

When recorded return to:
Alan Hebert
17703 Ervine Lane
Mount Vernon, WA 98274



201612160072

Skagit County Auditor \$38.00
12/16/2016 Page 1 of 4 12:01PM

DOCUMENT TITLE(S)

Death Certificate

CHICAGO TITLE
620079078 3/35

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED: _____

Additional reference numbers on page _____ of document

GRANTOR(S)

Public

☐ Additional names on page _____ of document

GRANTEE(S)

Darcy Y Hebert

☐ Additional names on page _____ of document

ABBREVIATED LEGAL DESCRIPTION

PTN S/2 SW SE, 34-34-04

Complete legal description is on page _____ of document

TAX PARCEL NUMBER(S)

P131208 / 340434-4-005-0011

Additional Tax Accounts are on page _____ of document

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

"I am signing below and paying an additional \$50 recording fee (as provided in RCW 36.18.010 and referred to as an emergency nonstandard document), because this document does not meet margin and formatting requirements. Furthermore, I hereby understand that the recording process may cover up or otherwise obscure some part of the text of the original document as a result of this request."

Signature of Requesting Party

Note to submitter: Do not sign above nor pay additional \$50 fee if the document meets margin/formatting requirements

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2016-016751

DATE ISSUED: 11/03/2016

FEE NUMBER: 0000000029

GIVEN NAMES: DARCY VVETTE
LAST NAME: HEBERT

COUNTY OF DEATH: KING
DATE OF DEATH: APRIL 13, 2016
HOUR OF DEATH: 03:00 P.M.
SEX: FEMALE
AGE: 58 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: [REDACTED]
BIRTHPLACE: TACOMA, PIERCE CNTY, WASHINGTON

MARITAL STATUS: MARRIED
SPOUSE: ALAN HEBERT

OCCUPATION: HOMEMAKER
INDUSTRY: OWN HOME
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES? NO

INFORMANT: ALAN HEBERT
RELATIONSHIP: HUSBAND
ADDRESS: 17703 ERVINE LANE, MOUNT VERNON, WASHINGTON, 98274

PLACE OF DEATH: HOSPITAL
FACILITY OR ADDRESS: SWEDISH MEDICAL CENTER - FIRST HILL
CITY, STATE, ZIP: SEATTLE, WASHINGTON 98122

RESIDENCE STREET: 17703 ERVINE LANE
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98274076
INSIDE CITY LIMITS? NO
COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 16 YEARS

FATHER/PARENT: DAVID C WAKEMAN
MOTHER/PARENT: CLEMENTINE Y [REDACTED]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: HERITAGE CREMATORY
CITY, STATE: MARYSVILLE, WA
DISPOSITION DATE: APRIL 25, 2016

FUNERAL FACILITY: AMERICAN CREMATION AND CASKET ALLIANCE
ADDRESS: 3803 132ND PLACE NE
CITY, STATE, ZIP: MARYSVILLE WA 98271
FUNERAL DIRECTOR: JUDY A. JEWELL

CAUSE OF DEATH:

- A. LIVER FAILURE OF UNDETERMINED ETIOLOGY
INTERVAL: 1 WEEK
B. EXTENSIVE PORTAL AND SPLENIC VEIN THROMBOSIS
INTERVAL: DAYS
C.
INTERVAL:
D.
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

RESPIRATORY FAILURE, RIGHT LEPTOMENINGEAL SIGNAL CHANGES ON MRI, SIGNIFICANT LACTIC ACIDOSIS IN THE SETTING OF HEPATIC FAILURE, HISTORY OF PSORIATIC ARTHRITIS, KNOWN CORONARY ARTERY DISEASE WITH HISTORY OF CORONARY ARTERY BYPASS GRAFT

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

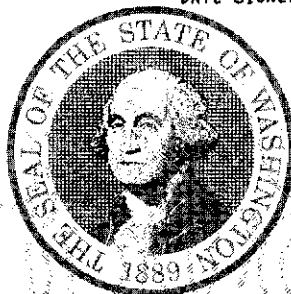
AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH? NO
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

CERTIFIER NAME: JESSICA JUNG, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 925 SENECA STREET
CITY, STATE, ZIP: SEATTLE WA 98111
DATE SIGNED: APRIL 18, 2016

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

ITEM(S) AMENDED: NONE

NUMBER(S): NONE
DATE(S): NONE



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

LOCAL DEPUTY REGISTRAR:
DIANE BOGAN
DATE RECEIVED: APRIL 22, 2016



Affidavit for Correction

This is a legal document. Complete in ink and do not alter.

