

**WHEN RECORDED RETURN TO:**

**Land Title and Escrow  
3010 Commercial Avenue  
Anacortes WA 98221**

Land Title and Escrow  
**02-175044-OE, 02-175044-OE**

**DOCUMENT TITLE(S):**  
Death Certificate

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

**GRANTOR:**  
STATE OF WASHINGTON

**GRANTEE:**  
Peterson, Robert

**ABBREVIATED LEGAL DESCRIPTION:**

Lot 22, Creekside Village Ph. II.

**TAX PARCEL NUMBER(S):**

4534-000-022-0009 ; P 83997

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

## CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2019-031410

DATE ISSUED: 07/18/2019  
FEE NUMBER:FIRST AND MIDDLE NAME(S): ROBERT  
LAST NAME(S): PETERSONCOUNTY OF DEATH: SKAGIT  
DATE OF DEATH: JULY 13, 2019  
HOUR OF DEATH: 01:20 PM  
SEX: MALE AGE: 83 YEARS  
SOCIAL SECURITY NUMBER:HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO  
RACE: WHITEBIRTH DATE:  
BIRTHPLACE: LONGVIEW, WAMARITAL STATUS: MARRIED  
SPOUSE: MARJORIE LOU JAMESOCCUPATION: CONTRACTOR  
INDUSTRY: CONSTRUCTION BUSINESS  
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED  
US ARMED FORCES: YESINFORMANT: MARJORIE L PETERSON  
RELATIONSHIP: WIFE  
ADDRESS: 2511 CREEKSIDE LANE, ANACORTES, WA, 98221CAUSE OF DEATH:  
A. ASPIRATION PNEUMONITIS  
INTERVAL: WEEKS  
B. DYSPHAGIA  
INTERVAL: MONTHS  
C. VASCULAR DEMENTIA  
INTERVAL: YEARS  
D. CEREBROVASCULAR DISEASE  
INTERVAL: YEARS

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:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOME  
FACILITY OR ADDRESS: 2511 CREEKSIDE LANE  
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221RESIDENCE STREET: 2511 CREEKSIDE LANE  
CITY, STATE, ZIP: ANACORTES, WA 98221  
INSIDE CITY LIMITS: YES COUNTY: SKAGIT  
TRIBAL RESERVATION: NOT APPLICABLE  
LENGTH OF TIME AT RESIDENCE: 2 YEARSFATHER/PARENT: HAROLD BERNARD PETERSON  
MOTHER/PARENT: MARGARETMETHOD OF DISPOSITION: BURIAL  
PLACE OF DISPOSITION: GRAND VIEW CEMETERYCITY, STATE: ANACORTES, WASHINGTON  
DISPOSITION DATE: JULY 19, 2019

FUNERAL FACILITY: EVANS FUNERAL CHAPEL &amp; CREMATORY, INC.

ADDRESS: 1105 32ND STREET  
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221  
FUNERAL DIRECTOR: JOSEPH J. WAHAM

TO BE USED ONLY IN CONNECTION  
WITH A CLAIM PENDING BEFORE  
THE VETERAN'S ADMINISTRATION

MANNER OF DEATH: NATURAL  
AUTOPSY: NO  
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE  
CAUSE OF DEATH: NOT APPLICABLE  
DID TOBACCO USE CONTRIBUTE TO DEATH: YES  
PREGNANCY STATUS IF FEMALE: NO RESPONSECERTIFIER NAME: LESLIE A. ESTEP, MD  
TITLE: PHYSICIAN  
CERTIFIER ADDRESS: 227 FREEWAY DRIVE, SUITE A  
CITY, STATE, ZIP: MOUNT VERNON, WA 98273  
DATE SIGNED: JULY 16, 2019CASE REFERRED TO ME/CORONER: NO  
FILE NUMBER: NOT APPLICABLE  
ATTENDING PHYSICIAN: NOT APPLICABLELOCAL DEPUTY REGISTRAR: MARIA VIVANCO  
DATE RECEIVED: JULY 17, 2019



# Affidavit for Correction

12/02/2019 11:37 AM Page 2 of 6  
Washington State Department of 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
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**Required information must match current information on record**

**Record Type:**  Birth  Death  Marriage  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:  Self  Guardian  Informant  Hospital  Parent(s)  Funeral Director  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: \_\_\_\_\_ Date: \_\_\_\_\_ Printed name: \_\_\_\_\_

16b. Signature of 2<sup>nd</sup> parent (if required): \_\_\_\_\_ Date: \_\_\_\_\_

**INSTRUCTIONS – go to [www.doh.wa.gov](http://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**

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 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**

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). 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 January 2015



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

# \*CERTIFIED\*

JUL 18 2019

*Howard Lebrand*  
 Skagit County Health Department  
 Howard Lebrand M.D., Health Officer



0 2 9 8 3 6 8 4

COPY ONLY  
Original on file with  
MICHAEL A. WINSLOW

**RESTATEMENT OF THE LIVING TRUST AGREEMENT**

of

**ROBERT AND MARJORIE LOU PETERSON**

THE TRUSTORS, Robert Peterson and Marjorie Lou Peterson, do hereby restate their Revocable Living Trust Agreement dated December 3, 2002. The Trust is known as the "Peterson Family Trust, U/A dated December 3, 2002".

**ARTICLE I  
The Trust Estate**

- A. This Agreement shall cover all property described in Schedule A; and
- B. Any other property hereafter devised, bequeathed or transferred to the Trustee for the purpose of the trusts herein created.
- C. All assets listed on Schedule A are the community property of the Trustors, each Trustor having an undivided fifty percent (50%) interest therein.

