



201104050047  
Skagit County Auditor

4/5/2011 Page 1 of 8 9:41AM

RETURN TO:  
JOHN W. HICKS  
SCHACHT & HICKS  
PO BOX 1165  
MOUNT VERNON WA 98273

DOCUMENT TITLE: **Affidavit Re: Community Property Agreement \* 68 C\***

GRANTOR/DECEDENT: **SWANSON, PHILIP R.**

GRANTEE: **SWANSON, EARLINE  
THE PUBLIC**

ABBREVIATED LEGAL DESCRIPTION AND TAX PARCEL NUMBERS:

33523 Lt 2 less 2 W1/2 NW 1/4 & Less N 2 ac of E 1/4 NW  
33522 N 2 ac of E1/2 NW1/4 Lot 2 S of RD  
48083 SE1/4 SE1/4 CF-75  
48399 S27 T36 R3 NE1/4 of NE1/4 less part of Tax 1  
48217 NW1/4 of SW1/4 E of RD  
48165 SW1/4 NE1/4 S of RD less TR  
48192 S1/2 NE1/4 SW1/4 E of RD  
49195 Ptn N1/2 SE1/4 AKA TR A  
33630 Lot 2 S/P 07-0321 Survey  
33571 SW1/4 NW1/4 less RD and S 577 ft & Tax 7 & RT#2-001-01-02  
130509 Ptn of Tract 23 of the Unrecorded Survey of Colony  
Mountain in Sec 23, Township 36 N, R 3 E. W.M.

ADDITIONAL LEGAL DESCRIPTION ON EXHIBIT "C" OF DOCUMENT.

**AFFIDAVIT RE: COMMUNITY PROPERTY AGREEMENT**

STATE OF WASHINGTON )  
                          )  
                          ss.  
COUNTY OF SKAGIT    )

EARLINE SWANSON, being first duly sworn on oath deposes and  
says:

1. **NAME OF DECEDENT**. That affiant is the surviving spouse  
of PHILIP R. SWANSON, who died at Bow, Skagit County, Washington,  
on the 8th day of September, 2010. That at that time they were

residents of Bow, Skagit County, Washington. That certified copy of Certificate of Death issued by the Washington State Department of Health is attached hereto, marked Exhibit "A" and by reference made a part hereof.

2. **EXECUTION OF AGREEMENT.** That on the 22nd day of April, 1965, and while husband and wife, the affiant and the said PHILIP R. SWANSON executed an agreement entitled "Community Property Agreement." That since the execution thereof, the said agreement has not been altered, modified, revoked, renounced or abandoned in any way, nor has any instrument inconsistent therewith or contradictory thereto been executed. That the said Community Property Agreement was recorded under Skagit County Auditor's File No. 665230, a copy of which is attached hereto, marked Exhibit "B" and by reference made a part hereof.

3. **PAYMENT OF DEBTS.** That all expenses of last illness, burial and funeral and costs of administration have been paid or provided for.

4. **STATUS OF PROPERTY.** That as of the time as a result of the execution of said agreement, and at all times subsequent thereto, all property, real and personal, owned by them, or in which they had any interest, became and remained community property.

5. **INHERITANCE AND ESTATE TAXES.** That said estate is not subject to state inheritance taxes or federal estate tax, being below current exemptions in effect as of the date of death.

6. **REAL ESTATE.** That all of the real estate listed and described on Exhibit "C," attached hereto and by reference made a part hereof, was at the time of death the community property of decedent and has now passed to the affiant, as his surviving spouse.



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7. **PURPOSES OF AFFIDAVIT.** This affidavit is made to induce all title insurance companies dealing with said real property to issue policies of title insurance upon real estate passing to the surviving spouse, and affiant herein, by virtue of said community property survivorship agreement, and in reliance upon the representations of fact hereinabove set forth.

This affidavit is made to induce all companies or entities dealing with any property to transfer such property to the surviving spouse, and affiant herein, by virtue of said community property survivorship agreement, and in reliance upon the representations of fact hereinabove set forth.

This affidavit is further executed for the purpose of giving notice of the existence and effectiveness of the Community Property Agreement.

*Earline M. Swanson*  
EARLINE SWANSON

SIGNED AND SWORN to before me on April 4, 2011, by EARLINE SWANSON.

