



201207060049

Skagit County Auditor

7/6/2012 Page

1 of

14 11:50AM

RETURN TO:

Patrick M. Hayden
P.O.Box 454
Sedro-Woolley, WA 98284

DOCUMENT TITLE(S) (or transactions contained herein):

**AFFIDAVIT REGARDING ORDER ADJUDICATING TESTACY
FOR LINDA S. ROSVALL ESTATE**

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

Skagit County Superior Court Cause No. 06-4-00284-9

GRANTOR(S) (Last name, first name and initials);

1. ROSVALL, LINDA S

GRANTEE(S) (Last name, first name and initials):

1. PLEMONS, CAROLYN L.
2. CHOATE, CASSANDRA M.

LEGAL DESCRIPTION (Abbreviated: i.e., lot, block, plat or quarter, quarter, section, township and range).

Portion of GRANDVIEW TERRACE, Lot 15; together with tidelands adjoining said portion of Lot 15
(being a portion of Sec. 27, Twp 36, Rge 2)

ASSESSOR'S PARCEL/TAX I.D. NUMBER:

P65580 / 3920-000-015-0004

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

2012 2012
JUL 06 2012

Amount Paid \$ 0
Skagit Co. Treasurer
By *nam* Deputy

ORIGINAL

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

1. Status. I am the surviving daughter of Linda S. Rosvall, who died on April 18, 2006, then a resident of Washington State in King County and Skagit County. A certified copy of her Death Certificate is attached to this Affidavit.

2. Real Property. Decedent left a separate interest in the real property situated in Skagit County, Washington described in the attached Schedule A to this Affidavit and acquired as her separate property by Deed dated April 30, 2003 and recorded in the Office of the County Auditor/Recorder of Skagit County, Washington, on May 30, 2003 under Recording No. 200305300199.

3. Decedent's Heirs-at-Law. Decedent's heirs-at-law (including any natural or adopted children or issue, parents, and siblings) and their respective addresses, relationships to Decedent, and ages are as follows:

Name	Address	Relationship	Age
Carolyn L. Plemons	Lake Oswego, OR	daughter	51
Cassandra M. Choate	Pullman, WA	daughter	37

The Decedent's spouse, Wilber Rosvall, predecease Linda S. Rosvall, and according to the Decedent's Last Will and Testament dated October 11, 1991, the entire estate, including the real property described above, was inherited by Carolyn L. Plemons and Cassandra M. Choate in equal shares.

4. Decedent's Will & Probate.

Decedent left a Will, a copy of which is attached to this Affidavit. The Will was established as the last will of Linda S. Rosvall by Order dated October 13, 2006, of the Superior Court of Washington for Skagit County, Cause No. 06-4-00284-9. A certified copy of the *ORDER ADJUDICATING TESTACY* is attached to this Affidavit.



5. Character and Value of Decedent's Estate. The approximate value of Decedent's estate at death is as follows: less than \$1,000,000.00

6. Decedent's Debts & Expenses. All of the debts and expenses (including expenses of last illness, funeral, and burial) of Decedent and the liabilities and other obligations of any marital community have been paid in full.

7. Federal Estate Tax.

Decedent's estate was not liable for federal estate tax.

8. Washington Estate Tax.

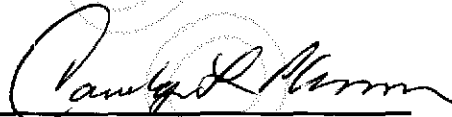
Decedent's estate was not liable for Washington estate tax.

9. Washington Assistance.

Decedent was not liable for repayment for subsistence or medical care to the state of Washington.

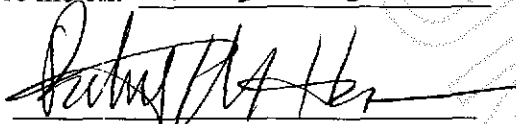
10. Purpose of Affidavit. I am making this Affidavit to induce a title insurance company, in reliance on the representations made in this Affidavit, to issue one or more policies of title insurance on the real property passing to Decedent's heirs.

Dated: July 5, 2012.



