

When Recorded Please Return To:
LAWRENCE A. PIRKLE
321 W. Washington, Suite 300
Mount Vernon, WA 98273
(360) 336-6587



201303270062
Skagit County Auditor

3/27/2013 Page 1 of 8 10:37AM

DOCUMENT TITLE: Affidavit in Support of Community Property Agreement

REFERENCE NUMBER(S):

GRANTOR: Lisa J. Newman

GRANTEE: Public

LEGAL DESCRIPTIONS:

TPN: 340316-2-005-0000 (P22058)

One square acre in the Southwest corner of the Southwest 1/4 of the Northwest 1/4 of Section 16, Township 34 North, Range 3 East, W.M., Situate in the County of Skagit, State of Washington.

TPN: 330305-1-003-0420 (P15443) and 330305-1-003-0700 (P111553)

The North 1/2 of the Southeast 1/4 of the Northeast 1/4 of Section 5, Township 33 North, Range 3 East, W.M. Situate in the County of Skagit, State of Washington.

ASSESSOR PARCEL / TAX ID NUMBERS: TPN: 340316-2-005-0000 (P22058)

TPN: 330305-1-003-0420 (P15443)PN: 330305-1-003-0700 (P111553)

**AFFIDAVIT IN SUPPORT
OF
COMMUNITY PROPERTY AGREEMENT**

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

LISA J. NEWMAN, being first duly sworn, on oath, deposes and says:

1. This Affidavit provides information for the record regarding that certain Community Property Agreement dated the 15th day of March, 2012, executed by LEE M. NEWMAN and LISA J. NEWMAN, husband and wife, (the "Agreement") attached as Exhibit "A" incorporated herein by this reference. The statements set forth in this Affidavit are representations of fact which may be relied upon by all parties dealing with the properties commonly known as 14499 Best Road, Mount Vernon, Washington 98273 and 18257 Valentine Road, Mount Vernon, Washington 98273, and more fully described as follows:

TPN: 340316-2-005-0000 (P22058)

One square acre in the Southwest corner of the Southwest 1/4 of the Northwest 1/4 of Section 16, Township 34 North, Range 3 East, W.M., as conveyed to Harold L. McFarlane by deed recorded March 3, 1925 in Volume 134, page 628, EXCEPT that portion thereof conveyed to Skagit County for road purposes by deed dated July 19, 1966 and recorded July 25, 1966 under Auditor's File No. 685871, AND EXCEPT mineral rights reserved in deed from the State of Washington dated December 4, 1913, recorded December 15, 1913 in Volume 95 of Deeds, page 504.

Situate in the County of Skagit, State of Washington.

TPN: 330305-1-003-0420 (P15443) and 330305-1-003-0700 (P111553)

The North 1/2 of the Southeast 1/4 of the Northeast 1/4 of Section 5, Township 33 North, Range 3 East, W.M.

EXCEPT Valentine Road along the Westerly line thereof, and

EXCEPT that portion described as follows:

Commencing at the Southeast corner of said Southeast 1/4 of the Northeast 1/4 of Section 5 (East 1/4 corner);
thence North 0°11'24" West 658.96 feet along the East line of said



subdivision to the Southeast corner of said North 1/2 of the Southeast 1/4 of the Northeast 1/4;
thence North 89°16'32" West 920.83 feet, more or less, along the South line of said North 1/2 of the Southeast 1/4 of the Northeast 1/4 to an intersection with the southerly extension of a North-South fence line and being the TRUE POINT OF BEGINNING;
thence North 0°11'49" East 27.29 feet to the South end of said fence;
thence along said fence line as follows:
North 0°11'49" East 88.03 feet;
thence North 0°43'09" East 130.28 feet;
thence North 10°10'31" West 15.19 feet;
thence North 1°45'49" East 74.17 feet;
thence North 0°20'14" East 124.60 feet, more or less, along said fence line, or fence line extended, to the South line of the North 200.00 feet of said North 1/2 of the Southeast 1/4 of the Northeast 1/4;
thence West along the South line of said North 200.00 feet, to the East line of Valentine Road;
thence South along the East line of Valentine Road to the South line of said North 1/2 of the Southeast 1/4 of the Northeast 1/4;
thence Easterly, along said South line, to the TRUE POINT OF BEGINNING.

