

After Recording Return To:

Chuckanut Law Group, PLLC
306 N. Commercial Street, Suite B
Bellingham, WA 98225

DOCUMENT TITLE: AFFIDAVIT IN SUPPORT OF COMMUNITY PROPERTY AGREEMENT

REFERENCE NUMBER OF RELATED DOCUMENT:

GRANTOR: ESTATE OF GREGORY R. WILLKIE

GRANTEE(S): LARAIN S. WILLKIE

ABBREVIATED LEGAL DESCRIPTION: (0.4200 ac) LOT 30, SKAGIT STEELHEAD TRACTS,
RECORDED IN VOLUME 8 OF PLATS, PAGE 10,
RECORDS OF SKAG
and
(0.4200 ac) LOT 31, SKAGIT STEELHEAD TRACTS,
RECORDED IN VOLUME 8 OF PLATS, PAGE 10,
RECORDS OF SKAG

ASSESSOR'S TAX PARCEL NUMBER(S): 4012-000-030-0002 and 4012-000-031-0001

AFFIDAVIT IN SUPPORT OF
COMMUNITY PROPERTY AGREEMENT

ESTATE OF GREGORY R. WILLKIE

STATE OF WASHINGTON)
) ss.
COUNTY OF WHATCOM)

LARAIN S. WILLKIE, after being first duly sworn upon oath, deposes and says:

1. Agreement as to Status of Community Property. This Affidavit is for the purpose of supplying information for record pertaining to that certain Community Property Agreement executed by GREGORY R. WILLKIE and LARAIN S. WILLKIE, husband and wife, which Agreement was dated May 27, 2015, and which was

recorded in the Office of the Skagit County Auditor at Whatcom County, Washington, on November 1, 2023, as Auditor's File No. 2023-1100029.

2. Decedent. GREGORY R. WILLKIE died on March 21, 2023, in Bellingham, Whatcom County, Washington. Attached as Exhibit A is a true and correct copy of the death certificate.

3. Will. In addition to the Community Property Agreement, the Decedent signed his Last Will and Testament on May 27, 2015 and 1st Codicil on May 7, 2020. Such Will and Codicil, which is attached hereto as Exhibit B, directs his assets to his wife, LARAIN S. WILLKIE.

4. No Subsequent Agreements. The parties to the Community Property Agreement referred to above, entered into no subsequent Wills or Agreements which would have the effect of abrogating or nullifying the above-mentioned Community Property Agreement. The above-mentioned Community Property Agreement was in full force and effect at the time of Decedent's death.

5. Community Property. Among other items of community property was the following described real estate and personal property:

a) Real Property and Residence located at 10853 Miller Lane, Concrete, Skagit County, Washington, legally described as follows:

(0.4200 ac) LOT 30, SKAGIT STEELHEAD TRACTS, RECORDED IN VOLUME 8 OF PLATS, PAGE 10, RECORDS OF SKAG

SUBJECT TO easements, restrictions, reservations, and declarations of record.

Skagit County Geo ID No. 4012-000-030-0002

b) Real property located at 10853 Miller Lane, Concrete, Skagit County, Washington, legally described as follows:

(0.4200 ac) LOT 31, SKAGIT STEELHEAD TRACTS, RECORDED IN VOLUME 8 OF PLATS, PAGE 10, RECORDS OF SKAG SUBJECT TO easements, restrictions, reservations, and declarations of record.

Skagit County Geo ID No. 4012-000-031-0001

c) All Checking, Savings, Investment, and Retirement and Annuity Accounts.

d) All Motor Vehicles.

e) All Household Furniture, Furnishings, Jewelry, Clothing, and Other Items of Personal Property.

6. Separate Property. The Decedent left no separate estate.

7. Debts. All obligations of the community owing at the date of death of Decedent have been paid in full, and all expenses of last illness and for funeral and burial services have been paid. The decedent did not receive any medical assistance paid for or provided by the Washington State Department of Social and Health Services (DSHS), including nursing facility services, home or community-based services, hospital, prescription drugs, or any other services.

8. Estate Tax Return. No federal or state estate tax return was required to be filed.

9. Heirs. Decedent was survived by the following persons:

<u>Name</u>	<u>Relationship</u>	<u>Address</u>
Laraine Willkie	Surviving Spouse	2444 E. Hemmi Road Bellingham, WA 98226

10. Reliance. It is intended that the statements set forth herein shall be considered representations of fact which may be relied upon by all parties dealing with the real estate described herein.

