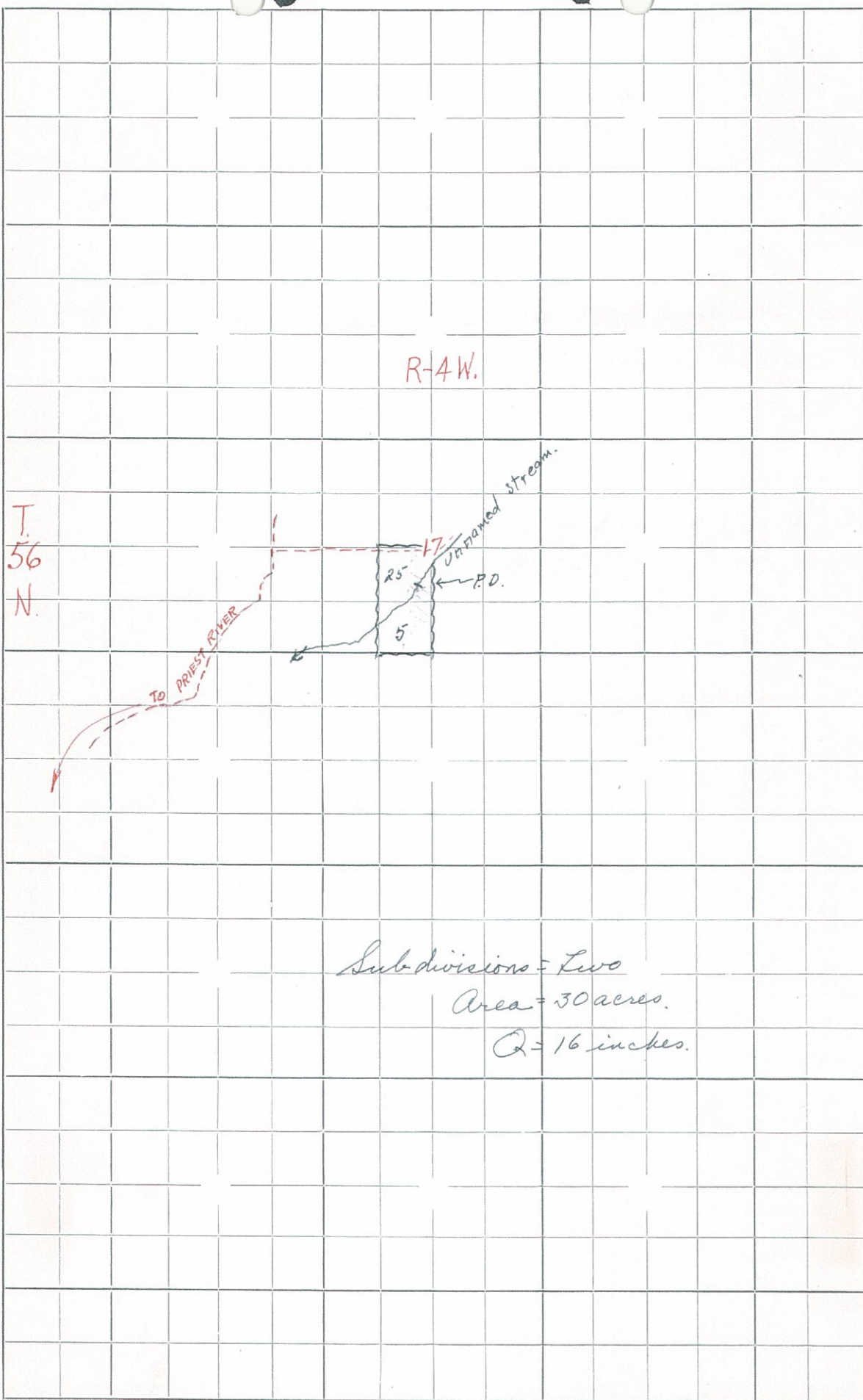
IT IS IMPORTANT TO FILE THIS COMPLETED FORM AT THE APPROPRIATE IDWR OFFICE, WITH PAYMENT OF THE FILING FEE AND THE OWNERSHIP DOCUMENT(S), AS REFERRED TO IN LINE 2.

For IDWR Office Use Only:

Received by 
 Received by _____
 Processed by _____ AJ

Date 8/22/08
 Date _____
 Date _____

✓ Receipt Amt. 0087443
 ✓ Receipt No. 2500
 WR _____ Date _____



Subdivisions = Two

Area = 30 acres.

