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03/02/2023 02:41 PM Pages: 1 of 6 Fees: \$208.50
Skagit County Auditor

Filed for Record at the Request of:

Aaron M. Rasmussen
North Sound Law Group PLLC
300 N. Commercial St.
Bellingham, WA 98225

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX
20235663
MAR 02 2023

Amount Paid \$ ~~0~~
Skagit Co. Treasurer
By *SIB* Deputy

DOCUMENT TITLE: Community Property Affidavit
GRANTOR: Gene M. Derig, Deceased, by Marilyn W. Derig, Surviving Spouse
GRANTEE: Marilyn W. Derig, Surviving Spouse
ABBREV. LEGAL DESCRIPTION: S24-T35-R01-QUEEN ANNE TO ANA LTS 1 TO 3 BLK 7
ASSESSOR'S TAX/PARCEL ID 3812-007-003-0004 / P58700 (Full Legal on Pg. 2)

COMMUNITY PROPERTY AFFIDAVIT

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

MARILYN W. DERIG, being first duly sworn, upon oath deposes and says:

1. I am the lawful surviving spouse of GENE M. DERIG ("Decedent"), who died on December 15, 2022 at Anacortes, Washington. Decedent's death certificate is attached hereto. At that time and at all times referenced in this document, Decedent and I both resided in the State of Washington.
2. On March 29, 2006, Decedent and I, while married, executed an agreement entitled Community Property Agreement ("the Agreement"), the original of which is attached hereto. In the Agreement, Decedent and I declared all property we then owned, along with any property acquired thereafter by either or both spouses, to be our community property. The Agreement further provides that such community property immediately vested in my sole ownership as the surviving spouse upon Decedent's death. Decedent and I were both legally competent at the time of the Agreement and executed no subsequent Wills or other instruments that would have had the effect of abrogating or nullifying the Agreement.
3. At the time of and as a result of the Agreement, and at all subsequent times, all real and personal property in which the either Decedent or I had any interest was our community property.

- 4. Among the items that Decedent and I held as community property at the time of his death was the following described real estate, situated in the City of Anacortes, County of Skagit, State of Washington:
 Lots 1, 2 and 3, Block 7, QUEEN ANNE ADDITION TO THE CITY OF ANACORTES, according to the per plat thereof recorded in Volume 2 of Plats, page 39, records of Skagit County, Washington.
- 5. All expenses of Decedent's last illness, funeral, and costs of administration were paid, and there are no are no unpaid creditors of Decedent or our former community estate, other than unmatured installment obligations that are current and being satisfied in due course.
- 6. No state or federal transfer taxes were payable in Decedent's estate.
- 7. Decedent executed a Will on May 13, 2015, designating me as the sole beneficiary of his estate. No proceedings have occurred, nor are any proceedings contemplated, to probate Decedent's estate.
- 8. This affidavit is made to induce any and all title insurance companies to issue policies of title insurance on real property that passed to me as Decedent's surviving spouse, whether acquired as community property or converted to community property by operation of the Agreement, in reliance upon the representations herein set forth.

DATED this 2nd day of March, 2023.

Marilyn W. Derig
MARILYN W. DERIG

SUBSCRIBED and SWORN (or affirmed) to before me this 2 day of March, 2023.



Aaron M. Rasmussen
 NOTARY PUBLIC in and for the State of
 Washington, residing at Mount Vernon
 My appointment expires 11/29/26.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2022-064607

DATE ISSUED: 12/21/2022
FEE NUMBER:FIRST AND MIDDLE NAME(S): GENE MARTIN
LAST NAME(S): DERIGCOUNTY OF DEATH: SKAGIT
DATE OF DEATH: DECEMBER 15, 2022
HOUR OF DEATH: 01:30 PM
SEX: MALE AGE: 78 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO
RACE: WHITEBIRTH DATE: [REDACTED]
BIRTHPLACE: TACOMA, WAMARITAL STATUS: MARRIED
SURVIVING SPOUSE: MARILYN E WELLSOCCUPATION: WILDLIFE SPECIALIST
INDUSTRY: US DEPARTMENT OF AGRICULTURE
EDUCATION: BACHELOR'S DEGREE
US ARMED FORCES: YESINFORMANT: MARILYN DERIG
RELATIONSHIP: WIFE
ADDRESS: PO BOX 341, ANACORTES, WA 98221CAUSE OF DEATH:
A: SIGNET RING ADENOCARCINOMA OF THE STOMACH
INTERVAL: MONTHS
B:
INTERVAL:
C:
INTERVAL:
D:
INTERVAL:OTHER CONDITIONS CONTRIBUTING TO DEATH: METASTASIS TO
INTRAABDOMINAL LYMPH NODES, PERICARDIAL AND PLEURAL EFFUSIONSDATE 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: 1302 - K AVENUE
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221RESIDENCE STREET: 1302 - K AVENUE
CITY, STATE, ZIP: ANACORTES, WA 98221
INSIDE CITY LIMITS: YES COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 37 YEARSFATHER: MATTHEW DERIG
MOTHER: INA [REDACTED]METHOD OF DISPOSITION: NATURAL ORGANIC REDUCTION
PLACE OF DISPOSITION: RETURN HOMECITY, STATE: AUBURN, WASHINGTON
DISPOSITION DATE: DECEMBER 23, 2022

