

Auditor of said county except as follows: Community Property Agreement recorded under Auditor's File No. 200207010172

FOURTH: That the said real property at the date of decedent's death had an approximate value of \$253,800.00. That the value of decedent's estate at the time of death was within the exemptions allowed under federal estate tax regulations.

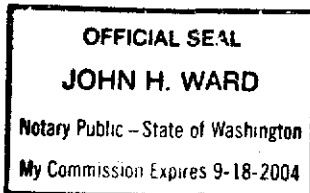
FIFTH: That all obligations of the estate owing at the date of death of said decedent have been paid in full, and all expenses of last illness and for funeral services have been paid, except as follows: (enumerate if any, or indicate NONE).
NONE

SIXTH: That the following list comprises all of the heirs at law by whom said decedent was survived: (If any heirs are under 18, this affidavit is not applicable).

Karin Owens, of legal age, his surviving spouse

Karin Owens
(Affiant)

SUBSCRIBED AND SWORN to before me this 26th day of June, 2002.



John H. Ward
Notary Public in and for the State of Washington, residing at Sedro Woolley
Commission expires: 9/18/04



200207080075
Skagit County Auditor
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2002 REAL ESTATE TAX STATEMENT

SKAGIT COUNTY TREASURER
P.O. BOX 518, MOUNT VERNON, WA 98273

ACCOUNT NUMBER

350716-0-007-0007

2002

P42759

KEEP THIS PORTION

Property Description: (4.02 AC) PTN OF NW1/4 NW1/4 AKA LT 1 S/P20-84

0040207 AT **AUTO 16 0 4006 98237-96760
00100200049932

OMENS TED
8080 OMENS LN
CONCRETE WA 98237-9675
2432



2002-1343-LESSOR-044002 B040902A 1011.65

BRING ALL PARTS WHEN PAYING IN PERSON

CURRENT TAX DISTRIBUTION

State Levy	9011	502.61
Local School	9011	657.07
County		324.73
City or Road		360.07
Port Dist	P02	25.42
Fire Dist	F10	136.82
Other	11304	79.17
Cemetery	C5	9.66
Forest Fire		
Dike		
Drainage	COOU	27.01
Conservation Futures		10.63
TOTAL CURRENT TAX		2,023.29

CURRENT TAX INFORMATION

Land Value	63,100
Improvements/Buildings	113,300
TOTAL VALUE	176,400
Levy Code	3406
Levy Rate	1.1660
Voter Approved Tax	601.17
Non Voter Approved Tax	1,365.11
General Tax Exemption (if any)	1,996.28
Special Assessment	27.01
TOTAL CURRENT TAX	2,023.29

OTHER TAX INFORMATION

YEAR	INT./PEN.	TAX
	04/02	

SEE REVERSE SIDE FOR OTHER INFORMATION.

Second half tax becomes delinquent after OCTOBER 31st

First half tax paid after April 30th requires interest plus penalty on full amount.



200207080075

Skagit County Auditor

2002 REAL ESTATE TAX STATEMENT

SKAGIT COUNTY TREASURER
P.O. BOX 518, MOUNT VERNON, WA 98273

ACCOUNT NUMBER

360821-4-002-0401

2002

KEEP THIS PORTION

P51560

Property Description: 1/4 TH S 0-43 -18 E 485.81FT TH S 89-07-36 W
690.15FT TAP ON ELY LI BAKER LK RD TH N 26-37 E
ALG ELY LI OF RD 48.07FT TH N 63-23 W 5.00FT TH N
26-37 E 266.23FT TH ON CRV 2-27-07 TO LFT 223.89FT

0040207 AT **AUTO Tr 0 4006 98237-967690 04200200049931
OMENS TED
8080 OMENS LN
CONCRETE WA 98237-9675

CURRENT TAX DISTRIBUTION

State Levy	\$011	153.36
Local School		159.80
County		99.03
City or Road	P02	106.77
Port Dist		7.76
Fire Dist		
Hospital		24.15
Other		
Cemetery	C0	2.92
Forest/Fire		14.90
Dike		
Drainage		
Conservation		3.21
Futures		
TOTAL CURRENT TAX		581.98

CURRENT TAX INFORMATION

Land Value	53,600
Improvements/Buildings	
TOTAL VALUE	53,600
Levy Code	3400
Levy Rate	10.54060
Voter Approved Tax	183.36
Non Voter Approved Tax	388.72
General Tax	567.06
Exemption (if any)	
Special Assessment	14.90
TOTAL CURRENT TAX	581.98

OTHER TAX INFORMATION

YEAR	INT/PEN	TAX
02	04/02	

2002-1343815 TOM 5008 /02 B040902A 290.99

SEE REVERSE SIDE FOR OTHER INFORMATION.

