

201902270088

02/27/2019 03:15 PM Pages: 1 of 6 Fees: \$42.00
Skagit County Auditor

WHEN RECORDED RETURN TO:

Christopher A. Swartout
437 Mahoney Drive
San Jose, CA 95127

Land Title and Escrow

01-170286-OE, 01-170286-OE ✓

DOCUMENT TITLE(S):

Death Certificate

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR:

STATE OF WASHINGTON

GRANTEE:

SATRA, CARLA MAE

ABBREVIATED LEGAL DESCRIPTION:

PTN SW NE, PRN NE NW, & GL 3, 13-35-8 E W.M.

TAX PARCEL NUMBER(S):

P43872, P43860 & P43809

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY of SANTA CLARA
PUBLIC HEALTH DEPARTMENT
VITAL RECORDS AND REGISTRATION

CERTIFICATE OF DEATH 3201943000701
STATE OF CALIFORNIA
USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS
VS-1 (REV. 9/98)

1. NAME OF DECEDENT - FIRST (Given) CARLA		2. MIDDLE MAE		3. LAST (Family) SATRA	
4. DATE OF BIRTH mm/dd/yyyy [REDACTED]		5. AGE Yrs. 74		6. SEX F	
8. BIRTH STATE/FOREIGN COUNTRY WA		11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS (Specify in Title of Decedent) WIDOWED	
13. EDUCATION - (Highest Level) SOME COLLEGE		14. WAS DECEDENT HISPANIC/LATINO/SPANISH? If yes, see worksheet on back <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) WHITE	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED MACHINIST		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) OWN BUSINESS		19. YEARS IN OCCUPATION 58	
20. DECEDENT'S RESIDENCE (Street and number, or location) 10958 MT HAMILTON RD					
21. CITY SAN JOSE		22. COUNTY/PROVINCE SANTA CLARA		23. ZIP CODE 95127	
24. YEARS IN COUNTY 53		25. STATE/FOREIGN COUNTRY CA			
26. INFORMANT'S NAME, RELATIONSHIP CHRIS SWARTOUT, TRUSTEE			27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 437 MAHONEY DR, SAN JOSE, CA 95127		
28. NAME OF SURVIVING SPOUSE/SPOP-FIRST CARL		29. MIDDLE NORMAN		30. LAST (BIRTH NAME) SATRA	
31. NAME OF FATHER/PARENT-FIRST CARL		32. MIDDLE NORMAN		33. LAST (BIRTH NAME) SATRA	
34. BIRTH STATE WA		35. NAME OF MOTHER/PARENT-FIRST THELMA		36. MIDDLE M.	
37. LAST (BIRTH NAME) [REDACTED]		38. BIRTH STATE WA			
39. DISPOSITION DATE mm/dd/yyyy 02/02/2019		40. PLACE OF FINAL DISPOSITION OUR SAVIOUR'S LUTHERAN CHURCH CEMETERY 8006 PIONEER HWY, STANWOOD, WA 98292			
41. TYPE OF DISPOSITIONS TR/BU		42. SIGNATURE OF EMBALLER WILHELMINA RYBICKI		43. LICENSE NUMBER EMB8487	
44. NAME OF FUNERAL ESTABLISHMENT BAY AREA MORTUARY SERVICES		45. LICENSE NUMBER FD1829		46. SIGNATURE OF LOCAL REGISTRAR SARA H CODY, MD	
47. DATE mm/dd/yyyy 01/29/2019					
101. PLACE OF DEATH KAISER FOUNDATION HOSPITAL-SANTA CLARA		102. IF HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DGA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Home <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
104. COUNTY SANTA CLARA		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 700 LAWRENCE EXPY		106. CITY SANTA CLARA	
107. CAUSE OF DEATH <small>Enter the chain of events -- disease, trauma, or complication -- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.</small>					
IMMEDIATE CAUSE (Final disease or condition resulting in death) IN CARDIOPULMONARY ARREST				Time Interval Between Onset and Death IMM	
Sequentially list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in onset) LAST ACUTE ON CHRONIC HYPOXEMIC HYPERCAPNIC RESPIRATORY FAILURE CHRONIC OBSTRUCTIVE PULMONARY DISEASE				108. DEATH REFERRED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
				109. BOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
				110. AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
				111. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE (GIVEN IN 107) CHRONIC HEART FAILURE, ATRIAL FIBRILLATION WITH RAPID VENTRICULAR RATE					
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? If yes, list type of operation and date(s) NO					
113A. IF FEMALE, PREGNANT? N, last year <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK					
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: [REDACTED] Decedent Last Seen Alive: [REDACTED]		115. SIGNATURE AND TITLE OF CERTIFIER LAY ENG CHEAH M.D.		116. LICENSE NUMBER A121759	
117. DATE mm/dd/yyyy 01/22/2019		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE LAY ENG CHEAH M.D. 700 LAWRENCE EXPRESSWAY, SANTA CLARA, CA 95051		117. DATE mm/dd/yyyy 01/28/2019	
119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Investigation <input type="checkbox"/> Could not be determined					
120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK					
121. INJURY DATE mm/dd/yyyy [REDACTED] 122. HOUR (24 Hours) [REDACTED]					
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.) [REDACTED]					
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury) [REDACTED]					
125. LOCATION OF INJURY (Street and number, or location, and city and zip) [REDACTED]					
126. SIGNATURE OF CORONER / DEPUTY CORONER [REDACTED]		127. DATE mm/dd/yyyy [REDACTED]		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER [REDACTED]	
STATE REGISTRAR		A B C D E		FAX AUTH.#	
				CENSUS TRACT	
				"010001004106611"	

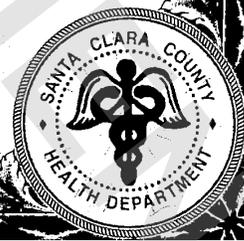
CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA } DATE ISSUED
 COUNTY OF SANTA CLARA } SS By **01/31/2019**

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.



Sara H. Cody
SARA H. CODY
 HEALTH OFFICER AND LOCAL REGISTRAR
 OF BIRTHS AND DEATHS
 AND SIGNATURE OF REGISTRAR.



THIS COPY NOT VALID UNLESS PREPARED ON ENGRAVED BORDER DISPLAYING SEAL AND SIGNATURE OF REGISTRAR.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Land Title and Escrow

**The
Carla Satra
Revocable Trust**

February 24, 2018

Prepared by:

**Steven R. Pogue, Attorney at Law
2150 Trade Zone Blvd., Suite 102
San Jose CA 95131**

(408) 258-3250

ARTICLE 3
CONTINGENT DISTRIBUTION

- 3.1. Contingent Distribution: If at any time the charitable trust established hereunder is impossible or impractical to continue in existence pursuant to its terms, the Trustee shall select a charitable organization with similar goals and distribute the corpus of the trust to that organization subject to the same restrictions set forth herein.

END OF ARTICLE

ARTICLE 4
OFFICE OF TRUSTEE

- 4.1. Nomination of Trustees for All Trusts: For all trusts under this instrument, the trustee and successor trustees shall be those persons named below. Each successor trustee shall serve in the order designated if the prior trustee fails to qualify or ceases to act.
- Trustee: Carla Mae Satra
Successors:
First: Christopher A. Swartout
Second: Than Hendricks
- 4.2. Court-Appointed Trustee: If all designated trustees fail to qualify or cease to act, a court of competent jurisdiction shall appoint a trustee or cotrustees, individual or corporate, after consideration of the preference of the current income beneficiaries of the trust.
- 4.3. Resignation - Designated Successors: Any trustee may resign at any time as trustee of any trust under this instrument. The resigning trustee shall give written notice of the resignation by personal delivery or registered mail to all current income beneficiaries. The resignation shall be effective on the qualification of a designated successor trustee. The designated successor trustee shall act as trustee on acceptance of the appointment.
- 4.4. Individual Trustee's Disability - Successor Trustee Acts: If any individual trustee is unable to participate in trust activities because of illness, disability, or any other reason, the designated successor trustee may act as cotrustee during any such incapacity. In determining the disability of the individual trustee, the successor trustee may rely on written statements from two licensed physicians who have examined the trustee. In the absence of such a statement, the successor trustee shall petition the court having jurisdiction over this trust for authority to proceed as successor trustee. The successor trustee shall incur no liability to any

beneficiary of the trust or to the replaced trustee as a result of any action taken in good faith under this provision.

