

Return Address:

Kathryn L. Ludwick
11005 Main St.
Bellevue, WA 98004

Real Estate Excise Tax
Exempt
Skagit County Treasurer
By Lena Thompson
Affidavit No. 20241195
Date 07/02/2024

AFFIDAVIT (LACK OF PROBATE)

The undersigned affiant/grantee Cheryl D. Rodewald, being first duly sworn
Name of Affiant
deposes and states as follows: That they are a rightful heir as listed on heirs at law, to the real
property described below, and is the surviving spouse
Relationship to decedent
of Thomas W. Rodewald, who died on 2/12/2024
Decedent/Grantor *Date*
at Sun City West Maricopa County Arizona
City *County* *State*

REAL PROPERTY SUBJECT TO THE AFFIDAVIT:

Abbreviated Legal Description:

Lot 14, BIG FIR NORTH P.U.D. Phase 2, according to the plat thereof recorded
July 25, 2007, under Auditor' s File No. 200707250053, records of Skagit
County, Washington.

Assessor's Property Tax Parcel/Account Number: P126504 / 4936-000-014-0000
(Attach full legal description of the property)

- Decedent left no Last Will and Testament.
- Decedent left a Last Will and Testament which HAS NOT been Probated or Revoked.

"Heirs at law" includes surviving spouse, children, adopted children, issue of
predeceased child or adopted child, parents, brothers and sisters of the decedent.
Affiant hereby identifies all heirs at law of the decedent: (use additional pages if
necessary)

Cheryl D. Rodewald, legal age, surviving spouse, 2245 Balsam Lane,
Mount Vernon, WA 98274

Full name, age, relationship, address

Glenn Curtis Rodewald, legal age, son, 27832 N. Silverado Ranch Rd.,
Peoria, AZ 85383

Full name, age, relationship, address

Mark Howard Rodewald, legal age, son, 11319 N. Whitehouse St.,
Spokane, WA 99218

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Dated : June 27, 2024

Affiant's full name
Cheryl D. Rodewald

Telephone number
425-646-0555

Signed under penalty of perjury at

Bellevue WA 98004
City State Zip Code

Cheryl Rodewald June 27, 2024
Signature Date

State of Washington County of King

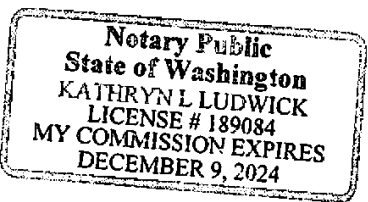
I know or have satisfactory evidence that Cheryl D. Rodewald
(name of person)

is the person who appeared before me, and said person acknowledged that (he/she) signed this affidavit and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this affidavit.

Dated: 6 / 27 / 24

[Signature]
Signature of Notary Public

(SEAL OR STAMP)



Residing at: Woodinville, WA

Notary Public in and for the State of WA

My appointment expires: 12/09 / 2024

Legal Description for Lack of Probate Affidavit

Property commonly known as: 2245 Balsam Lane, Mount Vernon, WA 98274.

Lot 14, BIG FIR NORTH P.U.D. Phase 2, according to the plat thereof recorded July 25, 2007, under Auditor's File No. 200707250053, records of Skagit County, Washington.

Situated in Skagit County, Washington.

Subject to: Restrictions, reservations and easements of record and Skagit County Right To Farm Ordinance as more fully described in Exhibit "A" which is included below and made a part hereof.

Exhibit "A"

Skagit County has established a policy for unincorporated areas to protect and encourage agriculture and forestry operations. If your real property is located near an agriculture or forestry operation, you may be subject to inconvenience or discomfort arising from such operations, including but not limited to, noise, odors, fumes, dust, flies, and other associated pests, the operation of machinery of any kind during any 24-hour period, the storage and disposal of manure, and the application of fertilizers, soil amendments, and pesticides. If conducted in compliance with local, state, and federal laws, these inconveniences or discomforts are hereby deemed not to constitute a nuisance as provided in Chapter 7.48 RCW for purposes of the Skagit County Code and shall not be subject to legal action as a public nuisance.

