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02/15/2022 02:56 PM Pages: 1 of 9 Fees: \$211.50
Skagit County Auditor

AFTER RECORDING MAIL TO:

JACOB COHEN
Post Office Box 889
Oak Harbor, WA 98277

Document Title(s): Affidavit Re: Community Property Agreement Lack of Probate of the Estate
of Daniel Arthur Renninger-CPA & Death Certificate Attached-Will Filed with Clerk

Reference No. of Documents assigned or released:

N/A

Grantor(s):

Victoria Georgina Renninger

Grantee(s):

The General Public

Abbreviated Legal Description as follows:

LOT 15, PLAT OF WILDERNESS VILLAGE, DIVISION NO. 1, AS PER PLAT
RECORDED IN VOLUME 10 OF PLATS, PAGES 48 THROUGH 50, RECORDS OF
SKAGIT COUNTY, WASHINGTON.

Assessor's Property Tax Parcel/Account Number(s):

P78198

After Recording, Return to:

Jacob Cohen
COHEN, MANNI, THEUNE & MANNI, LLP
P. O. Box 889
Oak Harbor, WA 98277

**AFFIDAVIT RE: COMMUNITY PROPERTY AGREEMENT
LACK OF PROBATE OF THE ESTATE OF DANIEL ARTHUR RENNINGER
CPA & DEATH CERTIFICATE ATTACHED
WILL FILED WITH CLERK**

Grantor: Victoria Georgina Renninger
Grantee: The General Public
Abbreviated Legal: The East Half of the South Half of the Southeast Quarter of the Southwest Quarter of the Northwest Quarter in Section 34, Township 33 North, Range 2, East of the Willamette Meridian.
Tax Parcel No: R23334-287-1210

STATE OF WASHINGTON)
) ss.
COUNTY OF ISLAND)

Victoria Georgina Renninger, being first duly sworn on oath, deposes and says:

I am the surviving wife of Daniel Arthur Renninger. Daniel Arthur Renninger was born on December 8, 1938 in Seattle, WA and died on June 20, 2021 in Oak Harbor, Washington. Daniel Aruthur Renninger's Social Security Number is 284-34-9377. Daniel Arthur Renninger was a legal resident of Island County, Washington at the time of his death. A copy of the Decedent's Death Certificate is attached hereto.

Daniel Arthur Renninger and Victoria Georgina Renninger, husband and wife, entered into a Community Property Agreement on December 20, 2010, a copy of said Agreement is attached hereto.

Daniel Arthur Renninger also left a Last Will and Testament which has been filed with the Island County Superior Court. In the Last and Will and Testament of Daniel Arthur Renninger, his wife Victoria Georgina Renninger is named as his sole, surviving heir. The Last Will and Testament of Daniel Arthur Renninger has not been probated as all of the property of Daniel Arthur Renninger passed to Victoria Georgina Renninger, his surviving wife, under the aforescribed Community Property Agreement.

All of the debts of the decedent Daniel Arthur Renninger, including but not limited to all expenses of the decedent's last illness and funeral and burial expenses, have been paid in full. There is no United States estate tax or Washington State inheritance tax due and owing as the estate of Daniel Arthur Renninger, due to its size, is exempt from filing for United States estate tax and/or Washington inheritance tax.

The Decedent had never received from the State of Washington assistance consisting of nursing facility services, home and community-based services, related hospital and prescription drug services, or any other type of medical assistance.

The approximate net value of the community estate as of the date of death, after subtracting all indebtedness, including all real and personal property, was approximately \$600,000 or less. The approximate value of all separate property owned by the decedent at the time of death was \$0.

Among other items of community property was the following described real property situated in the County of Island, State of Washington, as follows:

The East Half of the South Half of the Southeast Quarter of the Southwest Quarter of the Northwest Quarter in Section 34, Township 33 North, Range 2, East of the Willamette Meridian.

Parcel No. R23334-287-1210

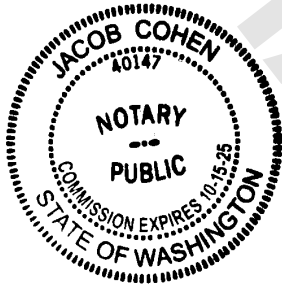
This affidavit is made to induce any title company relying on this affidavit to insure title to any real property in Island County, Washington in which the decedent had an interest at the time of His death, and the said title company may issue its policy or policies in full reliance on the representations

herein made. Victoria Georgina Renninger does hereby indemnify and agree to hold harmless any title insurance company which relies hereon by reason of insuring in reliance on these representations.

DATED this 31 day of January, 2022.

Victoria Georgina Renninger
VICTORIA GEORGINA RENNINGER

SUBSCRIBED AND SWORN TO before me this 31st day of January, 2022.



