

When recorded return to:

Leigh Bennett  
Bennett & Bennett, PLLC  
400 Dayton Street, Suite A  
Edmonds, WA 98020

**M-22100**

**Land Title and Escrow  
Accommodation Only**

Real Estate Excise Tax  
Exempt  
Skagit County Treasurer  
By Marissa Guerrero  
Affidavit No. 2020-1261  
Date 04/08/2020

DOCUMENT TITLE: Lack of Probate Affidavit  
GRANTOR: Wood, Robin H. (deceased)  
GRANTEE: Wood, Gerald W., a single man  
LEGAL DESCRIPTION: Tract 13, <sup>and Tract 14</sup> PRESENTIN CREEK WILDERNESS, DIVISION NO. 2", as per plat recorded in Volume 9 of Plats, Pages 38 and 39, records of Skagit County, Washington.

Situate in the County of Skagit, State of Washington.

SUBJECT TO easements and restrictions of record.

ASSESSOR'S TAX  
PARCEL NOS.: P68123

REFERENCE NOS. OF  
DOCUMENTS RELEASED  
OR ASSIGNED: N/A

**LACK OF PROBATE AFFIDAVIT**  
(Succession)

STATE OF WASHINGTON )  
 ) ss  
COUNTY OF SNOHOMISH )

WE, DIANE L. TANGUY, RANDY C. WOOD, RYAN H. WOOD, RICK K. WOOD,  
WENDY R. SHIELDS, RAMSEY L. WOOD, and ROSS N. WOOD, being first duly sworn on  
oath, depose and say:

kb:clients/Wood-Robin np lack of probate affidavit-W to H 2/18/2020

**ORIGINAL**

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UNO  
THAT GERALD W. WOOD was the surviving spouse of ROBIN H. WOOD, who died intestate on the 5th day of November, 2019, in Concrete, Skagit County, Washington, and who was a resident of Concrete, Skagit County, Washington, with a certified copy of said death certificate attached hereto as Exhibit A;

THAT the said GERALD W. WOOD and ROBIN H. WOOD were married on the 23rd day of April, 1949, and that there were seven children born of this marriage, namely, DIANE L. TANGUY, RANDY C. WOOD, RYAN H. WOOD, RICK K. WOOD, WENDY R. SHIELDS, RAMSEY L. WOOD, and ROSS N. WOOD, all of whom are adults; that there were no other children born of ROBIN H. WOOD who are now deceased leaving issue surviving, nor had she ever adopted any children;

THAT ROBIN H. WOOD never executed a Last Will and Testament; however, ROBIN H. WOOD'S entire estate, including real property interests (all of which were community property), passed to her husband, GERALD W. WOOD, pursuant to intestate succession laws, RCW 11.04.015(1)(a);

THAT, pursuant to the above referenced documentation and pursuant to operation of law, GERALD W. WOOD was the sole and rightful heir to the real property described hereinbelow. His name, age, relationship and address was as follows:

GERALD H. WOOD, age 92, Surviving Spouse  
9049 E. Pressentin Drive  
Concrete, WA 98237

THAT the expenses of the last illness and funeral and burial of the decedent have been paid, as evidenced by receipts in our possession, or provisions have been made for full payment of any and all future and currently unknown expenses connected therewith;

THAT the decedent had never received from the State of Washington assistance consisting of nursing facility services, home and community-based services, related hospital and prescription drug services, or any other type of medical assistance;

THAT there is no State of Washington Inheritance Tax due as a result of the decedent's death;

THAT there is no Federal Estate tax due as a result of decedent's death;

THAT no probate of the Estate of ROBIN H. WOOD has been instituted, nor is such probate contemplated;

THAT all of the real property owned by the decedent at the time of her death, or in which she had an interest was community property, was situated in Skagit County, Washington and is more particularly described as follows:

Tract 13, <sup>and Tract 14</sup> PRESENTIN CREEK WILDERNESS, DIVISION  
NO. 2", as per plat recorded in Volume 9 of Plats, Pages 38 and  
39, records of Skagit County, Washington.

Situate in the County of Skagit, State of Washington.

SUBJECT TO easements and restrictions of record.