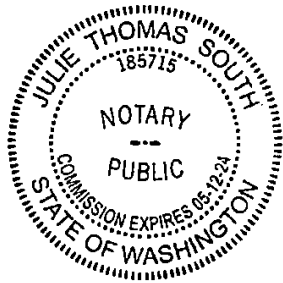
DATED this 2nd day of November, 2023.

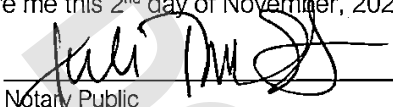


LARAIN WILLKIE

SUBSCRIBED AND SWORN TO before me this 2nd day of November, 2023.

(SEAL)





Notary Public
Print Name: Julie Thomas South
My Commission Expires: 05/12/24

EXHIBIT A
DEATH CERTIFICATE OF
GREGORY R. WILLKIE

UNOFFICIAL DOCUMENT

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2023-014117

DATE ISSUED: 05/30/2023
FEE NUMBER: 37

FIRST AND MIDDLE NAME(S): GREGORY ROBERT
LAST NAME(S): WILLKIE

COUNTY OF DEATH: WHATCOM
DATE OF DEATH: MARCH 21, 2023
HOUR OF DEATH: 01:00 PM
SEX: MALE AGE: 73 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

PLACE OF DEATH: HOSPITAL
FACILITY OR ADDRESS: PEACEHEALTH ST JOSEPH HOSPITAL
CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98225

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

RESIDENCE STREET: 2444 E HEMMI RD
CITY, STATE, ZIP: BELLINGHAM, WA 98226-9558
INSIDE CITY LIMITS: NO COUNTY: WHATCOM
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 46 YEARS

BIRTH DATE: [REDACTED]
BIRTHPLACE: BELLINGHAM, WA

FATHER: ROBERT J WILLKIE
MOTHER: MARIAN [REDACTED]

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: LARAIN SUE COCHRAN

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: LICENSED DIRECTOR CREMATORIUM

OCCUPATION: PIPEFITTER
INDUSTRY: CONSTRUCTION
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES: NO

CITY, STATE: BLAINE, WASHINGTON
DISPOSITION DATE: MARCH 23, 2023

INFORMANT: LARAIN SUE WILLKIE
RELATIONSHIP: WIFE
ADDRESS: 2444 E HEMMI RD, BELLINGHAM, WA 98226

FUNERAL FACILITY: JERNS FUNERAL CHAPEL

ADDRESS: 4131 HANNEGAN RD SUITE #106
CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98225
FUNERAL DIRECTOR: JAKE WAGGONER

CAUSE OF DEATH:
A: STAPHYLOCOCCUS AUREUS BACTEREMIA INFECTION
INTERVAL: DAY
B: NON-HEALING WOUND
INTERVAL: DAYS
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: CHRONIC PERIPHERAL ARTERY DISEASE, CONGESTIVE HEART FAILURE, NON-ST ELEVATION MYOCARDIAL INFARCTION

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

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

CERTIFIER NAME: KELVIN LAM, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 3015 SQUALICUM PARKWAY #140
CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98225
DATE SIGNED: MARCH 22, 2023

LOCATION OF INJURY:

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

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

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: DEBBIE L. HOLDEN
DATE RECEIVED: MARCH 23, 2023



Affidavit for Correction

11/06/2023 08:49 AM Page 4 of 15
Center for 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
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Required information must match current information on record

Required	Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> 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) First Middle Last/Maiden			5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution) First Middle Last/Maiden	
	6. Name of Person Requesting Correction: Relationship to <input type="checkbox"/> Self <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Hospital Person on Record: <input type="checkbox"/> Parent(s) <input type="checkbox"/> Funeral Director <input type="checkbox"/> 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:

The record currently shows:	The true fact is:
8.	9.
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 2 nd parent (if required):
Printed name:	Printed name:
Date:	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)

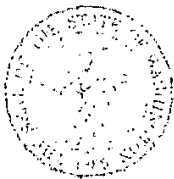
- Only the adult can change his or her birth certificate.
- If the first or middle name is missing, three pieces of proof documentation are required.
- If the first, middle and/or last name is misspelled, or month and/or day of birth is incorrect, two pieces of proof documentation are required.
- To 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.



