

WHEN RECORDED RETURN TO:

Land Title and Escrow Company
3010 Commercial Avenue
Anacortes, WA 98221

201585-LT, LAND TITLE

DOCUMENT TITLE(S):
Death Certificate

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR:
STATE OF OREGON

GRANTEE:
MATTHEW D. AUSLAND

ABBREVIATED LEGAL DESCRIPTION:
Lot 12, View Acres Add to Anacortes

TAX PARCEL NUMBER(S):
3835-000-012-0001/P60516

STATE OF OREGON
CERTIFICATION OF VITAL RECORD

766620
 I.D. TAG NO.

OREGON HEALTH AUTHORITY
 CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH

136-2016-017114
 STATE FILE NUMBER

Legal Name		First Matthew	Middle Davis	Last Ausland	Suffix	Death Date July 06, 2016
Sex Male	Age 50 years	Social Security Number		County of Death Coos		
Birthdate	Birthplace Umatilla, Oregon		Was Decedent Ever in U.S. Armed Forces? No			
Residence 1307 28th Street			City/Town Anacortes			
Residence County Skagit		State or Foreign Country Washington		Zip Code + 4 98221	Inside City Limits? Yes	
Marital Status at Time of Death Married		Spouse's Name Prior to First Marriage Sunni D. Kircher				
Father's Name Craig C. Ausland			Mother's Name Prior to First Marriage			
Informant's Name Sunni D. Ausland		Telephone Number Not Available	Relationship to Decedent Spouse	Mailing Address 1307 28th Street, Anacortes, WA 98221		
Place of Death Other - Home of Father		Facility Name				
Location of Death 88732 Agate Lane		City/Town or Location of Death Bandon		State Oregon	Zip Code + 4 97411	
Method of Disposition Cremation		Place of Disposition Siuslaw Valley Crematory		Location (City/Town and State) Florence, Oregon		
Name and Complete Address of Funeral Facility Nelson's Bay Area Mortuary 405 Elrod Avenue, Coos Bay, Oregon 97420						
Date of Disposition TBD	Funeral Director's Signature <i>John A Nelson</i>		Electronically Signed	OR License Number CO-3530		
Registrar's Signature <i>Jennifer A. Woodward</i>		Date Received July 11, 2016		Local File Number		
Amendment						

Was case referred to Medical Examiner?	Yes	Autopsy?	Yes	Were autopsy findings available to complete the cause of death?	Yes	Time of Death 06:10 AM
CAUSE OF DEATH						Approximate Interval: Onset to Death
IMMEDIATE CAUSE ↓ atherosclerotic heart disease						years
a. Due to (or as a consequence of) ↓						
b. Due to (or as a consequence of) ↓						
c. Due to (or as a consequence of) ↓						
d. Due to (or as a consequence of) ↓						
Other significant conditions contributing to death hyperlipidemia						
Manner of Death Natural	If Female Not Applicable		Did tobacco use contribute to death? No			
Date of Injury	Time of Injury	Place of Injury		Injury at Work?		
Location of Injury						
Describe how injury occurred						
If transportation injury, specify.						
Name and Address of Certifier James N Olson 5179 Crater Lake Highway, Central Point, Oregon 97502						
Name and Title of Attending Physician [If Other than Certifier]						Date Signed July 11, 2016
Medical Certifier <i>James N Olson</i>		Electronically Signed	Title of Certifier M.D., M.E.		License Number MD10050	
Amendment						



I CERTIFY THAT THIS IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORD FACTS ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON CENTER FOR HEALTH STATISTICS.

DATE ISSUED July 11, 2016

Jennifer A Woodward
 JENNIFER A. WOODWARD, Ph.D.
 STATE REGISTRAR



Return Address:

Sunni D. Ausland
1307 28th Street
Anacortes WA 98221

AFFIDAVIT (LACK OF PROBATE)

The undersigned affiant/grantee Sunni D Ausland, being first duly sworn
Name of Affiant
deposes and states as follows: That they are a rightful heir as listed on heirs at law, to the real
property described below, and is Surviving spouse
Relationship to decedent
of Matthew D. Ausland, who died on 7/04/2014
Decedent/Grantor *Date*
at Bandon, Coos, Oregon
City *County* *State*

REAL PROPERTY SUBJECT TO THE AFFIDAVIT:

Abbreviated Legal Description:

lot 12, View Acres Add to Anac

Assessor's Property Tax Parcel/Account Number: 3035-000-012-0001 / P60516
(Attach full legal description of the property)

- Decedent left no Last Will and Testament.
- Decedent left a Last Will and Testament which HAS NOT been Probated or Revoked.

"Heirs at law" includes surviving spouse, children, adopted children, issue of predeceased child or adopted child, parents, brothers and sisters of the decedent. Affiant hereby identifies all heirs at law of the decedent: (use additional pages if necessary)

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Summi D. Ausland, , Surviving Spouse, 1307
28th St. Anacortes WA 98221

Full name, age, relationship, address

Madeline Ausland, daughter, 25, 1307 28th St
Anacortes WA 98221

Full name, age, relationship, address

Cassandra Ausland, daughter, 20, 1307 28th
Street Anacortes WA 98221

Full name, age, relationship, address

Dated: September

Sunni D. Ausland

Affiant's full name

360-540-6262

Telephone number

1307 20th Street

Anacortes WA 98221 Street

City

State

Zip Code

Sunni D. Ausland
Signature

9-20-2021
Date

State of WA County of Skagit

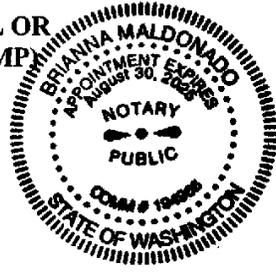
I know or have satisfactory evidence that Sunni D. Ausland
(name of person)

is the person who appeared before me, and said person acknowledged that (he/she) signed this affidavit and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this affidavit.

Dated: 09, 20, 2021

Brianna Maldonado
Signature of Notary Public

(SEAL OR STAMP)



Residing at: Anacortes WA

Notary Public in and for the State of WA

My appointment expires: 08/30/2025