Q = 16 inches.

THIS INDENTURE, Made this 6th day of March, 1961, between CLARENCE G. STENGEL, also known as CLARENCE STENGEL, and VIOLET STENGEL, his wife, of Priest River, County of Bonner, State of Idaho, the parties of the first part, and ALBERT J. SHOUN, a single man, and CHARLES J. SHOUN, JR., a single man, of Priest River, County of Bonner, State of Idaho, the parties of the second part.

WITNESSETH, That the said parties of the first part, for and in consideration of the sum of NINE THOUSAND FIVE HUNDRED and 00/100 DOLLARS (\$9,500.00), lawful money of the United States of America, to them in hand paid by the said parties of the second part, the receipt whereof is hereby acknowledged, have granted, bargained and sold, and by these presents do grant, bargain, sell, convey and confirm unto the said parties of the second part, and to their heirs and assigns forever, all the following described real estate, situated in the County of Bonner, State of Idaho, to-wit:

The Southwest Quarter (SW $\frac{1}{4}$) of SECTION SEVENTEEN (17), Township Fifty-six (56) North of Range Four (4) West of the Boise Meridian, LESS THE FOLLOWING TRACTS:

Beginning at the Southwest corner of Section 17, Township 56 North of Range 4 West of the Boise Meridian; thence running North 73 rods on said section line; thence East 47 rods; thence in a southeasterly direction 73 rods more or less to the South line of said Section 17; thence West along said South section line 62 rods to the place of beginning. Also,

Beginning at a point 62 rods East of the Southwest corner of Section 17, Township 56 North of Range 4 West of the Boise Meridian; thence East 300 feet; thence North 200 feet; thence West 300 feet, more or less; thence South 200 feet to the place of beginning; all being in Section 17, Township 56 North of Range 4 West of the Boise Meridian.

Together with all water and water rights, ditches and ditch rights used thereon or appurtenant thereto, including but not limited to License and Certificate of Water Right numbered 22313 issued by the Idaho Department of Reclamation.

Subject to exceptions and reservations contained in patents from the United States.

Subject to existing easements for roads, highways, ditches, canals, laterals, and power and transmission lines.



Atch 1. 201062

TOGETHER with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, the reversion and reversions, remainder and remainders, rents, issues and profits thereof, and all estate, right, title and interest in and to the said property, as well in law as in equity, of the said parties of the first part.

TO HAVE AND TO HOLD, All and singular, the above mentioned and described premises, together with the appurtenances, unto the said parties of the second part, and to their heirs and assigns forever. And the said parties of the first part, and their heirs, the said premises in the quiet and peaceable possession of the said parties of the second part, their heirs and assigns, against the said parties of the first part, and their heirs and against all and every person and persons whomsoever, lawfully claiming or to claim the same shall and will WARRANT and by these presents forever DEFEND.

IN WITNESS WHEREOF, The said parties of the first part have hereunto set their hands and seals the day and year first above written.

Clarence G. Stengel

Clarence G. Stengel, a/k/a Clarence Stengel

Violet Stengel

Violet Stengel

ACKNOWLEDGMENT

STATE OF IDAHO)
) ss:
COUNTY OF BONNER)

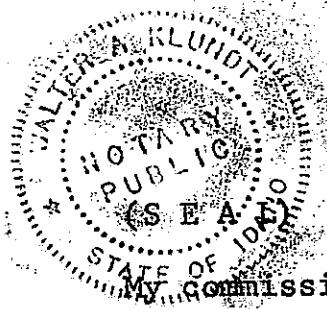
On this 6 day of March, 1961, before me, a Notary Public in and for said County and State, personally appeared CLARENCE G. STENGEL, also known as CLARENCE STENGEL, and VIOLET STENGEL, his wife, to me known to be the identical individuals described in and who executed the within and foregoing instrument and whose names are subscribed thereto, and acknowledged to me that they signed, sealed and executed the same as their free and voluntary act and deed, for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the day and year last above mentioned.