This is a true and exact certification of the record officially registered and on file with the Washington State Department of Health, issued under the authority of Chapter 70.58 RCW, and at the direction of Greg Thompson, Health Officer.



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



0 6 0 8 0 5 0 7

EXHIBIT B

WILL AND 1ST CODICIL OF GREGORY R. WILLKIE

UNOFFICIAL DOCUMENT

COPY

WILL
OF
GREGORY R. WILLKIE

I, GREGORY R. WILLKIE, of Whatcom County, Washington, state that this is my Will and revoke all former Wills and Codicils.

ARTICLE 1: IDENTIFICATION OF FAMILY

I am married and my spouse is LARAINÉ S. WILLKIE ("my spouse"). I have two adult children, namely our daughters LORRI A. SWANSON and JENNIFER L. (WILLKIE) BULL ("my children"). I have no deceased children with descendants surviving.

ARTICLE 2: SPECIFIC GIFTS

2.1 **Tangible Personal Property—Spouse Surviving.** If my spouse survives me, I give all items of tangible personal property to my spouse.

2.2 **Tangible Personal Property—Spouse Deceased.** If my spouse does not survive me, I direct my Personal Representative to distribute items of my tangible personal property (defined by Revised Code of Washington 11.12.260 or similar law where my estate is administered) as I may have indicated on a writing signed by me or in my own handwriting, listing items to be given to designated recipients. This provision shall have no effect if such writing is not located within ninety days of my death. I give all remaining items of tangible personal property to my surviving children in approximately equal shares as my Personal Representative may determine appropriate, taking into account their needs and preferences and the preservation of family history. The Personal Representative may sell items which are not specifically desired by either of my children, distributing the proceeds between them equally, and may discard as deemed appropriate any items either not desired nor of any particular value.

2.3 **Tangible Personal Property Defined.** RCW 11.12.260 defines "tangible personal property" as: "articles of personal or household use or ornament, for example, furniture, furnishings, automobiles, boats, airplanes, and jewelry, as well as precious metals in any tangible form, for example, bullion or coins. The term includes articles even if held for investment purposes and encompasses tangible property that is not real property. The term does not include mobile homes or intangible property, for example, money that is normal

currency or normal legal tender, evidences of indebtedness, bank accounts or other monetary deposits, documents of title, or securities," and it does not include property primarily used in trade or business.

ARTICLE 3: REMAINDER

3.1 **Spouse Surviving.** If my spouse survives me, I give the remainder of my estate to my spouse, outright and free of trust.

3.2 **Spouse Deceased.** If my spouse does not survive me, I give the remainder of my estate to my children in equal shares. The share of a child who does not survive shall be distributed to the deceased child's descendants *per stirpes*, subject to the trust provisions below, or if there are no descendants, to my surviving child and the descendants of a deceased child, *per stirpes*.

3.3 **Trust Provisions.** The share of any beneficiary who is under the age of twenty-five years shall be held in trust by a Trustee selected by my Personal Representative until that age, when it shall be distributed to the beneficiary free of trust. In the meantime, the Trustee may use so much of the net income and principal as the Trustee determines beneficial for the beneficiary's health, support, education and maintenance. Any annual net income not distributed shall be accumulated and added to principal. If the beneficiary dies prior to reaching age twenty-five, the Trustee shall distribute the remainder to the beneficiary's estate.

ARTICLE 4: APPOINTMENT OF PERSONAL REPRESENTATIVE

I appoint my spouse LARAIN S. WILLKIE to serve as Personal Representative of my estate. In the event that my spouse is unable or unwilling to act as Personal Representative, then I appoint MARK E. WILLKIE as Personal Representative of my estate. In the event that MARK E. WILLKIE is unable or unwilling to act as Personal Representative, then I appoint LORRI A. SWANSON and JENNIFER L. (WILLKIE) BULL as Co-Personal Representatives of my estate.

ARTICLE 5: ESTATE ADMINISTRATION

5.1 **Administration.** No bond shall be required of the Personal Representative, and to the extent permitted by law, my estate shall be managed, administered, distributed, and settled in the manner provided herein and specifically without the intervention of any court.

