



201404070049

Skagit County Auditor \$78.00
4/7/2014 Page 1 of 7 9:01AM

Recorded by and return to:

Stiles & Stiles, Inc., P.S.
P.O. Box 228
Sedro-Woolley, WA 98284

Legal: (49.0200 ac) O/S #617 AF #762605 1973 PTN LT 3 & NW1/4 SW1/4 AKA LT 2
S/P 26-79 REC AF #7908170006
Tax Parcel # P51130

AFFIDAVIT RE: COMMUNITY PROPERTY AGREEMENT

STATE OF WASHINGTON) ss.
COUNTY OF SKAGIT)

Sharon Bever, being first duly sworn, deposes and says:

1. That affiant is the surviving spouse of Robert Riley Bever, who died at Sedro-Woolley, County of Skagit, State of Washington, on February 24, 2014, having provided for the disposition of all community property as between affiant and said deceased spouse under a Community Property Agreement dated March 3, 2005, which agreement has been recorded simultaneously with this affidavit and a copy of the decedent's death certificate under the records of the Auditor for Skagit, Washington.

2. That there are no unpaid creditors of said decedent or the former marital community nor unpaid funeral expense or expense of last illness, except for:

NONE

3. That the value of the community estate as of the date of death, including all real and personal property, was over \$10,000.00, and the value of all separate

property of said decedent was \$0.00 as of the date of his death. Among other items of community property was the following described real estate:

Address: 5705 SR 9, Sedro-Woolley, WA 98284

Parcel ID: P51130

Xref ID: 360531-0-004-0002

Legal description attached

4. This affidavit is made to induce any title company to issue its policies of title insurance on real property passing to the affiant as surviving spouse by virtue of said community property survivorship agreement in reliance upon the representations hereinabove set forth.

DATE: April 1, 2014

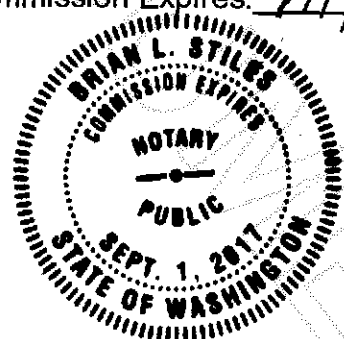
Sharon Bever
Sharon Bever

State of Washington) ss.
County of Skagit)

On this day personally appeared before me Sharon Bever, who executed the within and foregoing instrument and acknowledged that he signed the same as his free and voluntary act and deed for the uses and purposes therein mentioned.

GIVEN UNDER my hand and official seal on April 1 2014

Brian L. Stiles
NOTARY PUBLIC in and for the
State of Washington, residing at
Sedro-Woolley
Commission Expires: 9/1/2014



Legal Description

P51130
360531-0-004-0002

Tract 2 of Skagit County Short Plat NO. 26-79, approved August 15, 1979 and recorded August 17, 1979, as Auditor's File No. 7908170006, in Book 3 of Short Plats, page 163, records of Skagit County, Washington; being a portion of the North 7/15^{ths} of the Southwest ¼ of Section 31, Township 36 North, Range 5 East W.M.

EXCEPT

A 10 foot wide Easement in the Northeast quarter of the Southwest quarter of Section 31, Township 35 North, Range 5 East of Willamette Meridian. More particularly described as follows (bearings and distances are NAD 83/91, Washington State Plane Coordinate System, North Zone):

Commencing at a Cased Brass Monument marking the Center of said Section 31 also being a point on the Centerline of Fruitdale Road; Thence North 88°00'36" West, along the North line of said Northeast quarter of the Southwest quarter and Centerline of Fruitdale Road for a distance of 276.25 feet to a point on the West line of the Northwest Pipeline Corporation Right of Way and Easement (being 20 feet Westerly as measured from the Centerline of the Grantees most Westerly pipeline); Thence South 00°59'27" West, along said West line of Right of Way and Easement for a distance of 20.00 feet to a point on the Southerly Right of Way of Fruitdale Road and the True Point of Beginning; Thence continuing South 00°59'27" West, along said West line of Right of Way and Easement for a distance of 10.00 feet; Thence North 88°00'36" West, parallel to said Centerline of Fruitdale Road for a distance of 600.00 feet; Thence North 00°59'27" East, parallel to said West line of Right of Way and Easement for a distance of 10.00 feet to a point on said Southerly Right of Way; Thence South 88°00'36" East, along said Southerly Right of Way for a distance of 600.00 feet to the Point of Beginning.