Carolyn L. Plemons
1901 Mapleleaf Court
Lake Oswego, OR 97034

SUBSCRIBED & SWORN TO before me on: 7-5-12



Signature of Notary

Patrick M Hayden
Printed Name of Notary



NOTARY PUBLIC in and for the State of
Washington, residing at: Sedro Woolley

My appointment expires on: 4.27.13



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Skagit County Auditor

Attachments

1. Death Certificate of Linda S. Rosvall
2. Schedule A: Legal Description
3. Order Adjudicating Testacy
4. Last Will and Testament



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STATE OF WASHINGTON DEPARTMENT OF HEALTH CERTIFIED COPY OF DEATH CERTIFICATE

Local File Number 3985		Washington State Certificate of Death		State File Number	
1. Legal Name (Include AKA's if any) First Middle LAST LINDA S. ROSVALL			2. Death Date April 18, 2006		
3. Sex (M/F) Female	4a. Age - Last Birthday 66	4b. Under 1 Year Months Days 0 0	4c. Under 1 Day Hours Minutes 0 0	5. Social Security Number [REDACTED]	6. County of Death King
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) White		12. Was Decedent ever in U.S. Armed Forces? No
13a. Residence: Number and Street (e.g., 624 SE 5th St.) (Include Apt. No.) 369 112th Avenue SE			13b. City or Town Bellevue		
13c. Residence: County King		13d. Tribal Reservation Name (if applicable)	13e. State or Foreign Country Washington	13f. Zip Code + 4 98004	13g. Inside City Limits? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk
14. Estimated length of time at residence. 13 Years		15. Marital Status at Time of Death Widowed		16. Surviving Spouse's Name (Give name prior to first marriage)	
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED). Administrative Assistant			18. Kind of Business/Industry (Do not use Company Name) Visiting Nurse Services		
19. Father's Name (First, Middle, Last) Richard J. Annibal			20. Mother's Name Before First Marriage (First, Middle, Last) Alice E. [REDACTED]		
21. Informant's Name Casey M. Choate		22. Relationship to Decedent Daughter	23. Mailing Address: Number and Street or RFD No. City or Town State Zip 369 112th Avenue SE, Bellevue WA 98004		
24. Place of Death, if Death Occurred in a Hospital: Inpatient			24. Place of Death, if Death Occurred Somewhere Other than a Hospital:		
25. Facility Name (If not a facility, give number & street or location) Overlake Hospital			26a. City, Town, or Location of Death Bellevue	26b. State WA	27. Zip Code 98004
28. Method of Disposition Cremation		29. Place of Final Disposition (Name of cemetery, crematory, other place) Seattle Service Group Crematory		30. Location-City/Town, and State Seattle, Washington	
31. Name and Complete Address of Funeral Facility Forest Lawn Funeral Home 6701 30th Avenue SW, Seattle, WA 98126			32. Date of Disposition April 21, 2006		
33. Funeral Director Signature <i>[Signature]</i>					
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. RENAL FAILURE Due to (or as a consequence of):					
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST b. PULMONARY HYPERTENSION Due to (or as a consequence of):					
c. ARTIAL FIBRILLATION Due to (or as a consequence of):					
d.					
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 checked="" 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 checked="" type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days before 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 checked="" type="checkbox"/> Probably <input type="checkbox"/> No <input checked="" 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk	
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 - To the best of my knowledge, death occurred at the time, date, and place and due to the cause(s) stated. Overlake Internal Medicine Associates				48b. Medical Examiner/Coroner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.	
49. Name and Address of Certifier, Physician, Medical Examiner or Coroner (Type of Print) 1135 116th Ave NE, Ste 600 Bellevue, WA 98004				50. Hour of Death (24hrs) 1025	
51. Name and Title of Affirming Human Certifier (Type of Print)				52. Date Signed (MM/DD/YYYY) 04 19 2006	
53. Title of Certifier MD		54. License Number MD00036678		55. Was case referred to ME/Coroner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
57. Registrar Signature <i>[Signature]</i>					
59. Amendments					



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Affidavit for Correction

Center for Health Statistics
P.O. Box 9709
Olympia, WA 98507-9709
(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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Use the section below for requesting any changes on the record.