- 4.5.** Delegation of Powers to Cotrustee or Successor Trustee: The individual trustee shall have the power to delegate temporarily to the cotrustee or successor trustee all or any of his or her powers at any time. The individual trustee shall exercise this power of delegation by written notice to the cotrustee specifying the powers delegated. This delegation shall terminate on delivery of written notice by the individual trustee to the cotrustee of termination of delegation. The individual trustee shall incur no liability to any beneficiary of the trust estate as a result of any actions taken or not taken within the scope of delegation during the period of delegation.
- During any period in which the Settlor is also the trustee, a power of attorney granting an attorney-in-fact or agent authority over the affairs of the Settlor shall also be deemed to be a delegation of the Settlor's trustee powers to the same extent to which and with regard to all matters over which the attorney-in-fact or agent is granted authority over the affairs of the Settlor as an individual.
- 4.6.** Compensation for Individual Trustee: The individual trustee, whether pursuant to this trust or the charitable trust to be created pursuant to the terms hereof, shall be entitled to compensation of 1% of the trust corpus per year, to be determined as of June 30 of each year.
- 4.7.** Compensation for Corporate Trustee - Fee Schedule: If the trustee is a corporate trustee, the corporate trustee shall pay itself on an annual basis according to the corporate trustee's published fee schedule in effect from time to time.
- 4.8.** Employment of Consultants - General: The trustee may employ custodians, attorneys, accountants, investment advisers, corporate fiduciaries, or any other agents or advisers to assist the trustee in the administration of this trust and may rely on the advice given by these agents. The trustee shall pay reasonable compensation for all services performed by these agents from the trust estate out of either income or principal as the trustee in the trustee's reasonable discretion determines. These payments shall not decrease the compensation to which the trustee is entitled.
- 4.9.** Exculpatory Clause - All Trustees: No trustee shall be liable to any person interested in this trust for any act or default unless it results from the trustee's bad faith, willful misconduct, or gross negligence.
- 4.10.** Waiver of Liability for Predecessor Trustee: Any successor trustee may accept as correct any accounting of trust assets made by any predecessor trustee. However, a successor trustee may institute any action or proceeding for the settlement of the accounts, acts, or omissions of any predecessor trustee.

- 4.11.** Bond - Waiver: No trustee, including nonresidents, shall be required to post bond or security.
- 4.12.** Trustee Self-Dealing - Loan, Buy, and Sell: The trustee shall have the power to loan or advance the trustee's own funds to the trust for any trust purpose, with interest at current rates, to receive security for such loans in the form of a mortgage, pledge, deed of trust, or other encumbrance of any assets of the trust, to purchase or exchange assets of the trust at their fair market value as determined by an independent appraiser, to sell property to the trust at a price not in excess of its fair market value as determined by an independent appraiser, and to lease assets to or from the trust for fair rental value as determined by an independent appraiser.
- 4.13.** Trustee and Executor Transactions - Self-Dealing Permitted: The trustee and the executor of the settlor's estate may freely contract financial transactions between themselves, such as the purchase and sale of assets and the making of loans, secured and unsecured, notwithstanding each office being held by the same person and apparent conflicts of interest.

END OF ARTICLE

ARTICLE 5
TRUSTEE MANAGEMENT POWERS

- 5.1.** Introduction: For all trusts under this instrument, the trustee shall have the management powers set forth below in addition to those powers now or hereafter conferred by law.
- 5.2.** Retain or Abandon Property: The trustee shall have the power to continue to hold any property, including shares of the trustee's own stock, or to abandon any property that the trustee receives or acquires.
- 5.3.** Unproductive Property: Except when specifically restricted, the trustee shall have the power to retain, purchase, or otherwise acquire unproductive property.
- 5.4.** Sell, Exchange, Repair: The trustee shall have the power to manage, control, grant options on, sell (for cash or on deferred payments with or without security), convey, exchange, partition, divide, improve, and repair trust property.
- 5.5.** Lease: The trustee shall have the power to lease trust property for terms within or beyond the terms of the trust and for any purpose, including exploration for and removal of gas, oil, and other minerals and to enter into community oil leases, pooling, and unitization agreements.