Situate in Skagit County, Washington.



RECORDED AT THE REQUEST OF:

Stiles & Stiles, Inc., P.S.
P.O. Box 228
Sedro-Woolley, Washington 98284

COMMUNITY PROPERTY SURVIVORSHIP AGREEMENT

THIS AGREEMENT made and entered into by and between Robert Riley Bever and Sharon Bever, husband and wife, pursuant to the provisions of Section 26.16.120, Revised Code of Washington; providing for agreements between husband and wife for fixing of the status and disposition of community property to take effect upon the death of either.

WITNESSETH:

That, in consideration of the love and affection that each of the parties has for the other, and in consideration of the mutual benefits to be derived by the parties hereto, it is hereby agreed, covenanted and promised as follows:

FIRST: That all property of whatsoever nature and description, whether real, personal or mixed, and wheresoever situated now owned or hereafter acquired by them or either of them, shall be considered and is hereby declared to be community property.

SECOND: That upon the death of either of the parties hereto, title to all community property as defined in the preceding paragraph shall immediately vest in fee simple in the survivor of them.



201404070049

IN WITNESS WHEREOF, Robert Riley Bever and Sharon Bever, husband and wife, have hereunto set their hands and seals this 3rd of March, 2005.

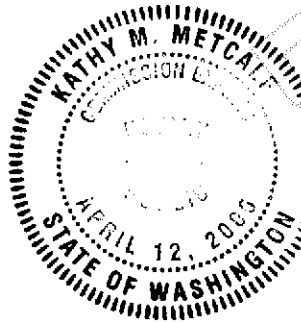
Robert R. Bever
Robert Riley Bever

Sharon Bever
Sharon Bever

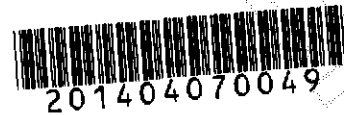
STATE OF WASHINGTON) ss.
COUNTY OF SKAGIT)

This certifies that Robert Riley Bever and Sharon Bever, husband and wife, personally appeared before me and known to me to be the individuals described in and who executed the foregoing instrument and acknowledged the same as their free and voluntary act and deed, for the uses and purposes therein mentioned.

WITNESS my hand and official seal this 3 of March, 2005



Kathy M. Metcalf
NOTARY PUBLIC in and for the
State of Washington, residing at
Sequoia Woodley
Commission expires: 4-12-2009



Skagit County Auditor
4/7/2014 Page

\$78.00
5 of 7 9:01AM

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2014-004251

DATE ISSUED: 02/26/2014

FEE NUMBER: 000000029

GIVEN NAMES: ROBERT RILEY
LAST NAME: BEVER

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: FEBRUARY 24, 2014
HOUR OF DEATH: 06:05 P.M.
SEX: MALE
AGE: 88 YEARS

SOCIAL SECURITY NUMBER: *

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: JANUARY 16, 1926
BIRTHPLACE: BELLINGHAM, WHATCOM CNTY, WASHINGTON

MARITAL STATUS: MARRIED
SPOUSE: SHARON SEXTON

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

INFORMANT: SHARON BEVER
RELATIONSHIP: WIFE
ADDRESS: 5705 STATE ROUTE 9, SEDRO-WOOLLEY, WA 98284

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 5705 STATE ROUTE 9
CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284

RESIDENCE STREET: 5705 STATE ROUTE 9
CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284
INSIDE CITY LIMITS? NO
COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 60 YEARS

FATHER: ORVILLE JUST BEVER
MOTHER: ORPHA KATHERINE

METHOD OF DISPOSITION: BURIAL
PLACE OF DISPOSITION: SAXON CEMETERY
CITY, STATE: ACME, WA
DISPOSITION DATE: MARCH 01, 2014

FUNERAL FACILITY: LEMLEY CHAPEL
ADDRESS: 1008 THIRD ST
CITY, STATE, ZIP: SEDRO WOOLLEY WA 98284
FUNERAL DIRECTOR: RICK B. LEMLEY