*Kay L. Negley*  
Printed name: KAY L NEGLEY  
Notary Public in and for the State of Washington, residing at Mount Vernon  
My appointment expires: 3-15-2012



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Skagit County Auditor

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

Local File Number 172/10

Washington State Certificate of Death

State File Number

1. Legal Name (Include AKA's/Tray) First Philip	Middle Ralph	Last Swanson	Suffix	2. Death Date Sept. 8, 2010
3. Sex (M/F) Male	4a. Age - Last Birthday 91	4b. Under 1 Year Months	4c. Under 1 Day Hours	5. Social Security Number [REDACTED]
6. County of Death Skagit				
7. Birthdate [REDACTED]	8a. Birthplace (City, Town, or County) Seattle	8b. (State or Foreign Country) Washington	9. Decedent's Education High School Graduate	
10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify. No	11. Decedent's Race(s) Caucasian	12. Was Decedent ever in U.S. Armed Forces? No		
13a. Residence: Number and Street (e.g., 624 SE 5 <sup>th</sup> St.) (Include Apt. No.) 6130 Hobson Road	13b. City or Town Bow			
13c. Residence: County Skagit	13d. Tribal Reservation Name (if applicable) [REDACTED]	13e. State or Foreign Country Washington	13f. Zip Code + 4 98232	13g. Inside City Limits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
14. Estimated length of time at residence 55 Years	15. Marital Status at Time of Death Married	16. Surviving Spouse's or Domestic Partner's Name (Give name prior to first marriage) Earline M. Brymer		
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED) Contractor	18. Kind of Business/Industry (Do not use Company Name) Logging Industry			
19. Father's Name (First, Middle, Last, Suffix) John Herman Swanson	20. Mother's Name Before First Marriage (First, Middle, Last) Ammeli Charlotte			
21. Informant's Name Earline Swanson	22. Relationship to Decedent Spouse	23. Mailing Address: Number and Street or RFD No. 6130 Hobson Road	City or Town Bow	State Washington Zip 98232
24. Place of Death, if Death Occurred in a Hospital: [REDACTED]	Place of Death, if Death Occurred Somewhere Other than a Hospital: Decedent's Residence			
25. Facility Name (if not a facility, give number & street of location) 6130 Hobson Road	26a. City, Town, or Location of Death Bow	26b. State WA	27. Zip Code 98232	
28. Method of Disposition Burial	29. Place of Final Disposition (Name of cemetery, crematory, other place) Bow Cemetery	30. Location-City/Town, and State Bow, Washington		
31. Name and Complete Address of Funeral Facility Kern Funeral Home 1122 S. 3rd St. Mount Vernon, WA 98273	32. Date of Disposition September 18, 2010			
33. Funeral Director Signature X <i>Jeremiah T. LeSourd</i>	Jeremiah T. LeSourd			
Cause of Death (See instructions and examples)				
34. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Add additional lines if necessary.				
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. <u>metastatic head and neck squamous cell carcinoma</u> Due to (or as a consequence of): 4 months				
b. Due to (or as a consequence of):				
c. Due to (or as a consequence of):				
d. Due to (or as a consequence of):				
35. Other significant conditions contributing to death but not resulting in the underlying cause given above				
36. Autopsy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			37. Were autopsy findings available to complete the Cause of Death? <input type="checkbox"/> Yes <input type="checkbox"/> No	
38. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Undetermined <input type="checkbox"/> Suicide <input type="checkbox"/> Pending			39. If female <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days before death <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year	
40. Did tobacco use contribute to death? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown			41. Date of Injury (MM/DD/YYYY) 42. Hour of Injury (24hrs) 43. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area) 44. Injury at Work? [REDACTED]	
45. Location of Injury: Number & Street: Apt No: City or Town: County: State: Zip Code + 4:				
46. Describe how injury occurred				
47. If transportation injury, specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other (Specify)				
48a. Certifying Physician - In the best of my knowledge, death occurred at the time, date, and place and due to the causes(s) and manner stated. X <i>Michael Dillard, MD</i>				
48b. Medical Examiner/Coroner - On <input type="checkbox"/> Medical Examiner <input type="checkbox"/> Coroner <input type="checkbox"/> Other (Specify) opinion, death occurred at the time, date, and place, and due to the causes(s) and manner stated. X				
49. Name and Address of Certifier - Physician, Medical Examiner or Coroner (Type or Print) Michael Dillard MD PO BOX 329 BURLINGTON, WA 98233				
50. Hour of Death (24hrs) 0038				
51. Name and Title of Attending Physician if other than Certifier (Type or Print)				
52. Date Signed (MM/DD/YYYY) <i>09/10/2010</i>				
53. Title of Certifier MD				
54. License Number MND02012A				
55. ME/Coroner File Number NJA-#416				
56. Was case referred to ME/Coroner? <input type="checkbox"/> Yes <input type="checkbox"/> No				
57. Registrar Signature X <i>Connie Anderson, Deputy Auditor</i>				
58. Date Received (MM/DD/YYYY) SEP 14 2010				
59. Amendments				