Walter A. Klundt

Notary Public in and for the State of Idaho, Residing at _____

NOTARY PUBLIC IN & FOR THE STATE OF IDAHO
RESIDING AT SANDPOINT, IDAHO
MY COMMISSION EXPIRES JANUARY 6, 1962



My Commission expires: NOTARY PUBLIC IN & FOR THE STATE OF IDAHO
RESIDING AT SANDPOINT, IDAHO
MY COMMISSION EXPIRES JANUARY 6, 1962

QUITCLAIM DEED

FOR VALUE RECEIVED, Albert J. Shoun, a single man, does hereby convey, release, remise and forever quitclaim unto Charles J. Shoun, Jr., a single man, of Route 6, Box 6, Priest River, Idaho 83856, all present and after-acquired interest in Parcels 1, 2, 3 and 4 described on the attached Exhibit "A".

DATED this 7th day of July, 1989.

Albert J. Shoun
Albert J. Shoun

FILED BY Charles J. Shoun Jr.
BOOK OF
PAGE FEE 6.00
'89 JUL 7 AM 11 39
CLIFFORD D. CHAPIN
RECORDER OF BONNER
COUNTY BY SC DEP.

STATE OF IDAHO)
County of Bonner) ss.

On this 7th day of July, 1989, before me a Notary Public, in and for said State, personally appeared ALBERT J. SHOUN, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal on the day and year last above written.

Shirley Mavity
Notary Public State of Idaho
Residing at Landpoint

Parcel 1: (a) Beginning at the Southwest corner of Section 17, Township 56 North of Range 4 West of the Boise Meridian; thence running North 73 rods on said section line; thence East 47 rods; thence in a southeasterly direction 73 rods more or less to the South line of said Section 17, thence West along said South section line 62 rods to the place of beginning; ALSO,

(b) Beginning at a point 62 rods East of the Southwest corner of Section 17, Township 56 North of Range 4 West of the Boise Meridian; thence East 300 feet; thence North 200 feet; thence West 300 feet, more or less; thence South 200 feet to place of beginning, all being in Section 17, Township 56 North of Range 4 West of the Boise Meridian.

Parcel 2: That part of the East Half of the Southeast Quarter ($E\frac{1}{2}SE\frac{1}{4}$) of Section 18, Township 56 North of Range 4 West of the Boise Meridian, described as follows:

Beginning at the Southeast corner of said Section 18; thence North $157\frac{1}{2}$ rods; thence West 69 rods; thence South 99 rods; thence Southeasterly to the place of beginning, EXCEPTING any part thereof which may be included in the East 994 feet of the South $16\frac{1}{2}$ feet of said $E\frac{1}{2}SE\frac{1}{4}$ of Section 18.

Parcel 3:

The Northwest Quarter of the Northwest Quarter ($NW\frac{1}{4}NW\frac{1}{4}$) of SECTION SEVENTEEN (17), Township Fifty-six (56) North of Range Four (4) West of the Boise Meridian

Parcel 4

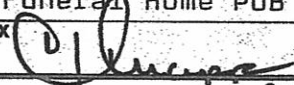
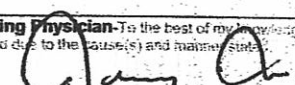
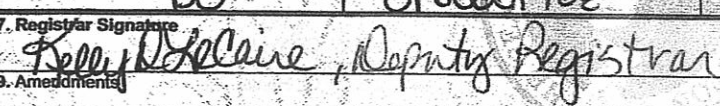
The Southwest Quarter ($SW\frac{1}{4}$) of SECTION SEVENTEEN (17), Township Fifty-six (56) North of Range Four (4) West of the Boise Meridian, LESS THE FOLLOWING TRACTS:

Beginning at the Southwest corner of Section 17, Township 56 North of Range 4 West of the Boise Meridian; thence running North 73 rods on said section line; thence East 47 rods; thence in a southeasterly direction 73 rods more or less to the South line of said section 17; thence West along said South section line 62 rods to the place of beginning. Also,

Beginning at a point 62 rods East of the Southwest corner of Section 17, Township 56 North of Range 4 West of the Boise Meridian; thence East 300 feet; thence North 200 feet; thence West 300 feet, more or less; thence South 200 feet to the place of beginning; all being in Section 17, Township 56 North of Range 4 West of the Boise Meridian.