Record Type: ☒ Birth ☐ Death ☐ Marriage ☐ Dissolution

1. Name on record: 2. Date of Event: 3. Place of Event: (City or County)

4. Father's Full Name (For Birth): (Husband for Marriage or Dissolution) 5. Mother's Full Name (For Birth): (Wife for Marriage or Dissolution)

The Record is Incorrect or Incomplete as follows:

The Record now shows:	The True fact is:
6.	7.
8.	9.
10.	11.
12.	13.

14. I represent the person as: ☐ Self ☐ Parent ☐ Guardian ☐ Informant ☐ Funeral Director ☐ Other (Specify) Telephone Number:

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

15. Signature: 16. Date: 17. Address:

All vital records are registered as received. An item may be changed by affidavit only once. Subsequent changes must be made by court order. The incorrect certificate must be returned within one year of the date it was issued to receive a replacement copy free of charge.

All changes must be established by documentary proof submitted with the affidavit

Examples of documentary proof: Certificate of Naturalization Medical Record School Record
Hospital Records Military Record (DD-214) Voter's Registration Card (if it bears an effective date)
Insurance Records Birth Record Alien Registration Card (front and back)
Marriage/Divorce Records Passport

Birth Certificates:

- Only a parent, legal guardian (if the child is under 18), or the adult themselves (if 18 or older) may change the birth certificate.
- The proof(s) must match exactly the asserted true fact(s). For example, if the affidavit says the name is Mary Ann Doe, then the proof must show the name to be Mary Ann Doe. Mary A. Doe or M.A. Doe does not prove the name is Mary Ann Doe.
- Proof must be five (or more) years old or have been established within five years of birth.
- Up to age one, the parent(s) or legal guardian may change the child's last name with an affidavit for correction, provided:
 - This is a one time only change. Subsequent changes will require a certified copy of a court ordered name change.
 - The new last name may be the mother's maiden name or father's name (if present on the certificate) or any combination of the two.
 - After age one, last name changes require a certified copy of a court ordered name change. Minor spelling changes may be made with an affidavit and documentary proof.
- Parent(s) may change their child's first or middle name by completing and signing an affidavit for correction (until their child's 18th birthday).
- This affidavit cannot be used to add a father to a birth certificate. (Use the paternity affidavit - form DOH/CHS 021)

Death Certificates:

- Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information.
- The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.
- If it is less than sixty days from date of death please contact the county health department where the death occurred to make changes.

Marriage/Dissolution (Divorce) Certificates:

- Personal fact(s) (minor spelling changes in name, date or place of birth or residence) may be changed by affidavit (with proof) by the person.
- To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must sign the affidavit.

DOH/CHS 023 (Rev. 9/2009)



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NN00980499

Schedule A

Lot 15, GRANDVIEW TERRACE, according to the plat recorded in volume 5 of plats, page 36, records of Skagit County, Washington EXCEPT that portion thereof described as follows: Beginning at the southwest corner of said Lot 15; thence north $2^{\circ}31'30''$ west along the west line of lot 15, a distance of 186.71 feet, more or less, to the intersection of said west line with the center line of that certain unnamed east-west road platted in the plat of HOPLEY'S SAMISH ISLAND TRACTS, according to the plat recorded in volume 5 of plats, page 44, records of Skagit County, Washington, and the true point of beginning; thence north $87^{\circ}39'$ east 95 feet; thence north $2^{\circ}31'30''$ west parallel with the west line of said lot 15, a distance of 241.14 feet, more or less, to the north line of said lot 15; thence west along said north line to the northwest corner of said lot 15; thence south $2^{\circ}31'30''$ east along the west line of lot 15, a distance of 247.14 feet, more or less, to the true point of beginning.

TOGETHER WITH tidelands of the second class adjoining that portion of said lot 15 described above.