DOH/CHS 003 Rev 07/08/07

EXHIBIT "A"

DOH 01-003 (5/99)

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COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT Made and entered into this 21 day of April, 1965, by and between PHILIP R. SWANSON and EARLINE SWANSON, husband and wife, residents of Route 1, Bow, Skagit County, State of Washington.

WITNESSETH: That whereas, the parties hereto are husband and wife, and all property owned by them, real or personal, is community property and is located in the State of Washington; and

WHEREAS, said parties are desirous that all of their community property, real and personal, shall pass unto the other in the case of the death of either; and

WHEREAS, said parties desire to avail themselves of the provisions of R.C.W. 26.16.120 of the laws of the State of Washington;

NOW, THEREFORE, for and in consideration of the love and affection of each party for the other, and in consideration of the premises, covenants, and conditions herein contained, and the mutual benefits to be derived therefrom, it is agreed between the parties that in the event of the death of the said Philip R. Swanson while the said Earline Swanson survives him, all community property now owned by them or hereafter acquired by them shall at once vest in the said Earline Swanson in fee simple; and in the event of the death of Earline Swanson while the said Philip R. Swanson survives her, all community property now owned by them or hereafter acquired by them shall at once vest in the said Philip R. Swanson, in fee simple.

IN WITNESS WHEREOF, the said PHILIP R. SWANSON and EARLINE SWANSON, have hereunto set their hands and seals this 21 day of April, 1965.

Philip Swanson  
Earline Swanson

EXHIBIT "B" - Page 1

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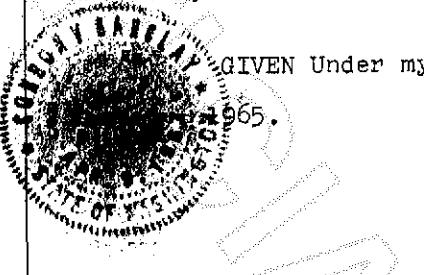
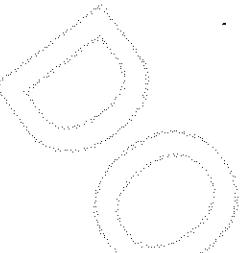
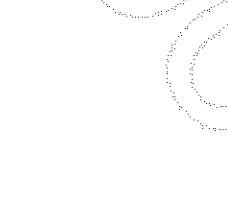
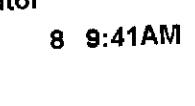
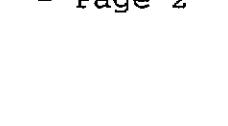
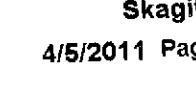
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STATE OF WASHINGTON )  
COUNTY OF SKAGIT ) : SS

On this day personally appeared before me PHILIP R. SWANSON and EARLINE SWANSON, his wife, to me known to be the individuals described in and who executed the within and foregoing instrument, and acknowledged that they signed the same as their free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN Under my hand and official seal this 22 day of

1965.

  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
<img alt="Notary seal" data-bbox="505 1335 645 13

UN  
RE  
C  
The following parcels of real estate situate in Skagit County, Washington:

P33523  
Lt 2 less 2 W1/2 NW1/4 & Less N 2 ac of E $\frac{1}{2}$  NW

P33522  
N 2 ac of E1/2 NW1/4 Lot 2 S of RD

P48083  
SE1/4 SE1/4 CF-75

P48399  
S27 T36 R3 NE1/4 of NE1/4 less part of Tax 1

P48217  
NW1/4 of SW1/4 E of RD

P48165  
SW1/4 NE1/4 S of RD less TR

P48192  
S1/2 NE1/4 SW1/4 E of RD

P49195  
Ptn N1/2 SE1/4 AKA TR A

P33630  
Lot 2 S/P 07-0321 Survey AF201010280105

P33571  
SW1/4 NW1/4 less RD and S 577 ft & Tax 7 & RT#2-001-01-02

P130509  
Ptn of Tract 23 of the Unrecorded Survey of Colony Mountain in Sec 23, Township 36 N, R 3 E. W.M.

EXHIBIT "C"



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Skagit County Auditor