



201204230133

Skagit County Auditor

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8 9:54AM

After recording please return to:

Andrew Thompson
159 Swinomish Drive
La Conner, WA 98257

RECORDING COVER PAGE

DOCUMENT TITLE: LACK OF PROBATE AFFIDAVIT

REFERENCE NUMBER OF RELATED DOCUMENT: 8909140055

GRANTORS: ANDREW J. THOMPSON & NANCY C. THOMPSON

GRANTEE: THE PUBLIC

ABBREVIATED LEGAL DESCRIPTION: Shelter Bay, Block 2, Lot 159

ASSESSOR'S TAX/PARCEL NUMBER: P129028

LACK OF PROBATE AFFIDAVIT

State of Washington)
) ss.
County of Skagit)

Andrew J. Thompson, being first duly sworn, deposes and says:

FIRST, that this Affidavit is for the purpose of supplying information regarding the estate of Nancy Carol Thompson, deceased, and the statements herein are representations of fact which may be relied upon by all persons dealing with the following described real property:

159 Swinomish Drive, La Conner, Skagit County, Washington, with a legal description of "SHELTER BAY, BLOCK 2, LOT 159," and a Skagit County tax parcel number of P129028.

SECOND, that said Decedent died on February 29, 2012, in Apache Junction, County of Pinal, State of Arizona. A certified copy of decedent's death certificate is attached, and is incorporated by this reference.

THIRD, that I am the Decedent's sole heir at law.

FOURTH, that the Decedent executed a Last Will and Testament on November 12, 2004, in which she bequeathed her entire estate to me. The original of that Will is attached, and is incorporated by this reference.

FIFTH, that the Decedent executed no other Wills, agreements to convey, conveyances, mortgages, deeds of trust, lien agreements or other instruments for the purpose of conveying or encumbering said land, any portion thereof, or any interest therein, other than those instruments which have been duly recorded in the office of the Auditor of this county, and the Will attached to this Affidavit.



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SIXTH, that the probate estate of said Decedent at the date of death was of the approximate value of \$160,000.00, including the real property described above, in which decedent's interest had an approximate market value of \$100,000.00.

SEVENTH, that all obligations of the estate owing at the date of death of the Decedent have been paid in full, and all expenses of last sickness and for funeral services have been paid.

Dated this 17 day of April, 2012

Andrew J. Thompson

Andrew J. Thompson

STATE OF WASHINGTON)

: ss

County of Skagit)

I certify that I know or have satisfactory evidence that Andrew J. Thompson is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated April 17, 2012

Dorothy Jean Barclay
Notary Public in and for the State
of Washington, residing at Seaside, WA
My Commission Expires: 12-14-2013



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CERTIFICATION OF VITAL RECORD

