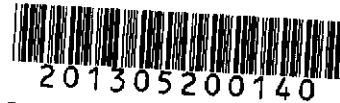


Recording Requested By And
When Recorded Mail To:

MICHAEL J DeFRANCO
Attorney at Law
5040 Wilson Avenue South
Seattle WA 98118-2085



Skagit County Auditor

5/20/2013 Page

1 of

\$75.00

4 12:36PM

Grantor: DIANE E. COLMAN
Grantee: THE PUBLIC
Legal Description (abbreviated):
Assessor's Tax Parcel ID# 4775-000-027-0000 P119616

In Re the Estate of

PETER COLMAN,

Deceased.

AFFIDAVIT OF COMPLETION
NO PROBATE

AFFIDAVIT

IN SUPPORT OF COMMUNITY PROPERTY AGREEMENT

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

DIANE E. COLMAN, being first duly sworn on oath, deposes and says:

1. The affiant is the surviving spouse of PETER COLMAN, who died in Mount Vernon, Washington, on April 2, 2013. Affiant and PETER COLMAN had executed a Community Property Agreement dated June 27, 2011 which was recorded in the office of the Skagit County Recorder on April 26, 2013, under Recording No. 201304260048.

2. A copy of the Death Certificate for PETER COLMAN, which was recorded April 26, 2013 under Recording No. 201304260049, is marked Exhibit A and is attached hereto and incorporated herein by this reference.

3. The parties to the Community Property Agreement referred to above have entered into no subsequent will or agreement which would have the affect of abrogating or nullifying the above-mentioned Community Property Agreement.

4. All obligations of the decedent and the former marital community owing at the time of the death of the decedent have been paid in full and all expenses of last illness and funeral and burial have been paid.

5. The community real property owned by affiant and PETER COLMAN is contained on Exhibit B which is attached hereto and made a part hereof as though set forth in full.

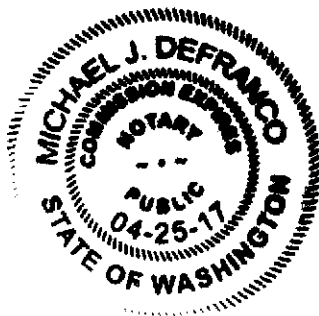
6. The decedent was survived by the following person:

<u>Name</u>	<u>Address</u>	<u>Relationship</u>
DIANE E. COLMAN	2516 Stonebridge Way Mount Vernon, WA 98273	Spouse

DATED this 14th of May, 2013.

Diane E. Colman
DIANE E. COLMAN

SIGNED and sworn to before me this 14th day of May, 2013, by DIANE E. COLMAN.



Michael J. DeFranco
Notary Public in and for the
State of Washington residing at Seattle.
My Commission Expires: 4/25/17



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2013-006035

DATE ISSUED: 04/08/2013

FEE NUMBER: 0000310413

GIVEN NAMES: PETER
LAST NAME: COLMAN

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: APRIL 02, 2013
HOUR OF DEATH: 03:45 A.M.
SEX: MALE
AGE: 88 YEARS

SOCIAL SECURITY NUMBER:

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: AUGUST 20, 1924
BIRTHPLACE: KENT, WASHINGTON

MARITAL STATUS: MARRIED
SPOUSE: DIANE ELAINE BAILEY

OCCUPATION: SUPERVISOR
INDUSTRY: GOVERNMENT
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES? YES

INFORMANT: DIANE ELAINE COLMAN
RELATIONSHIP: SPOUSE
ADDRESS: 2516 STONEBRIDGE WAY MOUNT VERNON, WA 98273

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 2516 STONEBRIDGE WAY
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273

RESIDENCE STREET: 2516 STONEBRIDGE WAY
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
INSIDE CITY LIMITS? YES
COUNTY: SKAGIT

TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 9 YEARS

FATHER: JAMES M COLMAN
MOTHER: I

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: SEATTLE SERVICE GROUP CREMATOR
CITY, STATE: SEATTLE, WA
DISPOSITION DATE: APRIL 04, 2013

FUNERAL FACILITY: NEPTUNE SOCIETY
ADDRESS: 19324 40TH AVE W. #A
CITY, STATE, ZIP: LYNNWOOD WA 98036
FUNERAL DIRECTOR: ED J. SUDDERTH

CAUSE OF DEATH:
A. ADENOCARCINOMA OF THE LUNG
INTERVAL: 12 MONTHS

B.
INTERVAL:

C.
INTERVAL:

D.
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:
HISTORY OF COLORECTAL CARCINOMA. CHRONIC OBSTRUCTIVE PULMONARY DISEASE.

DATE OF INJURY:
HOW INJURED:
INJURY AT BIRTH:
PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

ITEM(S) AMENDED: NONE

MANNER OF DEATH: NATURAL

AUTOPSY: UNKNOWN
AVAILABLE TO COMPLETE THE CAUSE OF DEATH? UNKNOWN
DID TOBACCO USE CONTRIBUTE TO DEATH? YES
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: PAUL JOHNSON, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 819 SOUTH 13TH. STREET
CITY, STATE, ZIP: MOUNT VERNON WA 98274
DATE SIGNED: APRIL 03, 2013

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN:
NOT APPLICABLE

LOCAL DEPUTY REGISTRAR:
MARIA VIVANCO
DATE RECEIVED: APRIL 04, 2013



Skagit County Auditor
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CENTER FOR HEALTH STATISTICS CERTIFIED COPIES MUST HAVE THIS SEAL

EXHIBIT A

SCHEDULE OF REAL PROPERTY

<u>Item</u>	<u>Description</u>
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Real Property:

House and lot located at:

2516 Stonebridge Way
Mount Vernon, WA 98273

legally described as:

Unit 27, STONEBRIDGE
CONDOMINIUM, according to the SIXTH
AMENDED DECLARATION THEREOF
recorded August 20, 2003, under the
Auditor's File Number 200308200025,
AND FOURTH AMENDED SURVEY
MAP AND PLANS THEREOF recorded
October 11, 2002, under Auditor's File
Number 200210110206, records of Skagit
County Washington.

2013 Real Estate Tax Assessment

Land: \$ 54,400.00
Improvements: \$166,900.00
TOTAL: \$221,300.00

Tax Parcel No.: 4775-000-027-0000 P119616



201305200140

Skagit County Auditor

\$75.00