EXCEPTING FROM ALL OF THE ABOVE, the South 235.00 feet thereof;

SUBJECT TO Matters disclosed by record of survey recorded under Auditor's File No. 8303150056; Easement recorded under Auditor's No. 8505020019; Covenants, Conditions and Restrictions, contained in Deed recorded under Auditor's No. 200107060018.

ALSO SUBJECT TO farm and agricultural tax classification disclosed by notice recorded under Auditor's File No. 830700004 and are subject to provisions of RCW 84.34, re-recorded under Auditor's File No. 8302040009 and timber land tax classification disclosed by notice recorded under Auditor's File NO. 200107050132 and subject to provisions of RCW 84.34, said instrument is a re-recording of Auditor's File No. 9707080026, which tax classification the Grantees herein agree to continue according to the terms and conditions thereof.

Situate in the County of Skagit, State of Washington.

2. LEE M. NEWMAN (the "Decedent") was one of the parties to the Agreement and died on March 1, 2013 in Skagit County, Washington. The Decedent's Death Certificate is attached as Exhibit "B" incorporated herein by this reference.



3. The parties to the Agreement were legally competent at the time of the Agreement and executed no subsequent Wills or agreement which would have the effect of abrogating or nullifying the Agreement.

4. The real property owned by the Decedent and the affiant is legally described above.

5. The Decedent left no separate property.

6. All obligations of the community composed of the Decedent and the affiant owing at the date of the Decedent's death have been paid in full, and all expenses of last illness and for funeral and burial services of the Decedent have been paid.

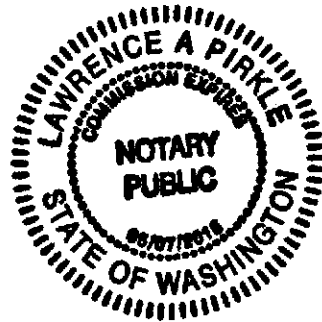
7. The Decedent was survived by the following person:

<u>Name and Address</u>	<u>Relationship</u>	<u>Age</u>
LISA J. NEWMAN PO Box 2574 Mount Vernon, WA 98273	Spouse	Legal

DATED this 22nd day of March, 2013.

Lisa Newman
LISA J. NEWMAN

SIGNED AND SWORN to before me this 22nd day of March, 2013.



LAWRENCE A. PIRKLE

Lawrence A. Pirkle
NOTARY PUBLIC in and for the
State of Washington,
Residing at Mount Vernon
My appointment expires: 5/7/15



COMMUNITY PROPERTY AGREEMENT

AGREEMENT made this 15th day of March, 2012, between LEE M. NEWMAN and LISA J. NEWMAN, Husband and Wife, both of whom are domiciled in the State of Washington. In consideration of their mutual promises set forth below, the parties agree as follows:

A. *Revocation of Prior Agreements.* If before this date the parties have executed a community property agreement or any other agreement other than a Will or trust which is signed by both of them and which specifically provides for the disposition of their community property at the time either or both of them die, then any such agreement is terminated by this Agreement.

B. *Property Covered.* This Agreement shall apply to all community property now owned or hereafter acquired by Husband and Wife. Any separate property of either, [now owned or hereafter acquired,] shall become and be considered community property upon the death of the party owning said separate property. All such community property is referred to in this Agreement as the "subject property."

C. *Vesting at Death.* On the death of either Husband or Wife, all of the subject property shall vest in the survivor of them.

D. *Disclaimer.* Upon the death of either spouse, the surviving spouse may disclaim any interest passing under this Agreement in whole or in part, and the interest disclaimed shall pass under the terms and conditions of any validly executed Will which the decedent may have executed, and in default thereof according to the laws of intestacy as governed by the statutes of the State of Washington then in effect.