Jacob Cohen
NOTARY PUBLIC in and for the State of
Washington, residing at Offic The Box
My commission expires 10/15/2025

**STATE OF WASHINGTON
DEPARTMENT OF HEALTH**

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2021-029920

LOCAL FILE NUMBER: 287-21

DATE ISSUED: 06/25/2021

FEE NUMBER:

FIRST AND MIDDLE NAME(S): DANIEL ARTHUR
LAST NAME(S): RENNINGER

COUNTY OF DEATH: ISLAND
DATE OF DEATH: JUNE 20, 2021
HOUR OF DEATH: 03:30 PM
SEX: MALE AGE: 82 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

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

BIRTH DATE: [REDACTED]
BIRTHPLACE: SEATTLE, WA

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: VICTORIA GEORGINA PELLEY

OCCUPATION: CARPENTER
INDUSTRY: HOME CONSTRUCTION
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES: YES

INFORMANT: VICTORIA G RENNINGER
RELATIONSHIP: WIFE
ADDRESS: 1281 BLACKBERRY LANE, OAK HARBOR, WA 98277

CAUSE OF DEATH:
A: CARDIOPULMONARY ARREST
INTERVAL: YEARS
B: CONGESTIVE HEART FAILURE
INTERVAL: YEARS
C: HYPERTENSION
INTERVAL: YEARS
D: DIABETES
INTERVAL: YEARS

OTHER CONDITIONS CONTRIBUTING TO DEATH: KIDNEY DISEASE, BLADDER
CANCER,

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

LOCATION OF INJURY:

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

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 1281 BLACKBERRY LANE
CITY, STATE, ZIP: OAK HARBOR, WASHINGTON 98277

RESIDENCE STREET: 1281 BLACKBERRY LANE
CITY, STATE, ZIP: OAK HARBOR, WA 98277
INSIDE CITY LIMITS: NO COUNTY: ISLAND
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 45 YEARS

FATHER: WILLIAM ARTHUR RENNINGER
MOTHER: PHYLLIS MARIA [REDACTED]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: NORTHWEST CREMATORY

CITY, STATE: ANACORTES, WASHINGTON
DISPOSITION DATE: JUNE 25, 2021

FUNERAL FACILITY: EVANS FUNERAL CHAPEL & CREMATORY, INC.

ADDRESS: 1105 32ND STREET
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221
FUNERAL DIRECTOR: LEONARD J. WILLIAMS

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

CERTIFIER NAME: JON T. PETERSON, DO
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 1213 24TH STREET, SUITE 100
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221
DATE SIGNED: JUNE 23, 2021

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: JON PETERSON, DO

LOCAL DEPUTY REGISTRAR: MICHELLE MCKEE
DATE RECEIVED: JUNE 24, 2021



Affidavit for Correction

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

Mail to: Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
360-236-4300

STATE OFFICE USE ONLY

State File Number, Fee Number, Initials, Date, Affidavit Number

Required information must match current information on record

Record Type: Birth, Death, Marriage, Dissolution (Divorce)
1. Name on Record: First, Middle, Last
2. Date of Event: MM/DD/YYYY
3. Place of Event: (City or County)
4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution)
5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution)
6. Name of Person Requesting Correction: Relationship to Person on Record: Self, Guardian, Informant, Hospital, Parent(s), Funeral Director, Other (specify)

7. Return Mailing Address: PO Box or Street Address, City, State, Zip
Telephone Number:
Email Address:

Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:

8. The record currently shows: 9. The true fact is:
10. 11.
12. 13.

I declare under penalty of perjury under the laws of the State of Washington that the forgoing is true and correct.

14a. Signature: 14b. Signature of 2nd parent (if required):
Printed name: Date: Printed name: Date:

INSTRUCTIONS - go to www.doh.wa.gov for more information

Required proof documentation must be submitted with the affidavit and include full name and birth date. Examples of proof documentation include:
• Birth/Marriage/Divorce record • Military record (DD-214) • School transcripts • Social Security Numident Report
• Certificate of Naturalization • Hospital/medical record • Copy of Passport / Enhanced ID • Green/Permanent Resident card (I-551)
You cannot use a Driver's license, Social Security card, or hospital decorative birth certificate as proof documentation.

Birth Certificates

- 1. Only a parent(s), legal guardian (if the child is under 18), or the named individual (if 18 or older) may change the birth certificate.
2. The proof(s) must match the asserted fact(s). For example, if the affidavit says the name should be Mary Ann Doe, the proof must show the name to be Mary Ann Doe.
3. Proof documentation must be five or more years old or established within five years of birth.
4. This affidavit cannot be used to add a parent to a birth certificate (use Acknowledgment of Parentage form DOH 422-159).
Child under 18
• If legal guardian(s), include certified court order proving guardianship.
• Up to age one or up to one year following the filing of an Acknowledgment of Parentage form, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names); thereafter, a court order is required to change the last name.
• No proof is required to change the first or middle name.*
• To correct parent's information, one proof documentation is required.
• To correct the sex of the child, one proof documentation from a medical provider is required.
*To change any part of the name of a child using this form, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate with request.
Adult (18 years or older)
• Only the adult can change his or her birth certificate.
• If the first or middle name is missing, three pieces of proof documentation are required.
• If the first, middle and/or last name is misspelled, or month and/or day of birth is incorrect, two pieces of proof documentation are required.
• To correct parent's birth date, place of birth, or name, one proof documentation is required.