ALSO, TOGETHER WITH an easement for roadway for ingress, egress and for utilities over the south 20 feet of that portion of lot 15, GRANDVIEW TERRACE, according to the plat recorded in volume 5 of plats, page 36, records of Skagit County, Washington, described as follows:

Beginning at the southwest corner of said lot 15; thence north $2^{\circ}31'30''$ west along the west line of lot 15, a distance of 186.71 feet, more or less, to the intersection of said west line with the center line of that certain unnamed east-west road platted in the plat of HOPLEY'S SAMISH ISLAND TRACTS, according to the plat recorded in volume 5 of plats, page 44, records of Skagit County, Washington, and the true point of beginning; thence north $87^{\circ}39'$ east 95 feet; thence north $2^{\circ}31'30''$ west parallel with the west line of said lot 15, a distance of 241.14 feet, more or less, to the north line of said lot 15; thence west along said north line to the northwest corner of said lot 15; thence south $2^{\circ}31'30''$ east along the west line of lot 15, a distance of 247.14 feet, more or less, to the true point of beginning.



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2006 OCT 13 PM 1:21

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6
7 IN THE SUPERIOR COURT, STATE OF WASHINGTON, IN SKAGIT COUNTY

8 IN THE MATTER OF THE ESTATE)

9 OF)

10 LINDA S. ROSVALL,)

11 Deceased.)

06. 4 00284 9

ORDER ADJUDICATING
TESTACY

12
13 A PETITION praying that a certain document be
14 established as the Last Will and Testament of the Decedent
15 and establishing the persons named therein to receive the
16 estate thereunder having come on for hearing and evidence
17 having been received, the Court finds that:

18 1. Jurisdiction. LINDA S. ROSVALL, the decedent
19 herein, died on the 18th day of April, 2006, a resident of
20 Skagit County, Washington, leaving property in this State
21 subject to probate administration.

22 2. Testacy. Decedent's Will was executed by her in
23 writing, on the 11th day of October, 1991, at which time she
24 was of legal age and of sound mind, and was declared to be
25 her Will before two or more competent witnesses who attested
26 the document in Decedent's presence and in the presence of
27 each other at the Decedent's request.

28
ORDER ADJUDICATING
TESTACY -1



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3. Spouse. The deceased was predeceased in death by her spouse, Wilbur Rosvall, who died in March of 1992.

4. Heirs and Beneficiaries. The names, addresses, relationship, and ages of the heirs, legatees and devisees, together with their distributive share of the estate are as follows:

<u>NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AGE</u>	<u>% SHARE</u>
CAROLYN L. PLEMONS 1901 Maple Leaf Court Lake Oswego, OR	Daughter	Legal	50%
CASSANDRA M. CHOATE 369 112 th Ave. SE Bellevue, WA 98004	Daughter	Legal	50%

5. Personal Representative. The appointment of a Personal Representative was not requested.

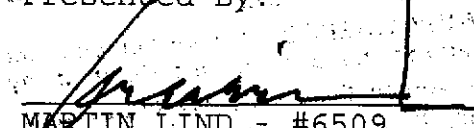
Now, therefore,

IT IS HEREBY ORDERED, ADJUDGED AND DECREED that said document is established as the Last Will and Testament of the Decedent and that the above-named heirs, legatees and devisees are entitled to receive the estate in the proportions indicated.

DONE IN COURT this 13 day of October, 2006.


JUDGE/COURT COMMISSIONER

Presented By:


MARTIN LIND - #6509
Attorney for Petitioner



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ORDER ADJUDICATING
TESTACY -2

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127 EAST FAIRHAVEN
BURLINGTON, WASHINGTON 98233
TELEPHONE (360) 755-9831

UNOFFICIAL DOCUMENT

State of Washington, } ss.
County of Skagit

I, Nancy K. Scott, County Clerk of Skagit County and ex-officio Clerk of the Superior Court of the State of Washington, for the County of Skagit, do hereby certify that the foregoing instrument is a true and correct copy of the original, consisting of 2 pages, now on file in my office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Seal of said Court at my office at Mount Vernon, this 13 day of Oct, 2006. Nancy K. Scott, County Clerk

By _____
Deputy Clerk



201207060049

Skagit County Auditor

2006 OCT 13 PM 1:20

LAST WILL
OF
LINDA SUE ROSVALL

I, LINDA SUE ROSVALL, of Bellevue, Washington, do make, publish and declare this to be my Last Will.