STATE OF WASHINGTON

DEPARTMENT OF HEALTH

Local File Number		Washington State Certificate of Death				State File Number	
1. Legal Name (Include AKA's if any) First Middle LAST Suffix		2. Death Date					
Charles John SHOUN Jr.		Mar 29, 2005					
3. Sex (M/F)	4a. Age - Last Birthday	4b. Under 1 Year	4c. Under 1 Day	5. Social Security Number		6. County of Death	
Male	87	Months Days	Hours Minutes			Pend Oreille	
7. Birthdate	8a. Birthplace (City, Town, or County)		8b. (State or Foreign Country)		9. Decedent's Education		
Jan 19, 1918	Union		Montana		8th Grade or Less; 8th Grade		
10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify.				11. Decedent's Race(s)		12. Was Decedent ever in U.S. Armed Forces? Yes	
No				White		Yes	
13a. Residence: Number and Street (e.g., 624 SE 5 th St.) (Include Apt. No.)						13b. City or Town	
1870 Eastside Road						Priest River	
13c. Residence: County		13d. Tribal Reservation Name (if applicable)		13e. State or Foreign Country		13f. Zip Code + 4	
Bonner				Idaho		83856	
13g. Inside City Limits?							
☐ Yes ☒ No ☐ Unk							
14. Estimated length of time at residence.		15. Marital Status at Time of Death		16. Surviving Spouse's Name (Give name prior to first marriage)			
60 Years		Never Married					
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED))				18. Kind of Business/Industry (Do not use Company Name)			
Farmer/Rancher				Dairy/Cattle			
19. Father's Name (First, Middle, Last, Suffix)				20. Mother's Name Before First Marriage (First, Middle, Last)			
Charles Shoun				Marie Petrask			
21. Informant's Name		22. Relationship to Decedent		23. Mailing Address: Number and Street or RFD No. City or Town State Zip			
Albert Shoun		Brother		1870 Eastside Rd, Priest River, ID 83856			
24. Place of Death, if Death Occurred in a Hospital:							
Place of Death, if Death Occurred Somewhere Other than a Hospital:							
Long Term Care Facility							
25. Facility Name (If not a facility, give number & street or location)				26a. City, Town, or Location of Death		26b. State	
Newport Long Term Care				Newport		WA	
27. Zip Code							
99156							
28. Method of Disposition		29. Place of Final Disposition (Name of cemetery, crematory, other place)		30. Location-City/Town, and State			
Burial		Elk Cemetery		Elk, WA			
31. Name and Complete Address of Funeral Facility						32. Date of Disposition	
Sherman-Knapp Funeral Home POB 809, Newport, WA 99156						Apr 4, 2005	
33. Funeral Director Signature X 							
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. <u>RENAL FAILURE</u> Interval between Onset & Death <u>3 WEEKS</u>							
Due to (or as a consequence of):							
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. Due to (or as a consequence of): Interval between Onset & Death							
c. Due to (or as a consequence of): Interval between Onset & Death							
d. Due to (or as a consequence of): Interval between Onset & Death							
35. Other significant conditions contributing to death but not resulting in the underlying cause given above						36. Autopsy? ☐ Yes ☒ No	
37. Were autopsy findings available to complete the Cause of Death? ☐ Yes ☒ No							
38. Manner of Death		39. If female		40. Did tobacco use contribute to death?			
☒ Natural ☐ Homicide ☐ Accident ☐ Undetermined ☐ Suicide ☐ Pending		☐ 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		☐ Yes ☐ Probably ☒ No ☐ Unknown			
41. Date of Injury (mm/dd/yyyy)		42. Hour of Injury (24hrs)		43. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)		44. Injury at Work? ☐ Yes ☐ No ☐ Unk	
45. Location of Injury: Number & Street:		City or Town:		County:		State:	
						Zip Code+ 4:	
46. Describe how injury occurred						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, date, and place and due to the cause(s) and manner stated.						48b. Medical Examiner/Coroner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.	
X 						X	
49. Name and Address of Certifier - Physician, Medical Examiner or Coroner (Type or Print)						50. Hour of Death (24hrs)	
714 W Pine NEWPORT WA 99156						2130	
51. Name and Title of Attending Physician if other than Certifier (Type or Print)						52. Date Signed (mm/dd/yyyy)	
						3/30/05	
53. Title of Certifier		54. License Number		55. ME/Coroner File Number		56. Was case referred to ME/Coroner? ☐ Yes ☒ No	
DO		OP0000170E					
57. Registrar Signature						58. Date Received (mm/dd/yyyy)	
x  Deputy Registrar						03/30/2005	
59. Amendments							

Affidavit for Correction

Center for Health Statistics
P.O. Box 9709
Olympia, WA 98507-9709
(360) 236-4300

This is a legal document. Complete in ink and do not alter.