Parcel No.: P68123

THAT this affidavit is made solely to induce a title company to issue its policies of title insurance on real property passing to the surviving spouse, GERALD W. WOOD, in reliance upon the representations set forth above. Affiants agree to indemnify and hold the title company harmless from loss or damage which it may suffer as a result of said reliance.

*Diane L. Tanguy* DATED: 3/8/2020  
DIANE L. TANGUY

*Randy C. Wood* DATED: 3/8/2020  
RANDY C. WOOD

*Ryan H. Wood* DATED: 3/8/2020  
RYAN H. WOOD

*Rick K. Wood* DATED: 3-8-2020  
RICK K. WOOD

*Wendy R. Shields* DATED: 3/8/2020  
WENDY R. SHIELDS

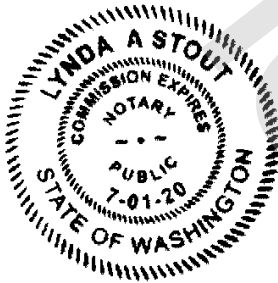
*Ramsey L. Wood* DATED: 3/8/2020  
RAMSEY L. WOOD

Ross N. Wood DATED: 2/26/2020  
 ROSS N. WOOD

STATE OF WASHINGTON )  
 )  
 COUNTY OF Snohomish ) ss

I certify that I know or have satisfactory evidence that DIANE L. TANGUY signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 8th day of March, 2020.



Lynda A. Stout  
 Notary Public in and for the State of Washington  
 Residing at Concrete, WA  
 My commission expires: 07-01-20

STATE OF WASHINGTON )  
 )  
 COUNTY OF Snohomish ) ss

I certify that I know or have satisfactory evidence that RANDY C. WOOD signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 8th day of March, 2020.

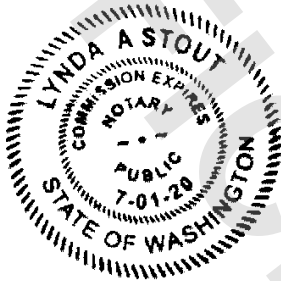


Lynda A. Stout  
 Notary Public in and for the State of Washington  
 Residing at Concrete, WA  
 My commission expires: 07-01-20

STATE OF WASHINGTON )  
 )  
 COUNTY OF Skiagit ) ss

I certify that I know or have satisfactory evidence that RYAN H. WOOD signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 8<sup>th</sup> day of March, 2020.

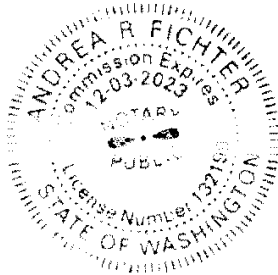


Lynda A. Stout  
 Notary Public in and for the State of Washington  
 Residing at Concrete, WA  
 My commission expires: 07-01-20

STATE OF WASHINGTON )  
 )  
 COUNTY OF Skiagit ) ss

I certify that I know or have satisfactory evidence that RICK K. WOOD signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 10<sup>th</sup> day of March, 2020.



Andrea R. Fichter  
 Notary Public in and for the State of Washington  
 Residing at Concrete, WA  
 My commission expires: 12/03/20

STATE OF WASHINGTON )  
 )  
 COUNTY OF Skagit ) ss

I certify that I know or have satisfactory evidence that WENDY R. SHIELDS signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 8th day of March, 2020.



Lynda A. Stout  
 Notary Public in and for the State of Washington  
 Residing at Concrete, WA  
 My commission expires: 07-01-20

STATE OF WASHINGTON )  
 )  
 COUNTY OF Skagit ) ss

I certify that I know or have satisfactory evidence that RAMSEY L. WOOD signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 8th day of March, 2020.

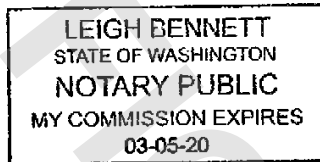


Lynda A. Stout  
 Notary Public in and for the State of Washington  
 Residing at Concrete, WA  
 My commission expires: 07-01-20

STATE OF WASHINGTON )  
 )  
COUNTY OF SNOHOMISH ) ss

I certify that I know or have satisfactory evidence that ROSS N. WOOD signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 26<sup>th</sup> day of February, 2020.