BRING ALL PARTS WHEN PAYING IN PERSON



200207080075
Skagit County Auditor

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



413-02
LOCAL FILE NUMBER

CERTIFICATE OF DEATH

146

STATE FILE NUMBER

1. NAME First: TED Middle: ROOSEVELT Last: OWENS			2. SEX (M/F) Male		3. DEATH DATE (Mo. Day, Yr) June 9, 2002		
4. AGE LAST BIRTHDAY (Yrs) 80		5. UNDER 1 YEAR MOS: DAYS: HOURS: MINS:		6. UNDER 1 DAY HOURS: MINS:		7. BIRTHDATE (Mo. Day, Yr) Dec 25, 1921	
8. BIRTHPLACE (City, State or Foreign Co., try)		9. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes/No)		10. COUNTY OF DEATH		11. CITY, TOWN OR LOCATION OF DEATH	
Colley, VA		Yes		Skagit		Skagit Valley Hospital	
12. PLACE OF DEATH - BOX FOR PLACE THEN GIVE ADDRESS OR INSTITUTION NAME 1 <input type="checkbox"/> HOME 2 <input type="checkbox"/> IN TRANSPORT 3 <input type="checkbox"/> EMERGENCY ROOM 4 <input type="checkbox"/> HOSP 5 <input type="checkbox"/> NURS HOME 6 <input type="checkbox"/> OTHER PLACE		13. SMOKING IN LAST 15 YEARS? (Yes/No)		14. MARITAL STATUS - Married, Never married, Widowed, Divorced (Specify)		15. SURVIVING SPOUSE (If wife, give maiden name)	
Skagit Valley Hospital		No		Married		Karin Hechinger	
16. SOCIAL SECURITY NO.		17. DECEDENT'S EDUCATION (Specify only highest grade completed)		18. USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED)		19. KIND OF BUSINESS OR INDUSTRY	
227-18-2781		12		Engineer		US Dept of Commerce	
20. Was Decedent of Hispanic origin or descent? (Ancestry) (Specify Yes or No. If yes, specify Cuban, Mexican, Puerto Rican, etc.)		21. RACE (Specify)		22. RESIDENCE - NUMBER AND STREET		23. CITY/TOWN OR LOCATION	
No		Caucasian		8080 Owens Lane		Concrete	
24. INSIDE CITY LIMITS? (Yes/No)		25A. COUNTY		25B. LENGTH OF RES. IN CO.		26. STATE	
No		Skagit		41 yrs.		WA	
27. ZIP CODE		28. FATHER'S NAME - FIRST, MIDDLE, LAST		29. MOTHER'S NAME - FIRST, MIDDLE, MAIDEN SURNAME		30. INFORMANT - NAME	
98237		Ted Owens, Sr.		Lina Fuller		Karin Owens	
31. MAILING ADDRESS STREET OR RFD NO.		32. BURIAL, CREMATION REMOVAL, OTHER (Specify)		33. DATE (Mo. Day, Yr)		34. CEMETERY/CREMATORY - NAME	
8080 Owens Lane		Burial		June 13, 2002		Hamilton Cemetery	
35. LOCATION - CITY/TOWN, STATE		36. FUNERAL DIRECTOR SIGNATURE		37. NAME OF FACILITY		38. ADDRESS OF FACILITY	
Hamilton, Washington		<i>x Richard Lemley</i>		Lemley Chapel		1008 3rd St. Sedro-Woolley, WA 98284	
TO BE COMPLETED ONLY BY CERTIFYING PHYSICIAN				TO BE COMPLETED ONLY BY MEDICAL EXAMINER OR CORONER			
39. TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED				40. ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION IN MY OPINION DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED			
SIGNATURE AND TITLE x T.W. Martin, Jr.				SIGNATURE AND TITLE x			
41. DATE SIGNED (Mo. Day, Yr)		42. HOUR OF DEATH (24 Hrs)		43. DATE SIGNED (Mo. Day, Yr)		44. HOUR OF DEATH (24 Hrs)	
June 10, 2002		1620 hrs					
45. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)				46. PRONOUNCED DEAD (Mo. Day, Yr)		47. HOUR PRONOUNCED DEAD (24 Hrs)	
Geoffrey Spielman							
48. NAME AND ADDRESS OF CERTIFIER - PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print)				49. MEDICORONER FILE NUMBER			
T.W. Martin, Jr., MD 2061 Hospital Dr. Sedro-Woolley, WA 98284							
50. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH.							
IMMEDIATE CAUSE (Final disease or condition resulting in death)		A. pneumonia		INTERVAL BETWEEN ONSET AND DEATH		days	
DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST.		B. cerebral vascular accident		INTERVAL BETWEEN ONSET AND DEATH		days	
		C. Type II diabetes mellitus		INTERVAL BETWEEN ONSET AND DEATH		years	
		D.		INTERVAL BETWEEN ONSET AND DEATH			
51. OTHER SIGNIFICANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVE ABOVE:				52. AUTOPSY? (Yes/No)		53. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes/No)	
				No		No	
54. ACC. SUICIDE HOM. UNDET. OR PENDING INVEST. (Specify)		55. INJURY DATE (Mo. Day, Yr)		56. HOUR OF INJURY (24 Hrs)		57. DESCRIBE HOW INJURY OCCURRED	
58. INJURY AT WORK? (Yes/No)		59. PLACE OF INJURY - AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG, ETC. (Specify)		60. LOCATION - STREET OR RFD NO., CITY/TOWN, STATE			
61. RECORD AMENDMENT (Registrar use only) ITEM DOCUMENTARY EVIDENCE REVIEWED BY DATE				62. REGISTRAR SIGNATURE		63. DATE RECEIVED (Mo., Day, Yr)	
				x Dorothy Epps, deputy		JUN 11 2002	



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Skagit County Auditor

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