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04/14/2023 03:36 PM Pages: 1 of 3 Fees: \$41.00
Skagit County Auditor, WA

WHEN RECORDED RETURN TO:

Lenora Larsen Heller
1606 Northeast 70th Street
Seattle, WA 98115

REVIEWED BY
SKAGIT COUNTY TREASURER
DEPUTY Lena Thompson
DATE 04/14/2023

208372-LT, Land Title and Escrow

DOCUMENT TITLE(S):
CERTIFICATE OF DEATH

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR:
State of Washington

GRANTEE:
Thomas Hebert Larsen

ABBREVIATED LEGAL DESCRIPTION:
Lot 4, SP-04-010, AF #200706040018, being a ptn SE NE, 23-35-1 E W.M.

TAX PARCEL NUMBER(S):
350123-0-009-0300/P126175

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2022-038653

DATE ISSUED: 03/01/2022
FEE NUMBER:

FIRST AND MIDDLE NAME(S): TOM HERBERT
LAST NAME(S): LARSEN

AKA: THOMAS HERBERT LARSEN

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: JULY 26, 2022
HOUR OF DEATH: 07:45 PM
SEX: MALE AGE: 91 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]
HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO
RACE: WHITE

BIRTH DATE: [REDACTED]
BIRTH PLACE: CLEVELAND, OH

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: SUE HORTON

OCCUPATION: MECHANICAL ENGINEER
INDUSTRY: HEATING AND AIR CONDITIONING
EDUCATION: BACHELOR'S DEGREE
US ARMED FORCES: YES

INFORMANT: LENORA HELLER
RELATIONSHIP: DAUGHTER
ADDRESS: 1606 NE 70TH ST, SEATTLE, WA 98115

CAUSE OF DEATH:
A: METASTATIC COLON CANCER
INTERVAL: 2021
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:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: NURSING HOME/LONG TERM CARE FACILITY
FACILITY OR ADDRESS: SOUNDVIEW REHAB, 1105 27TH STREET
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221

RESIDENCE STREET: 1402 DAKOTA AVENUE
CITY, STATE, ZIP: ANACORTES, WA 98221
INSIDE CITY LIMITS: YES COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 11 YEARS

FATHER: HERBERT BERTRAM LARSEN
MOTHER: [REDACTED]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: NORTHWEST CREMATORY

CITY, STATE: ANACORTES, WASHINGTON
DISPOSITION DATE: AUGUST 01, 2022

FUNERAL FACILITY: EVANS FUNERAL CHAPEL & CREMATORY, INC.

ADDRESS: 1105 32ND STREET
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221
FUNERAL DIRECTOR: COLE B. ERIKSON

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

CERTIFIER NAME: AUSTIN DYKES, PAC
TITLE: PHYSICIAN ASSISTANT
CERTIFIER ADDRESS: PO BOX 2586
CITY, STATE, ZIP: SPOKANE, WASHINGTON 98220
DATE SIGNED: JULY 27, 2022

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: AUSTIN DYKES, PHYSICIAN ASSISTANT

LOCAL DEPUTY REGISTRAR: CHERYL PETERSON
DATE RECEIVED: JULY 29, 2022

