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09/10/2020 02:39 PM Pages: 1 of 6 Fees: \$108.50
Skagit County Auditor

JONES BUTLER DOLAN, PS
P.O. Box 2784
Mount Vernon, WA 98273
360-336-2939

**COMMUNITY PROPERTY AFFIDAVIT
OF SURVIVING SPOUSE**

Document Title: Community Property Affidavit of Surviving Spouse
Grantor: H. Duane Henry, aka Harold Duane Henry
Grantee: Jean W. Henry
Assessor Parcel No: 4097-000-014-0000 (P72902)
Abbreviated Legal: WALNUT GROVE ADD TO BURLINGTON LOT 14 DK 12
Reference Number: 593696

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

10/10/2020
SEP 10 2020

Amount Paid \$
Skagit Co. Treasurer
By *MH* Deputy

STATE OF WASHINGTON)
) ss:
COUNTY OF SKAGIT)

Jean W. Henry, being first duly sworn, on oath deposes and says:

1. Surviving Spouse

I am a resident of Skagit County, Washington, and I am the surviving spouse of H. Duane Henry, aka Harold Duane Henry, deceased, who died on February 13, 2020, in Skagit County, Washington. A certified copy of H. Duane Henry's, aka Harold Duane Henry's Certificate of Death is attached hereto as Exhibit A.

2. Community Property Agreement

On January 22, 1976, Decedent and I, as husband and wife, validly executed a written Agreement as to Status of Community Property, which has remained valid and in full force since its execution, pursuant to RCW 26.16.120. The Agreement as to Status of Community Property is attached hereto as Exhibit B.

3. Purpose of this Affidavit

The statements set forth in this affidavit are representations of facts that may be relied upon by all parties dealing with the real property located in Skagit County, Washington, more fully described below, as well as any other assets owned by H. Duane Henry, aka Harold Duane Henry at the time of his death.

Tract Fourteen (14) of WALNUT GROVE ADDITION TO BURLINGTON, as per plat recorded in Volume 7 of Plats, page 94, records of Skagit County.

SUBJECT TO: Municipal assessments, if any levied by the City of Burlington.

4. Real Property

Decedent and undersigned acquired the real property described herein by Warranty Deed dated April 26th, 1960, recorded pursuant to Skagit County Auditor's Number 593696.

5. Community Property Subject to the Agreement

All of the community property is subject to the Agreement as to Status of Community Property described herein, the disposition of all such property is controlled by the Agreement, and all of the community property passed to Jean W. Henry upon Decedent's death.

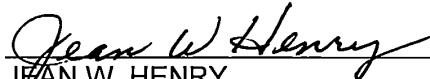
6. Probate

No proceedings have occurred or are anticipated to have a Will of Decedent admitted to probate, to have a Personal Representative appointed for Decedent, or to set aside, cancel, or revoke the Community Property Survivorship Agreement.

7. Decedent's Debts, Expenses, Taxes

All debts and expenses of Decedent, and any liabilities or obligations of the marital community have been paid in full, and no estate taxes are due.

Signed in Mount Vernon, Washington, this 31 day of August, 2020.

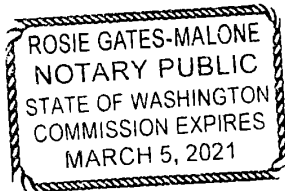



JEAN W. HENRY

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

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

Dated this 31 day of August, 2020.





ROSIE GATES-MALONE
Notary Public
In and for the State of Washington
My appointment expires: 03-05-2021

STATE OF WASHINGTON DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2020-006844

DATE ISSUED: 02/18/2020

FEE NUMBER:

FIRST AND MIDDLE NAME(S): DUANE H

LAST NAME(S): HENRY

AKA: HAROLD DUANE HENRY

AKA:

AKA:

COUNTY OF DEATH: SKAGIT

DATE OF DEATH: FEBRUARY 13, 2020

HOUR OF DEATH: 01:40 AM

SEX: MALE

AGE: 86 YEARS

SOCIAL SECURITY NUMBER:

PLACE OF DEATH: HOSPITAL

FACILITY OR ADDRESS: UNITED GENERAL HOSPITAL

CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284

RESIDENCE STREET: 1724 SUNSET DRIVE

CITY, STATE, ZIP: BURLINGTON, WA 99233

INSIDE CITY LIMITS: YES

COUNTY: SKAGIT

TRIBAL RESERVATION: NOT APPLICABLE

LENGTH OF TIME AT RESIDENCE: 60 YEARS

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: [REDACTED]