STATE OF ARIZONA
CERTIFICATION OF VITAL RECORD


STATE OF ARIZONA
DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS
CERTIFICATE OF DEATH

State File Number
102-2024-008648

ORIGINAL STATE COPY


1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX) THOMAS, WILLIAM, RODEWALD		2. AKA'S (IF ANY)		3. DATE OF DEATH 02/12/2024	
4. SEX MALE		5. SOCIAL SECURITY NUMBER		6. DATE OF BIRTH	
7. AGE 78 YEARS		8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH SUN CITY WEST, MARICOPA, 85375			
9. PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY NAME(ADRESS)) EMERGENCY - BANNER DEL E. WEBB MEDICAL CENTER					
10. BIRTH-PLACE (CITY AND STATE OR FOREIGN COUNTRY) SEATTLE, WASHINGTON		11. MARITAL STATUS MARRIED		12. NAME OF SURVIVING SPOUSE PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) CHERYL, DAWN, HAWLEY	
13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, COUNTY, STATE, ZIP) 17867 W ARCADIA DRIVE, SURPRISE, MARICOPA, AZ, 85374					
14. DECEDENT'S HISPANIC ORIGIN(S)		15. DECEDENT'S RACE(S) WHITE		16. EVER IN ARMED FORCES YES	
17. OCCUPATION BANKER		18. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) CORINNE, [REDACTED]			
19. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX) JACK, C, RODEWALD		20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX) CHERYL, DAWN, RODEWALD		21. RELATIONSHIP SPOUSE	
22. INFORMANT'S MAILING ADDRESS 2245 BALSAM LANE, MOUNT VERNON, WA, 98274					
23. NAME AND ADDRESS OF FUNERAL FACILITY OR RESPONSIBLE PERSON CAMINO DEL SOL FUNERAL CHAPEL & CREMATION 13738 CAMINO DEL SOL, SUN CITY WEST, AZ, 85375		24. FUNERAL DIRECTOR'S NAME OR RESPONSIBLE PERSON ALLISON, WADSWORTH		25. LICENSE NUMBER FDL-001252	
26. METHOD(S) OF DISPOSITION CREMATION		27. NAME AND LOCATION OF 1ST DISPOSITION FACILITY CAMINO DEL SOL CREMATORY, SUN CITY WEST, AZ, US		28. NAME AND LOCATION OF 2ND DISPOSITION FACILITY	
CAUSE OF DEATH (PART I)					
29. A. IMMEDIATE CAUSE OF DEATH ATHEROSCLEROTIC CARDIOVASCULAR DISEASE		30. APPROXIMATE INTERVAL UNKNOWN		31. B. DUE TO OR AS A CONSEQUENCE OF:	
32. APPROXIMATE INTERVAL		33. C. DUE TO OR AS A CONSEQUENCE OF:		34. APPROXIMATE INTERVAL	
35. D. DUE TO OR AS A CONSEQUENCE OF:		36. APPROXIMATE INTERVAL		37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I	
38. INJURY?		39. MANNER OF DEATH NATURAL DEATH		40. MANNER OF DEATH	
41. TIME OF DEATH 10:23		42. WAS AN AUTOPSY PERFORMED? NO		43. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?	
44. NAME OF PERSON COMPLETING CAUSE OF DEATH LINDSEY, MICHAUD		45. DATE CERTIFIED 04/10/2024		46. CERTIFIER'S ADDRESS 701 W JEFFERSON STREET, PHOENIX, AZ, 85007	

Date Registered: 02/17/2024 Date Issued: 04/15/2024 VS-49 Rev. 12/2017



34930074

Krystal Colburn
KRYSTAL COLBURN
ASSISTANT STATE REGISTRAR



ARIZONA DEPARTMENT OF HEALTH SERVICES

This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency.