201807120027

WHEN RECORDED RETURN TO:

07/12/2018 10:34 AM Pages: 1 of 3 Fees: \$39.00 Skagit County Auditor

Land Title and Escrow

02-167448-OE, 02-167448-OE
DOCUMENT TITLE(S):
Death Certificate
REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:
GRANTOR:
STATE OF WASHINGTON
GRANTEE:
Daniel F. Gallagher
•
ABBREVIATED LEGAL DESCRIPTION: Unit 205, Residence At Storvik Park Condo
TAX PARCEL NUMBER(S): 4982-000-205-0000 / P128417

STATE OF WASHINGTON 201 84 AN Page of 3

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	af File Number 500 / (Washingto	n State Certifica			e Number		
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Ī	Mary Lou Childs	Daughter	5401	Place of Death, 4 Death	Апасо	rtes,		
4	24. Place of Death, 6 Death Occurred in a F	togetat		•			COLUMN TO THE PARTY OF THE PART	
				Nursing			_	
	25. Facility Name (if not a facility, give no			26a, City, T	own, or Location of D			
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1	28 Method of Disposition Buria	1 / 29. Place of Final Dispo	SILON (Name of cometary	, cremutory, color place			own, and State	
	Removal from sta	te Mount Cal	.vary-Ceme	tery -	-77 E		, Oregon	
-	11. Name and Complete Address of P Evans Funeral Ch	uneral Family	··· 75- 110	s22-4006	WA 98221	, J. 1.	Data of Disposition	
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ı	33. Funeral Director Signature X			-7/1	5 7 9			
L	<u> </u>	(Reserve)	5-6-La.	ومكباة برمدا	مرسه			
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Return Mailin	ng Address: x or Street Address					City				State		Z _i p
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U:	e the section be	low fo	r requestir	ig any ch	anges on t	he record	. The rec	ord is	incorrect or	incor	nplete as fo	ollows:
	The re	cord no	w shows:						The true	fact is	: :	
						9.						
Э.						11.						
2.						13.						
4.						15.						
I	declare under p	enalty	of perjury	under th	e laws of th	e State of	Washing	gton th	at the forgo	ing is	true and c	orrect
6a. Signature						16b. Sign	ature of 2"	d parent	(if required):			
rinted name:				Date	e:	Printed na	ime:				E	Date:
			INICT	PHOTION	S – go to ww	u dob wa a	ov for more	a inform	ation			
	Driver	's licen							cannot be us	ed as	proof	
equired docu	mentary proof must	be sub	nitted with th	e affidavit	and include f	ull name an	d birth date	e. Exam	ples of docum	entary	proof include	:
	iage/Divorce record		Military reco			School tran					ımident Repo	
 Certificate 	of Naturalization		Hospital/med			Passpo <u>rt</u>		•	Green/Perm	anent	Resident can	d (l-551)
Birth Certific												
 Only a pa The proo Mary Ann 	rent(s), legal guardi f(s) must match the Doe	an (if the e assert	ed fact(s). F	ier 18), or or example	the named in e, if the affida	dividual (if 1 vit says the	8 or older) name shou	may cr uld be N	lange the birth lary Ann Doe, t	certific the pro	cate. oof must show	the name to be
3. Documen	ary proof must be f	ve or m	ore years old	d or establ	ished within fi	ve years of	birth.					
hild under 18	, , ,		,				years or o	older)				
 If legal gu 	ardian(s), include c	ertified (court order p	roving gua	rdianship	Only	the adult c	an char	ige his or her b	irth ce	rtificate	
	one, last name car							idle nan	ne is missing, t	hree p	ieces of docu	mentary proof ar
	ate (can be any cor one, a court order i				•	require		le and/o	r last name is i	nisspe	elled, or date of	of birth is incorre
 No proof 	s required to chang	ethe fi	rst or middle	name*		two p	ieces of do	ocumen	tary proof are r	equire	d	
 To correct 	t narent's informatic	n one	documentary	proof is re	equired.	 To co 	rrect parer	nt's birth	date, place of	birth.	or name, one	documentary pre

- To correct the sex of the child, one documentary proof from a medical provider is required
- 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

- 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.
- 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 422-034 October 2015



This is a true and exact certification of the record officially registered and on file with the Washington State Department of Health, issued under the authority of Chapter 70.58 RCW, and at the direction of Christie Spice, State Registrar.

Christee Spice

Certificate not valid unless the Seal of the State of Washington changes color when heat applied.

ISSUED JUL 09 2018