STATE OFFICE USE ONLY

State File Number	Fee Number	Initials	Date	Affidavit Number
Use the section below for requesting any changes on the record.				
Record Type: ☐ Birth ☐ Death ☐ Marriage ☐ Dissolution				
1. Name on record:		2. Date of Event:		3. Place of Event: (City or County)
4. Father's Full Name (For Birth): (Husband for Marriage or Dissolution)			5. Mother's Full Name (For Birth): (Wife for Marriage or Dissolution)	
The Record is incorrect or incomplete as follows:				
6. The Record now shows:		7. The True fact is:		
8.		9.		
10.		11.		
12.		13.		
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

APR - 4 2005


E.W. GRAY, M.D.
Health District Officer
N.E. Tri Co Health Dist.

MM00421705

After Recording Return to:
Lamanna Law Firm
P.O. Box 789
Priest River, ID 83856

FILED BY
Lamanna
2005 OCT 21 P 12:59
1200
MARIE SCOTT
BONNER COUNTY RECORDER
SA DEPUTY

690314

DEED OF PERSONAL REPRESENTATIVE

THIS DEED made this 14 day of oct, 2005 between **ALBERT J. SHOUN**,
Personal Representative of the Estate of **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**,
acting in his fiduciary capacity as such, of 1870 Eastside Road, Priest River, Idaho 83856, as
Grantor, and **ALBERT J. SHOUN**, an unmarried man, of 1870 Eastside Road, Priest River, Idaho
83856, as Grantee;

WITNESSETH:

WHEREAS, **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**, died on March 29,
2005 a resident of Bonner County, Idaho and left real property located in said Bonner County, Idaho
and described as follows:

PARCEL 1:

(a) Beginning at the Southwest corner of Section 17, Township 56
North of Range 4 West of the Boise Meridian; thence running North
73 rods on said section line; thence East 47 rods; thence in a
southeasterly direction 73 rods more or less to the South line of said
Section 17, thence West along said south section line 62 rods to the
place of beginning; ALSO

DEED OF PERSONAL REPRESENTATIVE
P-1

Atel 4, pg 1 of 4

(b) Beginning at a point 62 rods East of the Southwest corner of Section 17, Township 56 North, Range 4 West of the Boise Meridian; thence East 300 feet; thence North 200 feet; thence West 300 feet, more or less; thence south 200 feet to place of beginning, all being in Section 17, Township 56 North of Range 4 West of the Boise Meridian.

PARCEL 2:

That part of the East Half of the Southeast Quarter of Section 18, Township 56 North of Range 4 West of the Boise Meridian described as follows:

Beginning at the Southeast corner of said Section 18; thence North 157 ½ rods; thence West 69 rods; thence South 99 rods; thence Southeasterly to the place of beginning, EXCEPTING any part thereof which may be included in the East 994 feet of the South 16 ½ feet of said East Half of the Southeast Quarter of Section 18.

PARCEL 3:

The Northwest Quarter of the Northwest Quarter of Section 17, Township 56 North of Range 4, West of the Boise Meridian.

PARCEL 4:

The Southwest Quarter of Section 17, Township 56 North of Range 4 West of the Boise Meridian, LESS THE FOLLOWING TRACTS:

Beginning at the Southwest corner of Section 17, Township 56 North, Range 4 west of the Boise Meridian; thence running North 73 rods on said section line; thence East 47 rods; thence in a Southeasterly direction 73 rods more or less to the South line of said Section 17; thence West along said South section line 62 rods to the place of beginning. Also,

Beginning at a point 62 rods East of the Southwest corner of Section 17, Township 56 North of Range 4 West of the Boise Meridian; thence East 300 feet; thence North 200 feet; thence West 300 feet, more or less; thence South 200 feet to the place of beginning; all being in Section 17, Township 56 North of Range 4 West of the Boise Meridian.

TOGETHER WITH all water and water rights, ditches and ditch rights used thereon or appurtenant thereto, including but not limited

to License and Certificate of Water Right numbered 22313 issued by the Idaho Department of Reclamation.