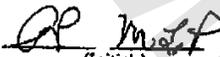
**ARTICLE II  
Identification of Beneficiaries**

- A. Trustors are husband and wife. Three children were born of their marriage; Kathy Ann Peterson Mosby, born March 21, 1958; Robert Bruce Peterson, born March 3, 1959; and Kristy Marie Neuho, born January 24, 1962. Neither of the Trustors have any deceased children who have left descendants now living. Except as provided herein, no provision is made for any natural or adopted child of either of the Trustors or any relative who may survive the Trustors.
- B. Unless the context otherwise requires, wherever herein the masculine or feminine form is used and wherever the singular or plural form is used, it shall be deemed to include the other.
- C. For purposes of this Agreement, no person shall be deemed to survive another person if the former person dies within thirty (30) days after the date of the latter person's death.

**ARTICLE III  
Benefits for Trustors While Both are Living**

While both Trustors are living, the Trustee shall make such payments of income or principal from the trust estate as the Trustors, or either of them, from time to time may direct the Trustee in writing. If both Trustors are incapacitated, the Trustee, in Trustee's sole discretion and without liability to Trustor, may discontinue, in whole or in part such payments heretofore directed. The Trustee, in Trustee's sole discretion, may at any time use and pay so much of other income and principal of the trust estate as the Trustee deems necessary for the health, maintenance, support and comfort of Trustors, or either of them, for payment of any legal obligations of Trustors, and for the preservation of their property.

-1-

  
(Initials)

**SECOND AMENDMENT TO LIVING TRUST AGREEMENT**

of

**ROBERT AND MARJORIE LOU PETERSON**

THE TRUSTORS, Robert Peterson and Marjorie Lou Peterson, entered into the Peterson Family Trust, U/A dated December 3, 2002. On the 9th day of January, 2008, the Living Trust Agreement was completely restated by the Trustors and the original Agreement, dated December 3, 2002, was replaced. On February 26, 2016 the Trustors amended the Restated Trust to revise disposition of Trust assets and to appoint a co-trustee. The Trust continues to be known as the "Peterson Family Trust, U/A December 3, 2002," notwithstanding the prior Restatement.

Pursuant to Article XII, the Trustors retained the right to amend the Trust, without participation of any Trustee.

The Trustors now desire to amend and replace a provision of the February 26, 2016 Amendment to the Restatement of the Living Trust (which prior amendment shall be referred to as the *First Amendment To Living Trust Agreement of Robert and Marjorie Lou Peterson*; or *First Amendment* for shorthand reference ). Reference shall be made to the Article and sub-paragraph of the Restatement of Living Trust Agreement when making the modifications.

Article IX, regarding Successor Trustees and incapacity of Trustors, is hereby amended in respect to paragraphs A and B, and the language in said paragraphs shall be replaced with the following:

- A. Both of the Trustors hereunder currently serve as the Co-Trustees of the Revocable Living Trust. The Trustors do hereby appoint Kristy Marie Neubo to serve as Co-Trustee, together with the Trustors, and each of the said Trustees shall have independent authority to act without the consent of the others in regard to the management of this Trust. In the event that either of the Trustors are deemed to be incapacitated in accordance with the provisions stated herein below, then the other Trustor and Kristy Marie Neubo may serve as Co-Trustees. In the event that both Trustors are incapacitated, should resign or otherwise fail to serve as Trustees, then Kristy Marie Neubo may serve as sole Trustee hereunder.
- B. Successor Trustees. In the event that Kristy Marie Neubo resigns, is unable or is otherwise unwilling to serve as Trustee of this Trust, then Robert Bruce Peterson shall serve as Co-Trustee with the Trustors, or either of them. In the event either of the Trustors resigns, fails or otherwise ceases to serve as Trustee, and Kristy Marie Neubo ceases to serve as Trustee, then Robert Bruce Peterson shall serve as Trustee under the same terms and conditions as stated in this section.

In all respects, other than as stated herein above, the First Amendment and the Peterson Family Trust, U/A December 3, 2002, is hereby approved, confirmed and continued in force, as restated on January 9, 2008.

IN WITNESS WHEREOF, the undersigned have executed this instrument on April 6, 2018.

TRUSTORS:

[Signature]  
Robert Peterson

[Signature]  
Marjorie Lou Peterson

TRUSTEES:

[Signature]  
Robert Peterson

[Signature]  
Marjorie Lou Peterson

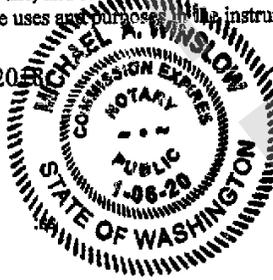
[Signature]  
Kristy Marie Neubo

State of Washington )  
County of Skagit )

:ss

I certify that I know or have satisfactory evidence that Robert Peterson and Marjorie Lou Peterson, husband and wife, are the persons who appeared before me, and said persons acknowledged that they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes of the instrument.

Dated: April 6, 2018



[Signature]  
Michael Winslow, Notary Public  
My appointment expires 1-6-20

State of Washington  
County of Skagit

I certify that I know or have satisfactory evidence that Kristy Marie Neubo is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes in the instrument.

Dated: April 10, 2018.



[Signature]  
Piper Lee Eger, Notary Public  
My appointment expires 8/19/18