

\$79.00

1 of 1

7 9:36AM

STILES LAW INC., P.S.
P.O. Box 228 / 925 Metcalf Street
Sedro Woolley, WA 98284

Names of All Heirs of the Decedent

3. That all the heirs at law and next of kin of the decedent that were living at the time of the Decedent's death are listed below. Heirs at law and next of kin of decedent include, but are not limited to:

- (a) a spouse or registered domestic partner, and
- (b) children, adopted children, the children of any predeceased child or adopted child (if decedent left no surviving children, then affiant has listed below all of the surviving parents, brothers and sisters of decedent).

The heirs at law of decedent are (list all of the heirs at law using the reverse side if necessary):

<u>Full Name</u>	<u>Age</u>	<u>Relationship to Decedent</u>
Frank R. Mudge 21427 Rolling Ridge Dr. Sedro-Woolley, WA 98284	Legal	Spouse

Description of the Property

4. That among the items of real property owned by the Decedent at the time of death was real estate located in the County of Skagit, State of Washington, and described as follows:

Parcel A: Lot B of SKAGIT COUNTY SHORT PLAT NO. 6-89, as approved March 14, 1989 and recorded March 15, 1989 in Volume 8 of Short Plats, page 116, under Auditor's File No. 8903150011, records of Skagit County, Washington; being a portion of Lot 2 of SKAGIT COUNTY SHORT PLAT NO. 29-84, as approved September 21, 1984 and recorded September 25, 1984 in Volume 6 of Short Plats, page 172, Under Auditor's File No. 8409250015, Records of Skagit County, Washington, and being a portion of the Northeast Quarter of the Northwest Quarter of Section 27, Township 35 North, Range 4 East of the Willamette Meridian. Situated in Skagit County, Washington.

Parcel B: A non-exclusive easement for ingress, egress, and utilities over and across the following described tract:

That portion of the Northeast Quarter of the Northwest Quarter of Section 27, Township 35 North, Range 4 East of the Willamette Meridian, more particularly described as follows:

Commencing at the Southeast corner of Lot 35 of the PLAT OF ROLLING RIDGE ESTATES, according to the plat thereof recorded in Volume 9 of Plats, pages 4 and 5, records of Skagit County, Washington;

thence North 89°35'52" East, along the North line of Rolling Ridge Drive, a distance of 17.79 feet to the true point of beginning;

thence continue North 89°35'52" East, a distance of 2.21 feet;

thence North 0°30'30" West, a distance of 3.66 feet;

thence South 30°39'44" West, a distance of 4.27 feet to the true point of beginning

All situated in Skagit County, Washington

AND

Parcel A: All that portion of the Government Lot 2, Section 25, Township 36 North, Range 1 East of the Willamette Meridian, described as follows:

Beginning at a point on the East line of the county road North 22°29' West 206.1 feet from the Northwest corner of tract 4 of "The Florence V. Lewis North Guemes Tracts Skagit County, Wash. 1925", according to the plat recorded in Volume 4 of Plats, page 41, records of Skagit County, Washington;

thence along the East side of the County Road North 22°29' West 33.8 feet;

thence continuing along the East line of said road North 35°29' West 67.9 feet;

thence North 62°26' East 181 feet, more or less, to the government meander line of said lot 2;

thence Southeasterly along the meander line 100 feet, more or less, to a point that bears North 62°26' East from the point of beginning;

thence South 62°26' West 162 feet, more or less, to the place of beginning.

Parcel B: Tide lands of the second class situate in front of, adjacent to, and abutting upon said premises as conveyed by the State of Washington by deed recorded under Auditor's File No. 40763, records of Skagit County, Washington.

Situate in Skagit County, Washington.

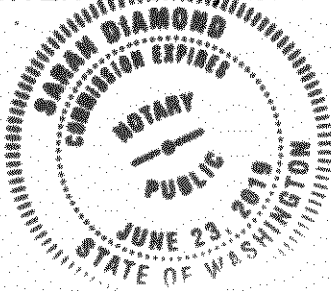
5. Status of the Will (if any)

- The decedent died having left a Last Will and Testament, dated 4-19-2013. The Will devises and states that:

DATED: Feb 28, 2017

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

GIVEN under my hand and official seal this 28 day of Feb, 2017.