Mail to: Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
360-236-4390

STATE OFFICE USE ONLY

State File Number	Fee Number	Initials	Date	Affidavit Number
Required information must match current information on record				
Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution (Divorce)				
1. Name on Record:	2. Date of Event:	3. Place of Event:		
4. Father/Parent Full Legal Name (Spouse A for Marriage or Dissolution)		5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution)		
6. Name of Person Requesting Correction:	Relationship to Person on Record: <input type="checkbox"/> Self <input type="checkbox"/> Parent(s) <input type="checkbox"/> Guardian <input type="checkbox"/> Funeral Director <input type="checkbox"/> Informant <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Hospital		

7. Return Mailing Address: _____

Telephone Number: _____ Email Address: _____

Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:

The record now shows:	The true fact is:
8. _____	9. _____
10. _____	11. _____
12. _____	13. _____
14. _____	15. _____

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

16a. Signature: _____ Date: _____ Printed name: _____

16b. Signature of 2nd parent (if required): _____ Date: _____

INSTRUCTIONS go to _____ for more information

Driver's license, Social Security card or hospital decorative birth certificate cannot be used as proof

Required documentary proof must be submitted with the affidavit and include full name and birth date. Examples of documentary proof include:

- Birth/Marriage/Divorce record
- Military record (DD-214)
- School transcripts
- Social Security Numident Report
- Certificate of Naturalization
- Hospital/medical record
- Passport
- Green/Permanent Resident card (I-551)

Birth Certificates

1. Only a parent(s), legal guardian (if the child is under 18), or the named individual (if 18 or older) may change the birth certificate.
2. The proof(s) must match the asserted fact(s). For example, if the affidavit says the name should be Mary Ann Doe, the proof must show the name to be Mary Ann Doe.
3. Documentary proof must be five or more years old or established within five years of birth.

Child under 18

- If legal guardian(s) include certified court order proving guardianship
- Up to age one, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names)
- After age one, a court order is required to change the last name
- No proof is required to change the first or middle name*
- To correct parent's information, one documentary proof is required.
- To correct the sex of the child, one documentary proof from a medical provider is required.

Adult (18 years or older)

- Only the adult can change his or her birth certificate
- If the first or middle name is missing, three pieces of documentary proof are required
- If the first, middle and/or last name is misspelled, or date of birth is incorrect, two pieces of documentary proof are required
- To correct parent's birth date, place of birth, or name, one documentary proof is required

*To change any part of the name of a child, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate with request.

This affidavit cannot be used to add a father to a birth certificate (use paternity acknowledgment form DOH 422-032)

Death Certificates

1. Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information. Proof is required to make changes if requested by a family member not listed as the informant on the certificate (family members are spouse or registered domestic partner, parent, sibling or adult child or stepchild). The informant may change marital status with proof. Marital status requires a certified copy of a court order if someone other than the informant is requesting the change.
2. The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

1. Personal facts (minor spelling changes in name, date or place of birth or residence) may be changed by the person with one piece of documentary proof.
2. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.

DOH 422-034 October 2015

CERTIFIED

NOV 03 2016

Skagit County Health Department
Howard Leibrand M.D., Health Officer

GG00094095

EXHIBIT "A" LEGAL DESCRIPTION

Order No.: 620029078

For APN/Parcel ID(s): P131208 / 340434-4-005-0011

That portion of the South Half of the Southwest Quarter of the Southeast Quarter of Section 34, Township 34 North, Range 4 East, W.M., described as follows:

Commencing at the Southwest corner of the Northeast Quarter of the Southwest Quarter of the Southeast Quarter of said Section 34;

Thence South 89 degrees 32'18" East along the South line of the Northeast Quarter of the Southwest Quarter of the Southeast Quarter of said Section 34, a distance of 167.20 feet to a point on the Northerly prolongation of the Easterly line of that certain 40.00 foot wide road right of way as reserved in Quit Claim Deed filed under Auditor's File No. 803998, records of Skagit County, Washington;

Thence South 1 degree 31'48" East, a distance of 87.10 feet to a point on the Easterly line of said right of way and the point of beginning of this description;

Thence South 1 degree 31'48" East along said Easterly right of way line, a distance of 181.52 feet;

Thence South 1 degree 17'44" West along said Easterly right of way line, a distance of 53.62 feet;

Thence North 88 degrees 28'12" East, a distance of 144.01 feet;

Thence North 1 degree 31'48" West, a distance of 205.04 feet;

Thence South 88 degrees 33'59" West, a distance of 58.58 feet to a curve to the right having a radius of 130.00 feet;

Thence Westerly and Northerly along said curve through a central angle of 39 degrees 35'02", an arc distance of 89.81 feet to the point of beginning of this description.

Situated in Skagit County, Washington