PARCEL 5:

A tract of land located in the Southeast Quarter of Section 18, Township 56 North, Range 4 W.B.M., Bonner County, Idaho, more particularly described as follows:

Beginning at the East quarter corner of said Section 18; thence South $0^{\circ}43'35''$ East, along the East line of said Section, 107.97 feet to a point which is North $0^{\circ}43'35''$ West, 2598.75 feet from the Southeast corner of said Section 18; thence South $89^{\circ}16'25''$ West, 1138.50 feet; thence North $0^{\circ}43'35''$ West, 117.93 feet to its intersection with the East-West center section line of said Section 18; thence North $89^{\circ}46'31''$ East, along said East-West center section line, 1138.54 feet. LESS right-of-way for East Side Road.

AND, WHEREAS, the Estate of **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**, was admitted to informal probate in the Magistrate's Division of the District Court for Bonner County, Idaho on the 9th day of May, 2005 and pursuant to proceedings had on the said day, **ALBERT J. SHOUN** was found qualified and was appointed Personal Representative of the Estate of **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**, and Letters Testamentary were then and there issued;

AND, WHEREAS, **ALBERT J. SHOUN** is the heir entitled to inherit the real property hereinabove described pursuant to the Last Will and Testament of the said **CHARLES J. SHOUN**;

NOW, THEREFORE, **ALBERT J. SHOUN**, Personal Representative of the Estate of **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**, Grantor, pursuant to the authority vested in him by the Letters Testamentary, copies of which are on file with the above entitled Court, does hereby remise, release and quitclaim unto the Grantee, his heirs and assigns forever, all the right, title and interest and estate of **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**, at the time of his death, and also all of the right, title and interest of the said Personal Representative acquired by

DEED OF PERSONAL REPRESENTATIVE
P-3

operation of law, in and to all of that certain real property situated in Bonner County, Idaho, and hereinabove more particularly described.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand.

Albert J. Shoun
Albert J. Shoun
Personal Representative of the estate of
CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun

STATE OF IDAHO,)
 : ss
County of Bonner.)

On this 14th day of Oct., 2005, before me, the undersigned, a Notary Public in and for said state, personally appeared, **Albert J. Shoun**, Personal Representative of the Estate of **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**, known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same as Personal Representative of the Estate of **CHARLES J. SHOUN, JR., a/k/a Charles J. Shoun**.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year first above written.



Arlene Nelson
Notary Public – State of Idaho.
Residing at Priest River, therein.
My commission expires: 9-28-2010.

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
CERTIFICATE OF DEATH

Date Filed **MAY 09, 2008**

State File No. **2008-03717**

DECEDENT - LEGAL NAME ALBERT JOE SHOUN			
SEX MALE	SOCIAL SECURITY NUMBER [REDACTED]	AGE 84 YEARS	DATE OF BIRTH MAY 30, 1923
BIRTHPLACE UNION, MONTANA		PLACE OF RESIDENCE PRIEST RIVER, IDAHO	
MARITAL STATUS AT TIME OF DEATH NEVER MARRIED		NAME OF SURVIVING SPOUSE (If wife, maiden name) WAS DECEDENT EVER IN U.S. ARMED FORCES? YES	
FATHER - NAME CHARLES SHOUN		BIRTHPLACE CZECHOSLOVAKIA	
MOTHER - MAIDEN NAME MARIE PETRASEK		BIRTHPLACE CZECHOSLOVAKIA	
METHOD OF DISPOSITION REMOVAL FROM STATE		FUNERAL SERVICE LICENSEE KC SHERWOOD	
NAME AND ADDRESS OF FUNERAL FACILITY SHERMAN-KNAPP FUNERAL HOME, INC, PRIEST RIVER, IDAHO			
DATE OF DEATH APR. 19, 2008	TIME OF DEATH A.M. HOURS	CITY, TOWN OR LOCATION OF DEATH PRIEST RIVER, IDAHO	COUNTY OF DEATH BONNER
CAUSE OF DEATH (underlying cause last) GSW TO CHEST			Approximate Interval Between Onset and Death MINUTES
DUE TO (or as a consequence of) a. b. c. d. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE STATED			
MANNER OF DEATH COULD NOT BE DETERMINED		NAME OF CERTIFIER KATHRYN E. ROSE	TITLE CORONER
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY APR. 19, 2008	TIME OF INJURY P.M. HOURS	PLACE OF INJURY DECEDENT'S HOME	INJURY AT WORK NO
LOCATION WHERE INJURY OCCURRED 1870 EAST SIDE RD., PRIEST RIVER, IDAHO			
DESCRIPTION OF HOW INJURY OCCURRED SELF INFLICTED GSW TO CHEST			

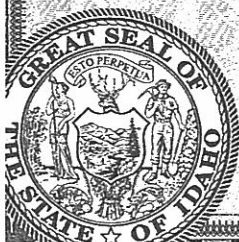
This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

MAY 12, 2008

DATE ISSUED:

This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.