5.2 **Powers.** The Personal Representative shall have all powers granted by law, as well as those conferred in this instrument, including:

5.2.1 **Management of Property.** Power to mortgage, encumber, lease, sell, exchange, and convey any assets of my estate, real or personal, without approval, notice, or confirmation;

5.2.2 Lend and Borrow. Power to advance funds and borrow money, secured or unsecured, from any source;

5.2.3 Ancillary Administration. Power to appoint an ancillary personal representative or agent if such should become necessary or advisable in the judgment of the Personal Representative;

5.2.4 Distributions. Power to make distributions (including the satisfaction of any pecuniary bequest) in cash or in kind, including undivided interests therein, and to do so without regard to the income tax basis of specific property allocated to any beneficiary, including any trust. The Personal Representative shall not be required to distribute assets of the estate, or interests therein, pro rata to the beneficiaries receiving such distributions, but may, in the exercise of the Personal Representative's discretion, make non-pro rata distributions, so long as the distributees receive assets of a value equal to the value of their respective interest in my estate as of the time of distribution;

5.2.5 Elections. Power to make such elections under the tax laws as the Personal Representative deems advisable without regard to the relative interests of the beneficiaries, and no adjustment shall be made between principal and income or in the relative interests of the beneficiaries to compensate for the effect of such elections.

5.2.6 Digital Property. Power to access any of my electronically stored information, including usernames and passwords, and maintain any user account or domain name of mine. I authorize any person who possesses or controls such information, account, or domain name to provide my Personal Representative such information or access pursuant to the Electronic Communications Privacy Act of 1986, the Computer Fraud and Abuse Act of 1986 or any other applicable state or federal law.

5.3 Allocation of Expenses. I authorize the Personal Representative to allocate the expenses of administering my estate between the income and principal of my estate.

5.4 Selection of Assets. The Personal Representative alone shall select the assets for distribution from my estate. The selection shall not be subject to question by any beneficiary and no adjustment shall be made for a disproportionate allocation of unrealized gain for federal income tax purposes. The Personal Representative's decision shall be final and conclusive.

5.5 Debts. The Personal Representative shall not satisfy any of my debts solely because of my death, if not otherwise due. Unless otherwise provided in this Will, my beneficiaries shall receive my property subject to any lien or encumbrance existing at my death, whether the property is a specific gift or part of my residuary estate.

5.6 Inventory. To the extent allowable by law, the Personal Representative is relieved from any statutory requirement to file an inventory with the Court which probates this

Will. However, an inventory shall be prepared as required by law, and shall be furnished to any estate beneficiary, upon request.

5.7 **Notice to Creditors.** To the extent allowable by law, the Personal Representative is relieved from any statutory requirement to publish notice to creditors.

5.8 **Compensation.** The Personal Representative shall be reimbursed for all costs and expenses reasonably incurred and shall receive reasonable compensation for services performed as Personal Representative.

ARTICLE 6: ADMINISTRATIVE AND GENERAL PROVISIONS

6.1 **Children and Descendants.** All references to children, descendants and issue shall include legally adopted persons.

6.2 **Headings.** The headings of this instrument are inserted for the convenience of reference only, and are not to be considered in the construction of the provisions.

6.3 **Survivorship.** For all purposes hereunder a person shall be deemed to have survived me only if such person is alive on the 30th day after the date of my death.

6.4 **Per Stirpes.** The term "per stirpes" is a legal term in Latin, referring to inheritance "by the branch." The share of a person who is deceased is distributed to the first generation of that person's descendants, and the share of a deceased person in the first generation is inherited by that person's descendants.

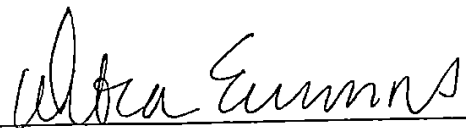
DATED this 27th day of May, 2015.

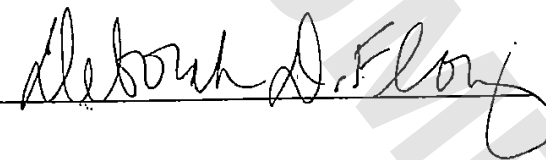


GREGORY R. WILLKIE

WITNESSES:

At the request of GREGORY R. WILLKIE, we met on the date inserted above to witness the signing of this Will. With all of us present at the same time, he signed it and stated it was his Will.