E. *Automatic Revocation.* In the absence of other evidence indicating the party's intent to terminate this Agreement, it shall, nevertheless, be deemed mutually terminated and of no further force or effect upon either party's filing a petition, complaint or other pleading for dissolution of their marriage or divorce, or upon a court of competent jurisdiction dissolving the marriage or granting a decree of divorce or separate maintenance to either of them.

F. *Optional Revocation by One Party.* This Agreement may be terminated by either party acting alone by delivery of a written notice of revocation to the other party or the other party's legal representative, and by recording such revocation with the Skagit County, Washington, Recorder's Office where real property transactions in Skagit County, Washington are recorded.

If either party becomes disabled, the other party shall have the power to terminate this Agreement, and each party designates the other as attorney-in-fact to become effective



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Skagit County Auditor


ORIGINAL

Lawrence A. Pirkle
Attorney at Law
(360) 336-6587


upon disability to exercise such power. Such termination shall be effective upon the delivery of written notice thereof to the disabled spouse, and to the guardian, if any, of the person and of the estate of the disabled person. For the purpose of this paragraph, a spouse shall be deemed disabled if such spouse's regularly attending physician signs a statement declaring that such spouse is unable to manage his or her own affairs; or if such spouse has no regularly attending physician, if such a statement is signed by two qualified physicians who have adequately examined the disabled spouse. An adjudication of incompetence by a court of competent jurisdiction shall also be proof of a spouse's disability for purposes of this paragraph.

G. *Powers of Appointment.* This Agreement shall not affect any power of appointment now held by or hereafter given to either party, nor shall it obligate either of them to exercise any such power of appointment in any way.

H. *Survivorship.* As used herein, the term "survivor" or "survivorship" shall mean living for a period of thirty (30) days following the death of the first of the aforementioned parties to die.



LEE M. NEWMAN

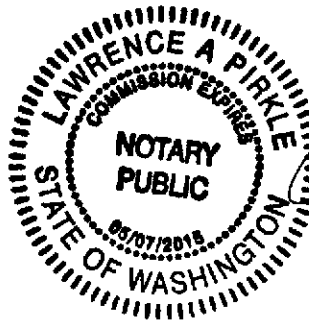


LISA J. NEWMAN

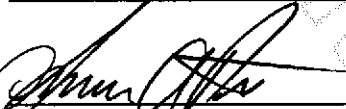
STATE OF WASHINGTON)
)
COUNTY OF SKAGIT) ss

On this day personally appeared before me, LEE M. NEWMAN and LISA J. NEWMAN, to me known to be the individuals described in and who executed the within and foregoing instrument, and acknowledged that they signed the same as their free and voluntary act and deed for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this 15th day of March, 2012.



LAWRENCE A. PIRKLE



NOTARY PUBLIC in and for the
State of Washington
Residing at Mount Vernon
My Commission Expires: 5/7/15



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2013-004102

DATE ISSUED: 03/11/2013

FEE NUMBER: 000000029

GIVEN NAMES: LEE MITCHELL
LAST NAME: NEWMAN

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: MARCH 01, 2013
HOUR OF DEATH: 08:25 P.M.
SEX: MALE
AGE: 58 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: [REDACTED]
BIRTHPLACE: SEATTLE, KING CNTY, WASHINGTON

MARITAL STATUS: MARRIED
SPOUSE: LISA JAYNE HARJES

OCCUPATION: EXCAVATION CONTRACTOR
INDUSTRY: CONSTRUCTION
EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE
US ARMED FORCES? NO

INFORMANT: LISA JAYNE NEWMAN
RELATIONSHIP: WIFE
ADDRESS: 14499 BEST ROAD MOUNT VERNON, WA 98273

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 14499 BEST ROAD
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273

RESIDENCE STREET: 14499 BEST ROAD
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
INSIDE CITY LIMITS? NO
COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 24 YEARS