STATE OF ARIZONA

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

State File NO. 102-2012-007919

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST) NANCY CAROL THOMPSON				2. AKA'S (IF ANY)		3. DATE OF DEATH FEBRUARY 29, 2012	
4. SEX FEMALE	5. SOCIAL SECURITY NUMBER [REDACTED]	6. DATE OF BIRTH [REDACTED]	7. AGE 82	8. MONTHS UNDER 1 YEAR		9. DAYS UNDER 1 DAY	
12. PLACE OF DEATH - HOSPITAL <input checked="" type="checkbox"/> INPATIENT <input type="checkbox"/> E.R./OUTPATIENT <input type="checkbox"/> DEAD ON ARRIVAL				13. PLACE OF DEATH - OTHER THAN HOSPITAL: <input type="checkbox"/> NURSING HOME OR LONG TERM CARE FACILITY <input type="checkbox"/> RESIDENCE <input type="checkbox"/> HOSPICE FACILITY <input type="checkbox"/> OTHER			
14. FACILITY NAME (OR STREET ADDRESS IF NOT A FACILITY): ARIZONA REGIONAL MEDICAL CENTER - APACHE JUNCTION				15. CITY, TOWN & ZIP CODE OR LOCATION OF DEATH: APACHE JUNCTION 85120		16. COUNTY OF DEATH PINAL	
17. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) BERTHA, MINNESOTA				18. MARITAL STATUS AT TIME OF DEATH: MARRIED		19. NAME OF SURVIVING SPOUSE (MAIDEN NAME IF WIFE) ANDREW JEAN THOMPSON	
20. DECEDENT'S USUAL RESIDENCE STREET ADDRESS: 1000 S IDAHO RD, #894				21. CITY AND COUNTY: APACHE JUNCTION, PINAL		22. STATE ARIZONA	23. ZIP CODE 85119
24. EVER IN THE ARMED FORCES NO							
25. WAS DECEDENT OF HISPANIC ORIGIN? <input checked="" type="checkbox"/> NO, NOT SPANISH, HISPANIC OR LATINO <input type="checkbox"/> YES, MEXICAN, MEXICAN AMERICAN, CHICANO <input type="checkbox"/> YES, PUERTO RICAN <input type="checkbox"/> YES, CUBAN <input type="checkbox"/> YES, OTHER (SPECIFY) <input type="checkbox"/> UNKNOWN		26. DECEDENT'S RACE(S): <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK, AFRICAN AMERICAN <input type="checkbox"/> NATIVE HAWAIIAN <input type="checkbox"/> ASIAN INDIAN <input type="checkbox"/> CHINESE <input type="checkbox"/> FILIPINO <input type="checkbox"/> JAPANESE <input type="checkbox"/> GUAMANIAN OR CHAMORRO <input type="checkbox"/> KOREAN <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> SAMOAN <input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE		27. IF AMERICAN INDIAN OR ALASKA NATIVE, SPECIFY UP TO 4 TRIBES PRIMARY OR ENROLLED TRIBE: ADDITIONAL TRIBE: ADDITIONAL TRIBE: ADDITIONAL TRIBE:			
28. OCCUPATION TEACHER				29. FATHER'S NAME (FIRST, MIDDLE, LAST) VIRDEN O VICK			
30. MOTHER'S NAME (FIRST, MIDDLE, & LAST NAME PRIOR TO FIRST MARRIAGE) EDNA [REDACTED]							
31. INFORMANT'S NAME ANDREW JEAN THOMPSON				32. RELATIONSHIP SPOUSE			
33. INFORMANT'S MAILING ADDRESS: 1000 S IDAHO RD #894, APACHE JUNCTION, ARIZONA 85119							
34. NAME AND ADDRESS OF FUNERAL FACILITY: SUPERSTITION FUNERAL HOME 398 E. OLD WEST HIGHWAY, APACHE JUNCTION, AZ				35. FUNERAL DIRECTOR: TIMOTHY J KROPP JR., FUNERAL DIRECTOR		36. LICENSE NUMBER F1120	
37. METHOD(S) OF DISPOSITION: CREMATION		38. NAME AND LOCATION OF 1st DISPOSITION FACILITY: SUPERSTITION CREMATORY, APACHE JUNCTION, ARIZONA		39. NAME AND LOCATION OF 2nd DISPOSITION FACILITY: NONE			
MEDICAL CERTIFICATION SECTION - CAUSE OF DEATH - PART I							
IMMEDIATE CAUSE OF DEATH 40. A CORONARY ARTERY DISEASE		41. APPROXIMATE INTERVAL: UNKNOWN					
DUE TO OR AS A CONSEQUENCE OF: 42. B		43. APPROXIMATE INTERVAL:					
DUE TO OR AS A CONSEQUENCE OF: 44. C		45. APPROXIMATE INTERVAL:					
DUE TO OR AS A CONSEQUENCE OF: 46. D		47. APPROXIMATE INTERVAL:					
CAUSE OF DEATH - PART II							
48. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE(S) GIVEN ABOVE:				49. INJURY? UNKNOWN		50. INJURY AT WORK? UNKNOWN	
				51. MANNER OF DEATH NATURAL DEATH		52. TIME OF DEATH 0928	
				53. WAS AN AUTOPSY PERFORMED? NO		54. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?	
CAUSE AND MANNER OF DEATH CERTIFICATION							
55. NAME OF PERSON COMPLETING CAUSE OF DEATH: GALEO, ANTHONY M.D.				56. DATE CERTIFIED: 03-01-2012			
57. CERTIFIER'S ADDRESS: 4838 E. BASELINE RD., BLDG 2 SUITE 110, MESA, AZ. 85206				58. NAME OF REGISTRAR: KANDI HARRIS			
				59. DATE REGISTERED: 03-05-2012			

Date Issued: 03-07-2012

This is a true certification of the facts on file with the OFFICE OF VITAL RECORDS, ARIZONA DEPARTMENT OF HEALTH SERVICES, PHOENIX, ARIZONA.
Revised 02/2010



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[Handwritten Signature]
PATRICIA KRAMS
PINAL COUNTY REGISTRAR

Impressed: [Stamp]
THIS DOCUMENT



**LAST WILL
AND TESTAMENT**

OF

NANCY C. THOMPSON

INTRODUCTION

I, NANCY C. THOMPSON, residing in the County of Skagit, State of Washington, at the date of execution of this Will, hereby declare this to be my Last Will and Testament.

ARTICLE ONE: REVOCATION

I hereby revoke any and all Wills and Codicils previously executed by me and declare this to be my Last Will and Testament.

ARTICLE TWO: FAMILY STATUS

I declare that I am married. My husband's name is ANDREW J. THOMPSON. Any reference in this my Last Will and Testament to "my husband" are to him. My husband and I have two children of our marriage. The names of our children are as follows: DREW J. THOMPSON and BRENT LEE THOMPSON.

I have no other living children, biological or adopted, at the time of executing this my Last Will and Testament. I have no children who predeceased me leaving issue surviving.