BIRTHPLACE: LANGFORD, SD

FATHER: HAROLD LYLE HENRY

MOTHER: MARTHA LOUISE [REDACTED]

MARITAL STATUS: MARRIED

SURVIVING SPOUSE: JEAN CASSIDY

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: HAWTHORNE MEMORIAL PARK CREMATORY

OCCUPATION: MACHINIST

INDUSTRY: OIL REFINERY

EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED

US ARMED FORCES: NO

CITY, STATE: MOUNT VERNON, WASHINGTON

DISPOSITION DATE: FEBRUARY 18, 2020

FUNERAL FACILITY: HAWTHORNE FUNERAL HOME

INFORMANT: JEAN HENRY

RELATIONSHIP: WIFE

ADDRESS: 1724 SUNSET DRIVE BURLINGTON, WA 98233

ADDRESS: PO BOX 398

CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273

FUNERAL DIRECTOR: THOMAS CUFLEY

CAUSE OF DEATH:

A: ASPIRATION PNEUMONIA

INTERVAL: 3 DAYS

B: ADVANCE ALZHEIMER'S DEMENTIA

INTERVAL: MANY YEARS

C:

INTERVAL:

D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

MANNER 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 RESPONSE

DATE OF INJURY:

HOUR OF INJURY:

INJURY AT WORK:

PLACE OF INJURY:

CERTIFIER NAME: EDUARDO GOO, MD

TITLE: PHYSICIAN

CERTIFIER ADDRESS: 2000 HOSPITAL DRIVE

CITY, STATE, ZIP: SEDRO WOOLLEY, WA 98284

DATE SIGNED: FEBRUARY 13, 2020

LOCATION OF INJURY:

CITY, STATE, ZIP:

COUNTY:

DESCRIBE HOW INJURY OCCURRED:

CASE REFERRED TO ME/CORONER: NO

FILE NUMBER: NOT APPLICABLE

ATTENDING PHYSICIAN: NOT APPLICABLE

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: CHERYL PETERSON

DATE RECEIVED: FEBRUARY 14, 2020



Affidavit for Correction

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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	Required information must match current information on record				
	Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution (Divorce)				
	1. Name on Record: First Middle Last		2. Date of Event: MM/DD/YYYY	3. Place of Event: (City or County)	
	4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution) First Middle Last/Maiden		5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution) First Middle Last/Maiden		
	6. Name of Person Requesting Correction: Relationship to <input type="checkbox"/> Self <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Hospital Person on Record: <input type="checkbox"/> Parent(s) <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (specify)				
	7. Return Mailing Address: PO Box or Street Address City State Zip				
	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 forgoing is true and correct

16a. Signature:	16b. Signature of 2 nd parent (if required):
Printed name:	Printed name:
Date:	Date:

INSTRUCTIONS – go to 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	Adult (18 years or older)
<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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

FEB 18 2020

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



0 3 8 0 1 7 3 7

Agreement as to Status of Community Property

After Death of One of the Spouses

Know All Men by These Presents:

That this agreement, made and entered into this 22nd day of January, 19 76,
by and between H. Duane Henry aka Harold Duane Henry
and Jean W. Henry, husband and wife,
of Burlington, Skagit County, State of Washington, WITNESSETH:

That, in consideration of the love and affection that each of said parties has for the other, and in consideration of the mutual benefits to be derived by the parties hereto, it is hereby agreed, covenanted, and promised:

I.

That all property of whatsoever nature or description whether real, personal or mixed and where-soever situated now owned or hereafter acquired by them or either of them shall be considered and is hereby declared to be community property.

II.

That upon the death of either of the aforementioned parties title to all community property as herein defined shall immediately vest in fee simple in the survivor of them.

IN WITNESS WHEREOF, the said H. Duane Henry
and Jean W. Henry have hereunto set their hands
and seals this 22nd day of January, 19 76.

H Duane Henry (SEAL)
Jean W Henry (SEAL)

STATE OF WASHINGTON,
County of Skagit } SS.

This is to certify that on this 22nd day of January, 1976, before me
W. G. Fulton a Notary Public in and for the State of Washington
duly commissioned and sworn, personally came H. Duane Henry

and Jean W. Henry husband and wife, to me known to be the individuals described in and who executed the within instrument, and acknowledged to me that they signed and sealed the same as their free and voluntary act and deed for the uses and purposes therein mentioned.

WITNESS my hand and official seal the day and year in this certificate first above written.

W. G. Fulton



Notary Public in and for the State of Washington residing at Mount Vernon