

State of Washington
Department of Revenue
Special Programs Division
Miscellaneous Tax
PO Box 47477
Olympia WA 98504-7477

202003160227
03/16/2020 03:41 PM Pages: 1 of 4 Fees: \$106.50
Skagit County Auditor

LACK OF PROBATE AFFIDAVIT

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

State of Washington }
 } SS.
County of Skagit }

MAR 16 2020
Amount Paid \$
Skagit Co. Treasurer
By [Signature] Deputy

Karen A. Erholm being first duly sworn, deposes and says:

This Affidavit is for the purpose of supplying information relating to the Estate of Gary W. Erholm, deceased, and the interest of the undersigned in the following described real property located in Skagit County, Washington:

A leasehold interest in the following described tract:
Lot 286, "REVISED MAP OF SURVEY OF SHELTER BAY DIVISION 2, Tribal and allotted lands of Swinomish Indian Reservation, " as recorded in Volume 43 of Official Records, page 833, records of Skagit County, Washington;
Skagit County Property ID P 129692
Address: 286 Soleduck Place, LaConner, WA 98257

The Decedent died on the 7th day of March, 2006 in the City of Anacortes, Skagit County, State of Washington.

The Undersigned Affiant is the surviving spouse of the Decedent.

Said Decedent died intestate (without a will) and without a community property agreement. The above described real property is community real property, to which Affiant is the intestate heir and successor pursuant to RCW 11.04.015(1)(a).

The following list comprises all of the heirs-at-law surviving said Decedent in addition to Affiant:

- ASHLEY GONER, 5714 Meadows Del Mar, San Diego, California 92014
- SHELBY HAMBIDGE, 8641 Northeast Juanita Dr., Kirkland, WA 98034

- COURTNEY ERHOLM, 2660 Jonquil Dr., San Diego, CA 92106

Karen A. Erholm

Date: 3/16/20

Karen A. Erholm, Affiant

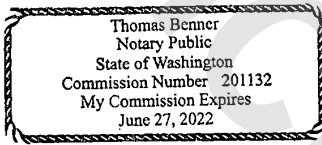
Notary's Acknowledgment

I certify that I know or have satisfactory evidence that Karen A. Erholm is the person who appeared before me, and she did acknowledge that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: March 12th, 2020

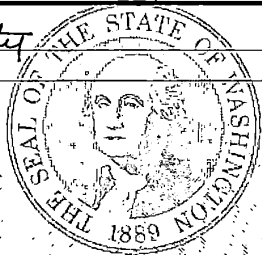
Thomas Benner

Thomas Benner, Notary Public
 in and for the State of Washington
 Residing at: Oak Harbor, Washington
 My appointment expires: June 27, 2022
 Commission number: 201132



STATE OF WASHINGTON DEPARTMENT OF HEALTH

Washington State Certificate of Death. Local File Number 407-06. State File Number. Decedent: Gary William ERHOLM, Death Date: May 7, 2006. Cause of Death: Ventricular Fibrillation. Certifier: Shawna L. Laursen M.D.



DOH/CHS 003 Rev 2/06/2004

DOH-01-003 (5/99)



Affidavit for Correction

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																			
Use the section below for requesting any changes on the record.																			
Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution																			
1. Name on record:		2. Date of Event:	3. Place of Event: (City or County)																
4. Father's Full Name (For Birth): (Husband for Marriage or Dissolution)		5. Mother's Full Name (For Birth): (Wife for Marriage or Dissolution)																	
The Record is Incorrect or Incomplete as follows:																			
The Record now shows:		The True fact is:																	
6.		7.																	
8.		9.																	
10.		11.																	
12.		13.																	
14. I represent the person as: <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (Specify)			Telephone Number:																
I declare under penalty of perjury under the laws of the State of Washington that the forgoing is true and correct.																			
15. Signature:		16. Date:	17. Address:																
<p>All vital records are registered as received. An item may be changed by affidavit only once. Subsequent changes must be made by court order. The incorrect certificate must be returned within <u>one year</u> of the date it was issued to receive a replacement copy free of charge.</p> <p>All changes must be established by documentary proof submitted with the affidavit</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Examples of documentary proof:</td> <td style="width: 25%;">Certificate of Naturalization</td> <td style="width: 25%;">Medical Record</td> <td style="width: 25%;">School Record</td> </tr> <tr> <td></td> <td>Hospital Records</td> <td>Military Record (DD-214)</td> <td>Voter's Registration Card (if it bears an effective date)</td> </tr> <tr> <td></td> <td>Insurance Records</td> <td>Birth Record</td> <td>Alien Registration Card (front and back)</td> </tr> <tr> <td></td> <td>Marriage/Divorce Records</td> <td>Passport</td> <td></td> </tr> </table>				Examples of documentary proof:	Certificate of Naturalization	Medical Record	School Record		Hospital Records	Military Record (DD-214)	Voter's Registration Card (if it bears an effective date)		Insurance Records	Birth Record	Alien Registration Card (front and back)		Marriage/Divorce Records	Passport	
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<p>Birth Certificates:</p> <ol style="list-style-type: none"> 1. Only a parent, legal guardian (if the child is under 18), or the adult themselves (if 18 or older) may change the birth certificate. 2. The proof(s) must match exactly the asserted true fact(s). For example, if the affidavit says the name is Mary Ann Doe, then the proof must show the name to be Mary Ann Doe. Mary A. Doe or M.A. Doe does not prove the name is Mary Ann Doe. 3. Proof must be five (or more) years old or have been established within five years of birth. 4. Up to age one, the parent(s) or legal guardian may change the child's last name with an affidavit for correction, provided: <ul style="list-style-type: none"> - This is a one time only change. Subsequent changes will require a certified copy of a court ordered name change. - The new last name may be the mother's maiden name or father's name (if present on the certificate) or any combination of the two. - After age one, last name changes require a certified copy of a court ordered name change. Minor spelling changes may be made with an affidavit and documentary proof. 5. Parent(s) may change their child's first or middle name by completing and signing an affidavit for correction (until their child's 18th birthday). 6. This affidavit cannot be used to add a father to a birth certificate. (Use the paternity affidavit - form DOH/CHS 021) 																			
<p>Death Certificates:</p> <ol style="list-style-type: none"> 1. Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information. 2. The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner. 3. If it is less than sixty days from date of death please contact the county health department where the death occurred to make changes. 																			
<p>Marriage/Dissolution (Divorce) Certificates:</p> <ol style="list-style-type: none"> 1. Personal fact(s) (minor spelling changes in name, date or place of birth or residence) may be changed by affidavit (with proof) by the person. 2. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must sign the affidavit. 																			

DOH/CHS 023 (Rev. 9/2002)

CERTIFIED

MAY 15 2006

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

NN00930428