DECLARATION OF ATTESTING WITNESSES

(in lieu of affidavit as authorized by RCW 9A.72.085, RCW 11.20.020, Gen. Ct. R. Wash. 13,
In re Estate of Starkel, 134 Wash. App. 364 (2006))

The undersigned declare under penalty of perjury of the laws of the State of Washington that the following is true and correct:

1. The Will to which this Declaration is attached was executed by GREGORY R. WILLKIE on May 27, 2015, at Bellingham, Washington.
2. Immediately before execution, said testator declared the document to be his Will, and requested the undersigned witnesses to subscribe their names to it.
3. The testator signed the Will in the presence of all the witnesses, and the witnesses attested the execution by all subscribing their names in the presence of the testator, and of each other.
4. The testator appeared to be of sound mind, and acted freely and without any duress or undue influence. The witnesses were all competent.

The word testator is intended to include the female gender.

Signed at Bellingham, Washington, on May 27, 2015.

Signature

Printed Name: Debra Emmons

Signature

Printed Name: Deborah D. Flory

COURT'S CERTIFICATE

The foregoing Declaration in support of the documents offered as the Will of the above-named testator was filed on this date and accepted as proof of the above-mentioned Will, pursuant to authority of RCW 11.20.020.

Date: _____

Probate Judge/Commissioner

COPY

FIRST CODICIL TO

LAST WILL AND TESTAMENT

OF

GREGORY R. WILLKIE


I, GREGORY R. WILLKIE, of Whatcom County, Washington, state that this is the First Codicil to my Last Will & Testament previously executed the 27th day of May, 2015.

1. Article 4 APPOINTMENT OF PERSONAL REPRESENTATIVE is amended to read in its entirety as follows:

I appoint my spouse LARAIN S. WILLKIE to serve as Personal Representative of my estate. In the event that my spouse is unable or unwilling to act as Personal Representative, then I appoint LORRI A. SWANSON and JENNIFER L. (WILLKIE) BULL as Co-Personal Representatives of my estate.

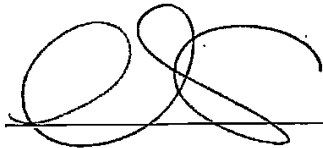
I hereby certify and confirm all the rest of the provisions of my Last Will & Testament previously executed on the 27th day of May, 2015, except as modified by this First Codicil.

DATED this 7th day of May, 2020.


GREGORY R. WILLKIE

WITNESSES

At the request of GREGORY R. WILLKIE, we met on the date inserted above to witness the signing of this First Codicil to his Will. With all of us present at the same time, he signed it and stated that it was the First Codicil to his Last Will & Testament.





BARRON | SMITH | DAUBERT LLC

ATTORNEYS AT LAW

300 NORTH COMMERCIAL ♦ P.O. BOX 5008
BELLINGHAM, WA 98227-5008

TELEPHONE: (360) 733-0212 ♦ FAX: (360) 738-2341

www.barronsmithlaw.com

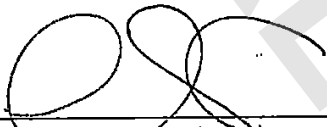
DECLARATION OF ATTESTING WITNESSES

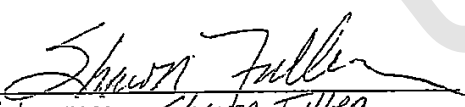
(in lieu of affidavit as authorized by RCW 9A.72.085, RCW 11.20.020, Gen. Ct. R. Wash. 13, In re Estate of Starkel, 134 Wash. App. 364 (2006))

The undersigned witnesses declare under penalty of perjury of the laws of the State of Washington that the following is true and correct:

1. The First Codicil to the Last Will and Testament to which this declaration is attached was executed by GREGORY R. WILLKIE on May 7, 2020 at Bellingham, Washington.
2. Immediately before execution, said testator declared the document to be the First Codicil to his Last Will and Testament, and requested the undersigned witnesses to subscribe their names to it.
3. The testator signed the First Codicil to his Last Will and Testament in the presence of all of the witnesses, and the witnesses attested the execution by all subscribing their names in the presence of the testator, and of each other.
4. The testator appeared to be of sound mind, and acted freely and without any duress or undue influence. The witnesses were all competent.

The word testator is intended to include both the male and female gender.

Signature 
 Type or print name: Erin Mae Glass

Signature 
 Type or print name: Shawn Fuller

COURT'S CERTIFICATE

The foregoing declaration in support of the documents offered as the First Codicil to the Last Will and Testament of the above-named Testator was filed on this date and accepted as proof of the above-mentioned First Codicil to the Last Will and Testament, pursuant to authority of RCW 11.20.020

Date: _____

Probate Judge/Commissioner