Notary Public in and for the State of Washington
residing at 1140 N. Woolley
My appointment expires 6-23-19

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2015-015936

DATE ISSUED: 06/16/2015

FEE NUMBER: 000000029

GIVEN NAMES: DEANNA RAE
LAST NAME: WAGNER

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: JUNE 05, 2015
HOUR OF DEATH: 09:15 A.M.
SEX: FEMALE
AGE: 75 YEARS

SOCIAL SECURITY NUMBER: [REDACTED]

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

BIRTHDATE: [REDACTED]
BIRTHPLACE: SEATTLE, KING CNTY, WASHINGTON

MARITAL STATUS: MARRIED
SPOUSE: FRANK R. MUDGE

OCCUPATION: SUPPORT STAFF
INDUSTRY: CITY GOVERNMENT
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES? NO

INFORMANT: FRANK R. MUDGE
RELATIONSHIP: HUSBAND
ADDRESS: 21427 ROLLING RIDGE DRIVE, SEDRO-WOOLLEY, WA 98284

PLACE OF DEATH: EMERGENCY ROOM
FACILITY OR ADDRESS: PEACEHEALTH UNITED GENERAL HOSPITAL
CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284

RESIDENCE STREET: 21427 ROLLING RIDGE DRIVE
CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284
INSIDE CITY LIMITS? NO
COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 9 YEARS

FATHER: HOWARD RAYMOND WALL
MOTHER: WILMA LOUISE [REDACTED]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MOUNT VERNON CREMATORY
CITY, STATE: MOUNT VERNON, WA
DISPOSITION DATE: JUNE 09, 2015

FUNERAL FACILITY: LEMLEY CHAPEL
ADDRESS: 1008 THIRD ST
CITY, STATE, ZIP: SEDRO WOOLLEY WA 98284
FUNERAL DIRECTOR: DOUGLAS E. HUTTER

CAUSE OF DEATH:
A. COMPLICATIONS OF REMOTE AORTIC VALVE BYPASS SURGERY (APICOAORTIC CONDUIT)
INTERVAL: YEARS
B. AORTIC STENOSIS
INTERVAL: YEARS
C.
INTERVAL:
D.
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

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

NUMBER(S): 2015062506
DATE(S): 06/09/2015

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

CERTIFIER NAME: CARL W. WIGREN, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 1008 WEST GALER STREET
CITY, STATE, ZIP: SEATTLE WA 98119
DATE SIGNED: JUNE 08, 2015

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NJAN 349
ATTENDING PHYSICIAN:
NOT APPLICABLE

LOCAL DEPUTY REGISTRAR:
MEL PEDROSA
DATE RECEIVED: JUNE 09, 2015



Affidavit for Correction

Mail to: Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
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
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 Birth 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"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Hospital	<input type="checkbox"/> Parent(s) <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (specify)	
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 foregoing is true and correct

16a. Signature:	16b. Signature of 2 nd parent (if required):
Printed name:	Printed name:
Date:	Date:

INSTRUCTIONS - go to www.doh.wa.gov 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

- 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.
- 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.
- 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 using this form, 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

- Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is present) 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). Marital status requires a certified copy of a court order if someone other than the informant is requesting the change.
- The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

- 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
- 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 422-032 January 2015

CERTIFIED
JUN 10 2015
8881
Howard Leibrand
Skagit County Public Health Department
Howard Leibrand M.D., Health Officer
CC000035691

**ACCEPTANCE OF APPOINTMENT
AS SUCCESSOR TRUSTEE**

of the

The Deanna Wagner Trust, dated April 22, 1998

Successor Trustee, Frank R. Mudge, hereby accepts appointment as successor Trustee of The Deanna Wagner Trust, dated April 22, 1998, and agrees to be bound by the terms of such Trust and Amendment dated December 3, 2008, and the Amendment to the Complete Amendment to the Deanna Wagner Trust dated April 19, 2013, and to exercise its duties thereunder in accordance with the laws of the State of Washington and the applicable provisions of the Internal Revenue Code.

DATED this 28 day of February, 2017.

Successor Trustee:

By: Frank R. Mudge

Frank R. Mudge