FUNERAL FACILITY: EVANS FUNERAL CHAPEL & CREMATORY, INC.

ADDRESS: 1105 32ND STREET
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221
FUNERAL DIRECTOR: LEONARD J. WILLIAMSMANNER 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 RESPONSECERTIFIER NAME: ERIKA POPE, DO
TITLE: DO
CERTIFIER ADDRESS: 227 FREEWAY DRIVE, SUITE A
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
DATE SIGNED: DECEMBER 16, 2022CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: NOT APPLICABLELOCAL DEPUTY REGISTRAR: MARIA VIVANCO
DATE RECEIVED: DECEMBER 19, 2022



Affidavit for Correction

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Mail to: Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
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

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:

Table with 2 columns: The record currently shows: (8, 10, 12) and The true fact is: (9, 11, 13)

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

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

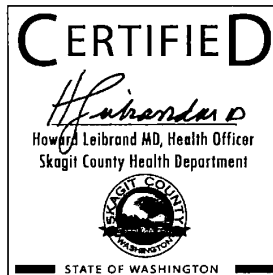
- 1. Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family member may change the non-medical information with proof documentation. Family members are spouse or registered domestic partner, parent, sibling, or 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.



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



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COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT is made by and between GENE M. DERIG and MARILYN W. DERIG, husband and wife ("the Spouses"), both of whom are domiciled in the State of Washington. In consideration of their mutual agreements set forth below, the Spouses hereby agree as follows:

- A. Status of Property. All property of whatever nature or description; whether real, personal, or mixed and wherever located; now owned, or hereafter acquired by the Spouses or either of them, shall be considered and hereby is declared to be community property.
- B. Disposition of Property. Upon the death of one of the Spouses survived by the other Spouse, all the then-existing community property of the Spouses, real and personal, shall vest in and become the sole property of the surviving Spouse in fee simple.
- C. Termination. This Agreement may be terminated upon mutual, written agreement of the Spouses or their acting Attorney(s)-in-fact. In the absence of other evidence indicating the Spouses' intent to terminate this Agreement, it shall, nevertheless, be deemed mutually terminated and of no further force or effect upon the occurrence of one or more of the following events:
- (a) Upon either Spouse filing a petition, complaint, or other pleading for legal separation, dissolution of the marriage, or to have the marriage declared invalid.
 - (b) Immediately prior to death if both Spouses should die simultaneously or under circumstances where the order of death cannot be ascertained.
- D. Optional Revocation by One Spouse. If either Spouse becomes incapacitated, the other Spouse shall have the power to revoke this agreement. The termination shall be effective upon the delivery of written notice thereof to the incapacitated Spouse and to the guardians, if any, of the person and of the estate of the incapacitated person. For purposes of this paragraph, a Spouse shall be deemed incapacitated upon receipt by the other Spouse of written notice, signed by the incapacitated Spouse's duly-licensed attending physician or by two duly-licensed physicians who have examined the incapacitated Spouse, declaring that the incapacitated Spouse is unable to manage his or her own affairs.
- E. Disclaimer. Upon the death of either Spouse, the surviving Spouse may disclaim any interest passing under this agreement in whole or in part, or with reference to specific parts, shares or assets thereof, in which event the interest disclaimed shall pass as if the provisions

of paragraph B had been revoked as to such interest, with the surviving Spouse entitled to the benefits provided by any alternate disposition.

F. Revocation of Contrary Provisions. The provisions of any community property agreement, agreement regarding the status of property, or any other arrangement made previously by the Spouses or either of them affecting the property described in this Agreement are hereby revoked to the extent of any inconsistency with this Agreement.

SIGNED at Anacortes, Washington this 29 day of March, 2006.



GENE M. DERIG




MARILYN W. DERIG

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

On this day personally appeared before me GENE M. DERIG and MARILYN W. DERIG, to me known to be the individuals described in and who executed the foregoing document and acknowledged that they signed said document as their free and voluntary act and deed for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this 29 day of March, 2006.





NOTARY PUBLIC in and for the State of
Washington, residing at Anacortes
My appointment expires 11-29-06