ARTICLE I

Revocation of Prior Wills

1.1 I hereby revoke any and all wills and codicils heretofore made by me.

ARTICLE II

Identification of Family

2.1 I declare that my immediate family now consists of my spouse, WILBUR PETER ROSVALL. I further declare that I have two daughters from a prior marriage, CAROLYN L. PLEMONS of Keizer, Oregon and CASSANDRA M. CHOATE of Bellevue, Washington. I make no provision in this will for the child of my spouse born of a prior marriage.

ARTICLE III

Meaning of Terms

3.1 Any reference to my spouse herein shall apply only to my spouse above named.

3.2 Any reference to the term "my children" herein shall refer to my children named above and to any other child who may hereafter be born to or legally adopted by me; and the terms "children" and "issue" shall refer to legally adopted as well as natural children.

Page 1 of four pages.

Initials LJR



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3.3 A person shall not be deemed to have survived another person in applying the terms of this Will unless he or she has survived such other person by a period of at least one hundred twenty (120) days.

ARTICLE IV

Appointment of My Personal Representative

4.1 I appoint as my Personal Representative to administer my estate, my daughter, CAROLYN L. PLEMONS of Keizer, Oregon, who shall act as such without furnishing or giving bond or other security, and who shall have unrestricted nonintervention powers to administer and settle my estate without the intervention of court and in accord with the applicable laws of the State of Washington. If my daughter declines, fails or is for any reason unable to serve, then I appoint my spouse as my Personal Representative, who shall act as such without furnishing or giving bond or other security, and who shall also have unrestricted nonintervention powers.

ARTICLE V

Disposition of My Estate

5.1 Specific Bequests. I declare that I own as separate real property, jointly with my two brothers, an interest in some property in Bow, Washington. I hereby give, devise and bequeath my interest in that certain real property described as Lot 15, Grandview Terrace, Sections 26 and 27, Samish Island, Bow, Washington, to my two daughters, CAROLYN L. PLEMONS and CASSANDRA M. CHOATE.

5.2 Gift If My Spouse Survives Me. If my spouse survives me, then I give, devise and bequeath to my spouse, WILBUR PETER ROSVALL, all of the rest, residue and remainder of my property, whether real, personal or mixed and wheresoever situate.

Page 2 of four pages.

Initials LSR



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5.3 Gift If My Spouse Does Not Survive Me. If my spouse does not survive me, then I give, devise and bequeath to my two daughters, CAROLYN L. PLEMONS and CASSANDRA M. CHOATE all of my property, whether real, personal or mixed and wheresoever situate, in equal shares, or to their surviving issue, per stirpes not per capita.

5.4 Gift If Neither My Spouse Nor Issue Survive Me. If neither my spouse nor any of my issue survive me, then I give, devise and bequeath all of my property, whether real, personal or mixed and wheresoever situate, to those persons who are entitled to my estate under the laws of the State of Washington relating to the disposition of estates of persons who die intestate.

ARTICLE VI

Taxes

6.1 I direct that all estate, inheritance, transfer and succession taxes on my estate whether or not on property passing under this Will shall be paid out of the residue of my probate estate.

IN WITNESS WHEREOF, I have initialed for identification purposes the preceding pages of this, my Last Will, and have executed the entire instrument by setting my hand to this, the third page hereof and also have initialed the affidavit and attestation of witnesses subjoined hereto as a part hereof on this 11th day of October, 1991 at Bellevue, Washington.

Linda Sue Rosvall
LINDA SUE ROSVALL



STATE OF WASHINGTON
COUNTY OF KING

)
) ss.
)

We, the undersigned, being first duly sworn, on oath, state:

We, each, are of legal age and make this affidavit and attestation at the request of LINDA SUE ROSVALL. The foregoing instrument, consisting of four pages, including this affidavit, was on the 11th day of October 1991 signed by the testatrix and declared by her to be her Last Will in our presence and in the presence of each other, who believing her to be of sound and disposing mind and memory, and not acting under any duress, menace, fraud, or undue influence have subscribed our names as witnesses, together with our addresses, respectively.

Barbara L. Gynell

Residing at Bellevue, WA.

Cameron R. Higdon

Residing at Woodinville, WA

SUBSCRIBED AND SWORN to before me on the 11th. day of October, 1991.

Ronald W. Fleming

Notary Public in and for the
State of Washington, residing
at Bellevue WA. 98004

My commission expires:

12-12-91

