




202102180059

02/18/2021 10:26 AM Pages: 1 of 3 Fees: \$41.00
Skagit County Auditor

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

2021-035
FEB 16 2021

Amount Paid \$ 0
Skagit Co. Treasurer
By  Deputy

Document Title:

Record Death Certificate for Revocable Transfer on Death Deed

Reference Number : 201708030011

Grantor(s):

additional grantor names on page ____.

1. Joseph Pratt

2.

Grantee(s):

additional grantee names on page ____.

1. Matthew Pratt

2.

Abbreviated legal description:

full legal on page(s) ____.

Replat of Lot 1 of Sunny Slope 1B

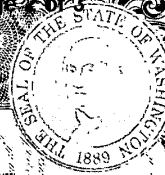
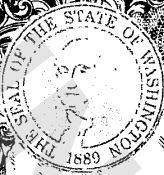
Assessor Parcel / Tax ID Number:

additional tax parcel number(s) on page ____.

P119145, P79479

UNOFFICIAL DOCUMENT

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2021-005634

DATE ISSUED: 02/05/2021
FEE NUMBER:

FIRST AND MIDDLE NAME(S): JOSEPH CARROLL
LAST NAME(S): PRATT JR

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: FEBRUARY 02, 2021
HOUR OF DEATH: 11:03 AM
SEX: MALE AGE: 95 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 9783 DAN STREET
CITY, STATE, ZIP: LA CONNER, WASHINGTON 98257

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO
RACE: WHITE

RESIDENCE STREET: 9783 DAN STREET
CITY, STATE, ZIP: LA CONNER, WA 98257
INSIDE CITY LIMITS: NO COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 7 YEARS

BIRTH DATE: [REDACTED]
BIRTHPLACE: KENNEWICK, WA

FATHER: JOSEPH CARROLL PRATT SR
MOTHER: BLANCHE ELVIN [REDACTED]

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: VIRGINIA ANN FOX

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MOUNT VERNON CREMATORY

OCCUPATION: REGIONAL MANAGER
INDUSTRY: BANKING
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES: YES

CITY, STATE: MOUNT VERNON, WASHINGTON
DISPOSITION DATE: FEBRUARY 04, 2021

INFORMANT: MATTHEW LAWRENCE PRATT
RELATIONSHIP: SON
ADDRESS: 15509 SE 49TH STREET, BELLEVUE, WASHINGTON, 98006

FUNERAL FACILITY: KERN FUNERAL HOME

ADDRESS: 1122 S. 3RD STREET
CITY, STATE, ZIP: MT. VERNON, WASHINGTON 98273
FUNERAL DIRECTOR: JEREMIAH T. LESOURD

CAUSE OF DEATH:
A: PROSTATE CANCER
INTERVAL: 20 YEARS
B:
INTERVAL:
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: METS TO BONE, ANEMIA

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: ANITA M. MEYER, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 227 FREEWAY DRIVE, SUITE A
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
DATE SIGNED: FEBRUARY 03, 2021

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: BELEN MARTINEZ
DATE RECEIVED: FEBRUARY 04, 2021



Affidavit for Correction

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

STATE OFFICE USE ONLY

Form fields for State Office Use Only including State File Number, Fee Number, Initials, Date, Affidavit Number, and Required information sections (Record Type, Name on Record, etc.)

Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:

Table for recording discrepancies between 'The record currently shows' and 'The true fact is' with columns for record number and description.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signature fields for 14a. Signature and 14b. Signature of 2nd parent (if required), including printed name and date.

INSTRUCTIONS - go to www.doh.wa.gov for more information

Required proof documentation must be submitted with the affidavit and include full name and birth date. Examples of proof documentation include: Birth/Marriage/Divorce record, Military record, School transcripts, Social Security Numident Report, etc.

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).
3. Proof documentation must be five or more years old or established within five years of birth.
4. This affidavit cannot be used to add a parent to a birth certificate (use Acknowledgment of Parentage form DOH 422-159).

Child under 18

- If legal guardian(s), include certified court order proving guardianship.
Up to age one or up to one year following the filing of an Acknowledgment of Parentage form, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names); thereafter, 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 proof documentation is required.
To correct the sex of the child, one proof documentation 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 proof documentation are required.
If the first, middle and/or last name is misspelled, or month and/or day of birth is incorrect, two pieces of proof documentation are required.
To correct parent's birth date, place of birth, or name, one proof documentation 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.

Death Certificates

- 1. Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family member may change the non-medical information with proof documentation.
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 proof documentation.
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.



CERTIFIED

FEB 05 2021

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



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