ARTICLE THREE: LIST OF PROPERTY

Pursuant to RCW 11.12.260, I plan to prepare a list designating that certain items of personal property shall be given to specific persons. I understand that I must sign this

Last Will and Testament of Nancy C. Thompson, page 1 of 3
Signed Initials of Testatrix N.C.T.



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list in order for it to be effective. This list may be changed at any time and still be effective. This list shall be placed with my Last Will and Testament. If no such list is found, then the provisions of my Last Will and Testament shall apply as if no such list had been made.

ARTICLE FOUR: DISPOSITION OF ESTATE

My entire Estate, including the rest, residue and remainder, is hereby devised and bequeathed to my husband, ANDREW J. THOMPSON, so long as he survives me by twenty (20) days.

ARTICLE FIVE: CONTINGENT DISPOSITION OF ESTATE

In the event that my husband, ANDREW J. THOMPSON, should predecease me or die within twenty (20) days of the date of my death, then my entire Estate is devised and bequeathed to my children, DREW J. THOMPSON and BRENT LEE THOMPSON, equally, share and share alike, except if any of my children should predecease me or die within twenty (20) days of the date of my death, I leave that child's share to his or her surviving spouse. If the deceased child has no surviving spouse, then I leave this share to my surviving child.

ARTICLE SIX: APPOINTMENT OF PERSONAL REPRESENTATIVE

I hereby nominate and appoint my husband, ANDREW J. THOMPSON, as the Personal Representative of this my Last Will and Testament, to act without bond or intervention of the Court. In the event that he is for any reason unable or unwilling to act as Personal Representative hereof, then I nominate and appoint my son, DREW J. THOMPSON, as the First Alternate Personal Representative, to serve without bond or intervention of the Court.

ARTICLE SEVEN: NONINTERVENTION WILL

I direct that my Estate be settled without the intervention of the Court, except to the extent required by law, and as required to assure compliance with the terms and conditions of this Will, and that my Personal Representative settle my Estate in such a manner as shall seem best and most convenient to her or him. I hereby empower my Personal Representative to mortgage, lease, sell, exchange and convey the real and personal property of my Estate for that purpose and without notice, approval or confirmation and in all other respects to administer and settle my Estate.

ARTICLE EIGHT: DEFINITIONS

All references to children and descendants shall include adopted persons. Unless some other meaning and intent is apparent from the context, the plural shall include the singular and vice-versa, masculine, feminine and neuter words shall be used interchangeably.

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Signed Initials of Testatrix N.C.T.



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IN WITNESS HEREOF, I have hereunto set my hand this 12th day of November, 2004.

Nancy C. Thompson
NANCY C. THOMPSON

The foregoing instrument, consisting of 3 [three] typewritten pages, including the page on which we signed as witnesses, was on the date immediately appearing above, signed and published by NANCY C. THOMPSON, who appeared to be of sound and disposing mind and memory and was by her declared to be his Last Will and Testament in the presence of us, who, at his request and in her presence and in the presence of each other have hereunto set our hands as witnesses this 12 day of NOVEMBER, 2004. Each page of this will bears the initials of the Testatrix.

[Signature]
WITNESS

711 E. MORRIS ST.
Address LA CONNER, WA

[Signature]
WITNESS

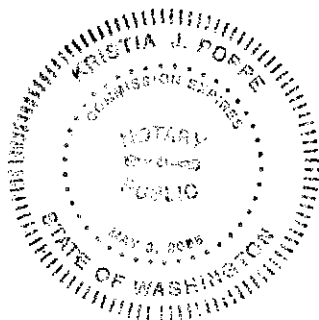
711 E Morris St, La Conner
Address

SUBSCRIBED AND SWORN to this 12th day of November, 2004.

[Signature] Kristia J Poppe
Signature of Notary Public

My commission expires:

May 3, 2005



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Signed Initials of Testatrix N.C.T.

**TANGIBLE PERSONAL PROPERTY LIST
OF
NANCY C. THOMPSON**

TO THE PERSONAL REPRESENTATIVE OF MY ESTATE:

Pursuant to RCW 11.12.260, as amended, I hereby direct that you give the item or items of property described in this Tangible Personal Property List ("List") to the individual designated as the recipient in this List.

	Individual Recipient(s)	Description of Property
1.	Name: _____ Relationship: _____ Address: _____ _____	_____ _____ _____
2.	Name: _____ Relationship: _____ Address: _____ _____	_____ _____ _____
3.	Name: _____ Relationship: _____ Address: _____ _____	_____ _____ _____
4.	Name: _____ Relationship: _____ Address: _____ _____	_____ _____ _____
5.	Name: _____ Relationship: _____ Address: _____ _____	_____ _____ _____
6.	Name: _____ Relationship: _____ Address: _____ _____	_____ _____ _____



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