CAUSE OF DEATH:
A. IMMUNOGLOBULIN A NEPHROPATHY
INTERVAL: 3 MONTHS

B. INTERVAL:

C. INTERVAL:

D. INTERVAL:



201404070049

Skagit County Auditor \$78.00
4/7/2014 Page 6 of 7 9:01AM

OTHER CONDITIONS CONTRIBUTING TO DEATH:
URINARY TRACT INFECTION, DEMENTIA, DIABETES

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK?
PLACE OF INJURY:

LOCATION OF INJURY:

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

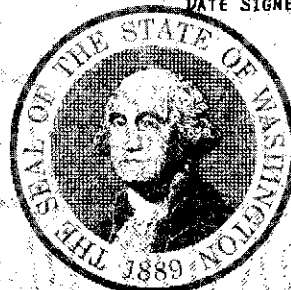
MANNER OF DEATH: NATURAL
AUTOPSY: NO
AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH? NO
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: MICHAEL R. DILLARD, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: PO BOX 329
CITY, STATE, ZIP: BURLINGTON WA 98233
DATE SIGNED: FEBRUARY 26, 2014

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

ITEM(S) AMENDED: INFORMANT ADOR

NUMBER(S): 2014061171
DATE(S): 02/26/2014



CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NJM 131
ATTENDING PHYSICIAN:
NOT APPLICABLE

LOCAL DEPUTY REGISTRAR:
MEL PEDROSA
DATE RECEIVED: FEBRUARY 26, 2014

DOH 06-003 (1/13)

State of Washington
 County of Skagit
 Date of Birth: 12/12/1984
 Sex: Female
 Race or Ethnicity: White
 Date of Issue: 12/12/2014
 Date of Expiration: 12/12/2016
 Date of Last Revision: 12/12/2014
 Date of Last Review: 12/12/2014

14. I declare that I am a Parent Guardian Informant Other of the above named individual.
 My phone number is 360 835 3000
 My address is 1000 W 1st Street Skagit WA 98290
 My signature is [Signature]
 My title is Health Officer

All vital records within the jurisdiction of Skagit County established by an individual and submitted to the auditor for the purpose of amending a record shall be subject to the following conditions:
 1. The auditor shall issue a document that is a true and correct copy of the original record.
 2. The auditor shall issue a document that is a true and correct copy of the original record.
 3. The auditor shall issue a document that is a true and correct copy of the original record.
 4. The auditor shall issue a document that is a true and correct copy of the original record.
 5. The auditor shall issue a document that is a true and correct copy of the original record.

- Birth Certificates
1. Only a certified birth recorder or the auditor of the county may amend an individual's birth certificate.
 2. The auditor shall issue a document that is a true and correct copy of the original record. If the auditor is not the auditor of the county, then the proof must show the name of the auditor of the county.
 3. The auditor shall issue a document that is a true and correct copy of the original record.
 4. The auditor shall issue a document that is a true and correct copy of the original record.
 5. The auditor shall issue a document that is a true and correct copy of the original record.
 6. The auditor shall issue a document that is a true and correct copy of the original record.
 7. The auditor shall issue a document that is a true and correct copy of the original record.
 8. The auditor shall issue a document that is a true and correct copy of the original record.

- Death Certificates
1. Only the informant, the funeral director, or executor/administrator (if evidence confirming such position is provided) may change the non-medical information on a death certificate. If the informant is requesting the change, the informant must provide a certified copy of the death certificate and a document that is a true and correct copy of the original record.
 2. The auditor shall issue a document that is a true and correct copy of the original record.
 3. The auditor shall issue a document that is a true and correct copy of the original record.
 4. The auditor shall issue a document that is a true and correct copy of the original record.
 5. The auditor shall issue a document that is a true and correct copy of the original record.
 6. The auditor shall issue a document that is a true and correct copy of the original record.
 7. The auditor shall issue a document that is a true and correct copy of the original record.
 8. The auditor shall issue a document that is a true and correct copy of the original record.

CERTIFIED
 FEB 28 2014
 [Signature]
 Skagit County Health Department
 Howard Leibrand M.D., Health Officer

