

WHEN RECORDED RETURN TO:

Eggerman Law Firm
520 Kirkland Way Ste 400
Kirkland WA 98033

REVIEWED BY
SKAGIT COUNTY TREASURER
DEPUTY Lena Thompson
DATE 03/09/2022

DOCUMENT TITLE(S)

COMMUNITY PROPERTY AGREEMENT

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

N/A

GRANTOR(S):

GEORGE W. PLOUDRE and MARY K. PLOUDRE

GRANTEE(S):

MARY K. PLOUDRE

ABBREVIATED LEGAL DESCRIPTION:

Lake Cavanaugh Sub Div. 3, Lot 90, Blk 1

TAX PARCEL NUMBER(S):

P66861 / 3939-001-090-0009

COMMUNITY PROPERTY SURVIVORSHIP AGREEMENT

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THIS AGREEMENT entered into this 7th day of March, 1973, by and between GEORGE W. PLOUDRE and MARY K. PLOUDRE, his wife,

W I T N E S S E T H:

WHEREAS, the parties hereto are husband and wife and desire to declare all property now owned by them or hereafter acquired by them to be community property; and,

WHEREAS, the parties desire to make an agreement that upon the death of either, the whole of the community property shall vest in the survivor;

NOW, THEREFORE, BE IT AGREED that all property now owned by the parties, or hereafter to be acquired in any manner, including property acquired by gift, devise or inheritance, by either of the parties, shall be community property of the parties, and each of the parties does hereby convey and quit claim unto the marital community consisting of the two parties to this instrument all separate property now owned or hereafter acquired by such individual member of such marital community; and,

BE IT FURTHER AGREED that upon the death of either of the parties hereto the entire community property of the parties shall vest in the survivor, and no property shall remain as property of the deceased to be disposed of under the laws of intestate succession or by will.

EXECUTED at Seattle, Washington, the day and year first above written.

George W. Ploudre

STATE OF WASHINGTON)
) ss.
COUNTY OF KING)

Mary K. Ploudre

THIS IS TO CERTIFY that on this day personally appeared before me GEORGE W. PLOUDRE and MARY K. PLOUDRE, his wife, to me known to be the individuals described in and who executed the within and foregoing instrument, and each acknowledged that he signed the same as his free and voluntary act and deed for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this 7th day of March, 1973.

John F. Raymond
Notary Public in and for the State
of Washington, residing at Seattle.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2021-067753

DATE ISSUED: 01/10/2022
FEE NUMBER: 011022

FIRST AND MIDDLE NAME(S): **GEORGE WILLIAM**

LAST NAME(S): **PLOUDRE**

AKA: **GEORGE WILLIAM PLOUDRE**

COUNTY OF DEATH: **KING**

DATE OF DEATH: **DECEMBER 31, 2021**

HOUR OF DEATH: **10:15 AM**

SEX: **MALE**

AGE: **86 YEARS**

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: **NO, NOT SPANISH/HISPANIC/LATINO**

RACE: **WHITE**

BIRTH DATE: **DECEMBER 07, 1935**

BIRTHPLACE: **ST LOUIS, MO**

MARITAL STATUS: **MARRIED**

SURVIVING SPOUSE: **MARY ELIZABETH KAISER**

OCCUPATION: **CIVIL ENGINEER**

INDUSTRY: **U.S. ARMY CORPS OF ENGINEERS**

EDUCATION: **MASTER'S DEGREE**

US ARMED FORCES: **YES**

INFORMANT: **MARY E PLOUDRE**

RELATIONSHIP: **SPOUSE**

ADDRESS: **100 TIMBER RIDGE WAY NW, #2312, ISSAQUAH, WA 98027**

CAUSE OF DEATH:

A: **VENTRICULAR ARRHYTHMIA**

INTERVAL: **20 MINUTES**

B: **CONGESTIVE HEART FAILURE WITH PRESERVED EJECTION FRACTION**

INTERVAL: **6 YEARS**

C:

INTERVAL:

D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: **ATRIAL FIBRILLATION,
PROSTATE CANCER, ANTICOAGULATION**

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: **DECEDENT'S HOME**

FACILITY OR ADDRESS: **TIMBER RIDGE AT TALUS**

CITY, STATE, ZIP: **ISSAQUAH, WASHINGTON 98027**

RESIDENCE STREET: **100 TIMBER RIDGE WAY NW #2312**

CITY, STATE, ZIP: **ISSAQUAH, WA 98027**

INSIDE CITY LIMITS: **YES**

COUNTY: **KING**

TRIBAL RESERVATION: **NOT APPLICABLE**

LENGTH OF TIME AT RESIDENCE: **3 YEARS**

FATHER: **GEORGE WILLIAM PLOUDRE**

MOTHER: **MABLE ANN [REDACTED]**

METHOD OF DISPOSITION: **CREMATION**

PLACE OF DISPOSITION: **FLINTOFT'S ISSAQUAH CREMATORY**

CITY, STATE: **ISSAQUAH, WASHINGTON**

DISPOSITION DATE: **JANUARY 10, 2022**

FUNERAL FACILITY: **FLINTOFT'S FUNERAL HOME AND CREMATORY**

ADDRESS: **540 E SUNSET WAY**

CITY, STATE, ZIP: **ISSAQUAH, WASHINGTON 98027**

FUNERAL DIRECTOR: **ELIZABETH BATY**

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: **RICHARD FURLONG, MD**

TITLE: **PHYSICIAN**

CERTIFIER ADDRESS: **11800 NE 128TH ST #300**

CITY, STATE, ZIP: **KIRKLAND, WASHINGTON 98034**

DATE SIGNED: **JANUARY 05, 2022**

CASE REFERRED TO ME/CORONER: **NO**

FILE NUMBER: **NOT APPLICABLE**

ATTENDING PHYSICIAN: **NOT APPLICABLE**

LOCAL DEPUTY REGISTRAR: **GRACIE TANGALAN**

DATE RECEIVED: **JANUARY 06, 2022**

DOH 422-132 (8/18)

NOT VALID IF PHOTOCOPIED OR ALTERED