

After recording, return to:  
Harry L Witwick  
4200 Ankar Park Dr # 220  
Bellingham, WA 98225

CHICAGO TITLE  
620044116

Grantor (Name of Decedent): Bonnie L. Witwick  
Grantee (Heirs): Harry L. Witwick  
Abbreviated Legal Description: LT 23, BLK K, CAPE HORN ON THE SKAGIT DIVISION NO. 2  
Tax Parcel No.(s): P63351 / 3869-011-023-0004

**INHERITANCE LACK OF PROBATE AFFIDAVIT**  
**(To Be Recorded for Excise Tax Affidavit Claiming Exempt Transfer of Ownership)**

STATE OF WA

COUNTY OF Skagit

The undersigned, HARRY L. WITWICK, executes this affidavit relating to the estate of BONNIE L. WITWICK (herein "Decedent"), who died on 2-14-2018, in the County of Whatcom, State of Washington, then being a resident of the City of BELLINGHAM, County of Whatcom, State of Washington.

(A copy of the death certificate is attached hereto.)

The undersigned, being first duly sworn, on oath deposes and says:

1. This Affidavit is to be recorded as an affirmation of facts showing that I am a rightful heir to the property described below.

**Relationship of the Affiant to the Decedent**

2. The undersigned is (check one):

- the lawful surviving spouse of the Decedent
- Registered domestic partner of the Decedent
- Surviving child of the Decedent
- One (1) of the joint tenants named in that certain instrument creating a joint tenancy with a right of survivorship identified in that certain deed recorded on \_\_\_\_\_, [mm/dd/yyyy], under Recording No. \_\_\_\_\_, in \_\_\_\_\_ County, Washington.
- other (identify): \_\_\_\_\_

**INHERITANCE LACK OF PROBATE AFFIDAVIT**  
**(To Be Recorded for Excise Tax Affidavit Claiming Exempt Transfer of Ownership)**  
(continued)

**Names of All Heirs of the Decedent**

3. That all the heirs at law of the decedent that were living at the time decedent's death are listed below.  
[Use the reverse side or attach a list if necessary]

Name and relationship: Cherie Clendenen / step daughter  
Name and relationship: Harry L. Witwick, spouse  
Name and relationship: \_\_\_\_\_  
Name and relationship: \_\_\_\_\_

**Description of the Property**

4. That among the items of real property owned by the Decedent at the time of death was real estate located in the County of Skagit, State of Washington, and described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

5. **Status of the Will (if any)**

- The decedent left a Will that devises real property.
- The decedent left no Will that devises real property.

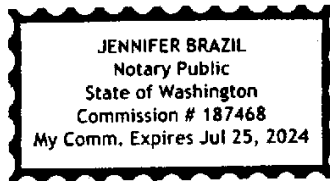
IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

Harry L. Witwick  
Signature

HARRY L. WITWICK  
Print Name

State of Washington  
County of Skagit

Signed and sworn to (or affirmed) before me on 8-31-2020 by \_\_\_\_\_  
Harry L. Witwick (name of person making statement).



Jennifer Brazil  
Name: Jennifer Brazil  
Notary Public in and for the State of Washington,  
Residing at: Skagit County  
My appointment expires: 7-25-2024

**EXHIBIT "A"**  
Legal Description

**For APN/Parcel ID(s): P63351 / 3869-011-023-0004**

---

LOT 23, BLOCK K, CAPE HORN ON THE SKAGIT DIVISION NO. 2, AS PER PLAT RECORDED IN VOLUME 9 OF PLATS, PAGES 14 THROUGH 19, INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

# STATE OF WASHINGTON DEPARTMENT OF HEALTH



## CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2018-067266

DATE ISSUED: 02/20/2018  
FEE NUMBER: 8496

FIRST AND MIDDLE NAME(S): BONNIE  
LAST NAME(S): WITWICK

COUNTY OF DEATH: WHATCOM  
DATE OF DEATH: FEBRUARY 14, 2018  
HOUR OF DEATH: 07:10 AM  
SEX: FEMALE AGE: 79 YEARS  
SOCIAL SECURITY NUMBER: [REDACTED]

PLACE OF DEATH: HOSPICE  
FACILITY OR ADDRESS: WHATCOM HOSPICE HOUSE  
CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98225

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO  
RACE: WHITE

RESIDENCE STREET: 4200 ANKAR PARK DRIVE 2  
CITY, STATE, ZIP: BELLINGHAM, WA 98226  
INSIDE CITY LIMITS: YES COUNTY: WHATCOM  
TRIBAL RESERVATION: NOT APPLICABLE  
LENGTH OF TIME AT RESIDENCE: 15 YEARS

BIRTH DATE: [REDACTED]  
BIRTH PLACE: VAN BUREN, MO

FATHER/PARENT: LAWRENCE MACY  
MOTHER/PARENT: OLLIE MAE V. [REDACTED]

MARITAL STATUS: MARRIED  
SPOUSE: HARRY WITWICK

METHOD OF DISPOSITION: CREMATION  
PLACE OF DISPOSITION: JERNIS CREMATORY

OCCUPATION: BEAUTICIAN  
INDUSTRY: SALON INDUSTRY  
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED  
US ARMED FORCES: NO

CITY, STATE: BELLINGHAM, WASHINGTON  
DISPOSITION DATE: FEBRUARY 16, 2018

INFORMANT: HARRY WITWICK  
RELATIONSHIP: HUSBAND  
ADDRESS: 4200 ANKAR PARK DRIVE #2 BELLINGHAM, WA 98226

FUNERAL FACILITY: JERNIS FUNERAL CHAPEL

ADDRESS: 800 E SUNSET DR  
CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98225  
FUNERAL DIRECTOR: BRADLEY W. BYTNAR

CAUSE OF DEATH:  
A: METASTATIC COLORECTAL ADENOCARCINOMA  
INTERVAL: ABOUT SIX WEEKS  
B:  
INTERVAL:  
C:  
INTERVAL:  
D:  
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

MANNER OF DEATH: NATURAL  
AUTOPSY: NO  
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE  
CAUSE OF DEATH: NOT APPLICABLE  
DID TOBACCO USE CONTRIBUTE TO DEATH: NO  
PREGNANCY STATUS IF FEMALE: NO RESPONSE

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

LOCATION OF INJURY:

CITY, STATE, ZIP:  
COUNTY:

DESCRIBE HOW INJURY OCCURRED:

CERTIFIER NAME: THERESE A. LANDRY, ARNP  
TITLE: ARNP  
CERTIFIER ADDRESS: 2800 & 2806 DOUGLAS  
CITY, STATE, ZIP: BELLINGHAM, WA 98225  
DATE SIGNED: FEBRUARY 14, 2018

CASE REFERRED TO ME/CORONER: NO  
FILE NUMBER: NOT APPLICABLE  
ATTENDING PHYSICIAN: THERESE LANDRY

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: LEEANN IMPERO  
DATE RECEIVED: FEBRUARY 15, 2018