FATHER: DALE S NEWMAN
MOTHER: FLORENCE M [REDACTED]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MT. VERNON CEMETERY CREMATORY
CITY, STATE: MOUNT VERNON, WA
DISPOSITION DATE: MARCH 06, 2013

FUNERAL FACILITY: KERN FUNERAL HOME
ADDRESS: 1122 S. 3RD STREET
CITY, STATE, ZIP: MT. VERNON WA 98273
FUNERAL DIRECTOR: JEREMIAH T. LESOURD

- CAUSE OF DEATH:
A. POORLY DIFFERENTIATED ESOPHAGEAL ADENOCARCINOMA
INTERVAL: 11 MONTHS
B. INTERVAL:
C. INTERVAL:
D. INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK?
PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

MANNER OF DEATH: NATURAL
AUTOPSY: NO
AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH? PROBABLY
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

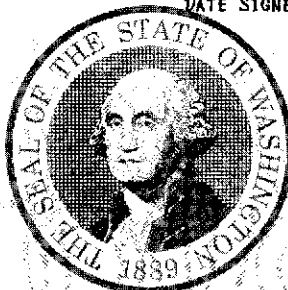
CERTIFIER NAME: RICO ROMANO, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 1990 HOSPITAL DRIVE, SUITE 200
CITY, STATE, ZIP: SEDRO WOOLLEY WA 98284
DATE SIGNED: MARCH 05, 2013

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

ITEM(S) AMENDED: DEATH HR



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CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NJA-135
ATTENDING PHYSICIAN:
NOT APPLICABLE

LOCAL DEPUTY REGISTRAR:
MARIA VIVANCO
DATE RECEIVED: MARCH 06, 2013

DOH 01-003 (12/11)



Affidavit for Correction

Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
(360) 236-4330

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
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Use the section below for requesting any changes on the record.

Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution

1. Name on record:	2. Date of Event:	3. Place of Event: (City or County)
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4. Father's Full Name (For Birth): (Husband for Marriage or Dissolution)	5. Mother's Full Maiden Name (For Birth): (Wife for Marriage or Dissolution)
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The Record is incorrect or incomplete as follows:

The Record now shows:	The True fact is:
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6.	7.
8.	9.
10.	11.
12.	13.

14. I represent the person as: <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (Specify)	Telephone Number:
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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:
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All vital records are registered as receiver.

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

Examples of documentary proof:

Certificate of Naturalization	Numident Report (Social Security Administration)	School Transcripts (Official)
Hospital/Medical Record	Military Record (DD-214)	Voter's Registration Card (if it bears an effective date)
Life Insurance Policy	Birth Record	Alien Registration Card (front and back)
Marriage/Divorce Record	Passport	We do not accept Driver's License, Social Security card or a hospital issued decorative birth certificate.

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.
- Child (under 18):**
 - Only parent(s) or legal guardian can change the birth certificate.
 - Guardian must submit certified court order giving them authority to act on behalf of child(ren).
 - Up to age one, the last name of the child can be changed once, to the mother's maiden name (father's name if present on the certificate) or any combination of the two. After age one a court ordered legal name change is required.
 - Parent(s) may change the child's first or middle name by completing this affidavit of correction. No proof is needed.
 - To correct birth date, place of birth or parent's information, one documentary proof is required.
- Adult (18 years or older):**
 - Only the adult themselves can change the birth certificate.
 - If the first or middle name is absent, three pieces of documentary proof are required.
 - If the first and/or middle name is misspelled, two pieces of documentary proof are required.
 - To correct birth date, place of birth or parent's information, one documentary proof is required.
 - Proof must be five (or more) years old or have been established within five years of birth.

4. **This affidavit cannot be used to add a father to a birth certificate. (Use the paternity acknowledgment - form DOH/CHS 021)**

Death Certificates:

- Only the informant, the funeral director, or cemetery 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) (in not 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 023a January 2012



CERTIFIED

MAR 11 2013

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

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