Death Certificates

- 1. Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family member may change the non-medical information with proof documentation. Family members are spouse or registered domestic partner, parent, sibling, or adult child or stepchild. Marital status requires a certified court order if someone other than the informant is requesting the change.
2. The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

- 1. Personal facts (minor spelling changes in name, date or place of birth, or residence) may be changed by the person with one piece of proof documentation.
2. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.



CERTIFIED

JUN 25 2021

Handwritten signature of Howard Leibrand

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



0 4 4 9 9 5 5 0

Certificate not valid unless the Seal of the State of Washington changes color when heat applied.

After recording please return to:

Grantors: Daniel Arthur Renninger and Victoria Georgina Renninger

Grantees: Daniel Arthur Renninger and Victoria Georgina Renninger

COMMUNITY PROPERTY AGREEMENT

KNOW ALL PERSON BY THESE PRESENTS:

WHEREAS, the undersigned Daniel Arthur Renninger and Victoria Georgina Renninger are husband and wife, and they desire to avail themselves to the provisions of Section 26.16.120 of the Revised Code of Washington, or any successor thereto, and to set forth their agreement as to the status, disposition and succession of property now owned or hereafter acquired by either or both of them.

NOW, THEREFORE, in consideration of their mutual love and affection, and the mutual agreements contained herein, the parties agree as follows:

All of their property, real, personal or mixed, and wheresoever situate, now owned or hereafter acquired by either or both of the parties, including separate property, shall be deemed, treated and known as and is hereby declared to be community property, irrespective of how or in whose name such property or any interest therein was acquired or hereafter is acquired.

Upon the death of either party, if the parties are still married and have not permanently separated, and if neither party has commenced a legal proceeding to dissolve their marriage, the then community property, whether heretofore existing, or as herein declared, or hereafter acquired, immediately shall vest in fee simple in the surviving party.

If either of the parties shall be declared incompetent by a court of competent jurisdiction, or upon application by or on behalf of one of the parties for Medicaid or any similar public assistance program where eligibility may be determined based on the resources of either party, then each party appoints the other as his or her special attorney-in-fact to, at his or her election, execute and record a mutual revocation of this agreement both as to the status of property and as to the disposition of property at death.

Each party recognizes that he or she has a right to be represented by independent counsel in arriving at this agreement and hereby waives said right. Each party has fully disclosed to the other all assets which he or she now owns and the value thereof.

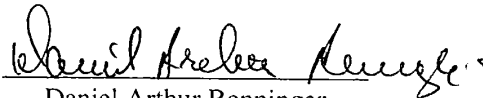
↓ WJR.

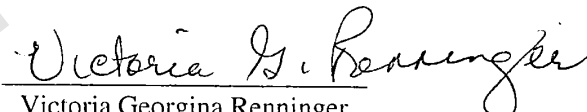
Upon the death of either party, the survivor may disclaim any interest passing under this agreement in whole or in part, or with reference to specific parts or shares thereof, in which event the interest disclaimed shall pass as if the provisions of this agreement had been revoked as to such interest with the surviving party being entitled to the benefits provided by any alternate disposition.

The provisions of any prior agreement regarding the status of property as separate property or community property are hereby revoke to the extent of any inconsistency with this agreement.

This agreement shall be binding upon and shall inure to the benefit of the parties and their respective heirs, administrators, successors and assigns.

IN WITNESS WHEREOF, Daniel Arthur Renninger and Victoria Georgina Renninger have executed this agreement this 20th day of December, 2010.


Daniel Arthur Renninger

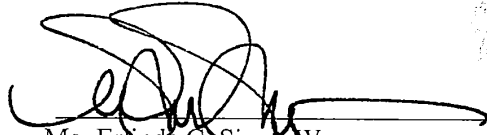

Victoria Georgina Renninger

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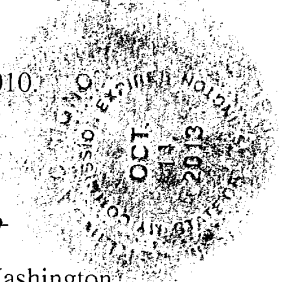
STATE OF WASHINGTON, COUNTY OF ISLAND, ss.

On this day personally appeared before me Daniel Arthur Renninger, known to me to be the individual described in and who executed the aforesaid instrument, and acknowledged that he had signed as his free and voluntary act and deed for the uses and purposes therein mentioned.

Given under my hand and official seal this 20th day of December, 2010



Ma. Erlinda C. Signo-Warren
Notary Public in and for the State of Washington
My commission expires on October 14, 2013



STATE OF WASHINGTON, COUNTY OF ISLAND, ss.

On this day personally appeared before me Victoria Georgina Renninger, known to me to be the individual described in and who executed the aforesaid instrument, and acknowledged that she had signed as her free and voluntary act and deed for the uses and purposes therein mentioned.

Given under my hand and official seal this 20th day of December, 2010



Ma. Erlinda C. Signo-Warren
Notary Public in and for the State of Washington
My commission expires on October 14, 2013