JANE S. SMITH
STATE REGISTRAR



1 Peter J. Grabicki
2 RANDALL & DANSKIN, P.S.
3 601 W. Riverside, Suite 1500
4 Spokane, WA 99201
(509) 747-2052

5 Attorneys for Personal Representative

STATE OF IDAHO
COUNTY OF BONNER
FIRST JUDICIAL DIST.

2008 MAY -6 A 9 12

MARIE SCOTT
CLERK DISTRICT COURT

DEPUTY

7 IN THE DISTRICT COURT OF THE FIRST JUDICIAL DISTRICT OF
8 THE STATE OF IDAHO, IN AND FOR THE COUNTY OF BONNER
9

10 IN THE MATTER OF THE ESTATE OF)
11)
12)

13 ALBERT JOE SHOUN,
14)
15)

Deceased.)
16)

CASE NO. CV 2008-00731

LETTERS TESTAMENTARY
(I.C. 15-3-602 and 15-3-702)

- 17 1. MARCELLA BENJAMIN is hereby appointed and has qualified as Personal
18 Representative of the estate of the above-named decedent by the Court with all
authority pertaining thereto. Administration of the estate is unsupervised.
- 19 2. These letters are issued to evidence the appointment, qualification, and authority of the
20 said personal representative or special administrator.

21 WITNESS, my signature and the Seal of this Court, this 6 day of May, 2008.

22
23 DEBRA A. HEISE

24 47 MAGISTRATE
25
26
27
28

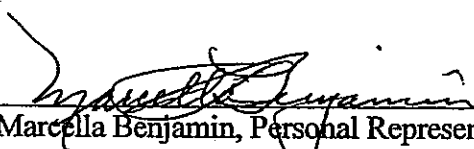
LETTERS TESTAMENTARY - 1

RANDALL & DANSKIN, P.S.
ATTORNEYS AND COUNSELORS
1500 BANK OF AMERICA FINANCIAL CENTER
601 WEST RIVERSIDE AVENUE
SPOKANE, WASHINGTON 99201-0653
(509) 747-2052

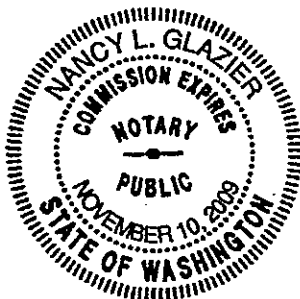
Atch 6, pg 1 of 2

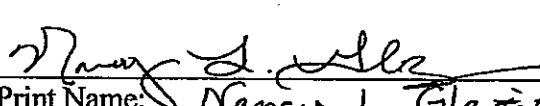
1 STATE OF WASHINGTON)
2) ss.
3 County of Spokane)

4 The undersigned hereby accepts the appointment to the office of personal representative
5 of the Estate of Albert Joe Shoun, deceased, and does solemnly swear that I will perform,
6 according to law, the duties of personal representative of said estate.

7
8 
9 Marcella Benjamin, Personal Representative
10 c/o Peter J. Grabicki
11 Randall & Danskin, P.S.
12 601 W. Riverside Ave., Ste. 1500
Spokane, WA 99201
(509) 747-2052

13 SUBSCRIBED AND SWORN to before me this 30th day of April, 2008.



29 
30 Print Name: Nancy L. Glazier
31 NOTARY PUBLIC in and for the State of
32 Washington, residing at Spokane
33 My Commission Expires: 11/10/09

LETTERS TESTAMENTARY - 2

RANDALL & DANSKIN, P.S.
ATTORNEYS AND COUNSELORS
1500 BANK OF AMERICA FINANCIAL CENTER
601 WEST RIVERSIDE AVENUE
SPOKANE, WASHINGTON 99201-0653
(509) 747-2052

Atch 6, pg 2 of 2