Leigh Bennett  
Notary Public in and for the State of Washington  
Residing at Edmonds  
My commission expires: 3/5/20

STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

## CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2019-048832

DATE ISSUED: 11/07/2019  
FEE NUMBER: 311119FIRST AND MIDDLE NAME(S): ROBIN HELEN  
LAST NAME(S): WOODCOUNTY OF DEATH: SKAGIT  
DATE OF DEATH: NOVEMBER 05, 2019  
HOUR OF DEATH: 09:30 AM  
SEX: FEMALE AGE: 88 YEARS  
SOCIAL SECURITY NUMBER:HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO  
RACE: WHITEBIRTH DATE:  
BIRTHPLACE: LEWISTON, IDMARITAL STATUS: MARRIED  
SURVIVING SPOUSE: GERALD WILLIAM WOODOCCUPATION: AUTHOR  
INDUSTRY: FICTION BOOKS  
EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE  
US ARMED FORCES: NOINFORMANT: ROSS NOEL WOOD  
RELATIONSHIP: SON  
ADDRESS: 1407 E MARINE VIEW DRIVE, EVERETT WA 98201CAUSE OF DEATH:  
A: COLON CANCER  
INTERVAL: 32 DAYS  
B:  
INTERVAL:  
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:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOME  
FACILITY OR ADDRESS: 9049 E PRESSENTIN DR  
CITY, STATE, ZIP: CONCRETE, WASHINGTON 98237-8818RESIDENCE STREET: 9049 E PRESSENTIN DR  
CITY, STATE, ZIP: CONCRETE, WA 98237-8818  
INSIDE CITY LIMITS: YES COUNTY: SKAGIT  
TRIBAL RESERVATION: NOT APPLICABLE  
LENGTH OF TIME AT RESIDENCE: 60 YEARSFATHER: CLARENCE ANDREW DENBERGER  
MOTHER: ANNEMETHOD OF DISPOSITION: CREMATION  
PLACE OF DISPOSITION: SEATTLE SERVICE GROUP CREMATORYCITY, STATE: SEATTLE, WASHINGTON  
DISPOSITION DATE: NOVEMBER 07, 2019

FUNERAL FACILITY: NEPTUNE SOCIETY - LYNNWOOD

ADDRESS: 4320 196TH ST SW - STE. C  
CITY, STATE, ZIP: LYNNWOOD, WASHINGTON 98038  
FUNERAL DIRECTOR: BRENT J. GLENNMANNER OF DEATH: NATURAL  
AUTOPSY: NO  
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE  
CAUSE OF DEATH: NOT APPLICABLE  
DID TOBACCO USE CONTRIBUTE TO DEATH: NO  
PREGNANCY STATUS IF FEMALE: NO RESPONSECERTIFIER NAME: CATHERINE (YVONNE) SHULL, ARNP  
TITLE: ARNP  
CERTIFIER ADDRESS: 7438 SOUTH D AVENUE  
CITY, STATE, ZIP: CONCRETE, WA 98237  
DATE SIGNED: NOVEMBER 07, 2019CASE REFERRED TO ME/CORONER: NO  
FILE NUMBER: NOT APPLICABLE  
ATTENDING PHYSICIAN: NOT APPLICABLELOCAL DEPUTY REGISTRAR: CHERYL PETERSON  
DATE RECEIVED: NOVEMBER 07, 2019





## Affidavit for Correction

This is a legal document. Complete in ink and do not alter.

 Center for Health Statistics  
 Olympia, WA 98504-7214  
 360-236-4500

## STATE OFFICE USE ONLY

State File Number: \_\_\_\_\_ Fee Number: \_\_\_\_\_ Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Affidavit Number: \_\_\_\_\_

## Required information must match current information on record

Required	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 2nd parent (if required): _____
Printed name: _____	Printed name: _____
Date: _____	Date: _____

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

\*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

## 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

This affidavit cannot be used to add a father to a birth certificate (use paternity acknowledgment form DOH 422-032)

## Death Certificates

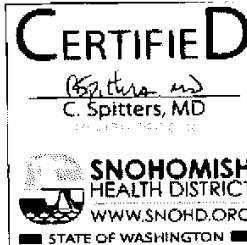
- Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information. Proof is required to make changes if requested by a family member not listed as the informant on the certificate (family members are spouse or registered domestic partner, parent, sibling or adult child or stepchild). 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 January 2015

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



0 3 7 5 1 5 8 0