

WHEN RECORDED RETURN TO:

**Jeff McKinney
19504 26th Drive SE
Bothell, WA 98012**

REVIEWED BY
SKAGIT COUNTY TREASURER
DEPUTY Lena Thompson
DATE 12/12/2022

207875-LT, Land Title and Escrow

**DOCUMENT TITLE(S):
Death Certificate**

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

**GRANTOR:
STATE OF WASHINGTON**

**GRANTEE:
DELLE MARIE MCKINNEY**

**ABBREVIATED LEGAL DESCRIPTION:
Ptn Lot 7, Estates at Summit Park Div. II**

**TAX PARCEL NUMBER(S):
4692-000-007-0000/P111120**

STATE OF WASHINGTON DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2022-022314

DATE ISSUED: 05/02/2022
FEE NUMBER:

FIRST AND MIDDLE NAME(S): DELLE MARIE
LAST NAME(S): MCKINNEY

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: APRIL 27, 2022
HOUR OF DEATH: 01:30 AM
SEX: FEMALE AGE: 81 YEARS
SOCIAL SECURITY NUMBER:

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

BIRTH DATE:
BIRTHPLACE: SEATTLE, WA

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: GARY FRANK MCKINNEY

OCCUPATION: HOMEMAKER
INDUSTRY: OWN HOME
EDUCATION: ASSOCIATE DEGREE
US ARMED FORCES: NO

INFORMANT: GARY MCKINNEY
RELATIONSHIP: HUSBAND
ADDRESS: 8568 SOUTHRIDGE PL, ANACORTES, WA 98221

CAUSE OF DEATH:
A: DEMENTIA - LIKELY VASCULAR
INTERVAL: MONTHS
B:
INTERVAL:
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: CACHEXIA, ASPRATION, ACUTE
KIDNEY INJURY, ANEMIA

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: DECEDENT'S HOME
FACILITY OR ADDRESS: 8568 SOUTHRIDGE PL
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221

RESIDENCE STREET: 8568 SOUTHRIDGE PL
CITY, STATE, ZIP: ANACORTES, WA 98221
INSIDE CITY LIMITS: NO COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 23 YEARS

FATHER: FERDINAND ALLARD KIRCHHOF
MOTHER:

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: NORTHWEST CREMATORY

CITY, STATE: ANACORTES, WASHINGTON
DISPOSITION DATE: APRIL 30, 2022

FUNERAL FACILITY: EVANS FUNERAL CHAPEL & CREMATORY, INC.

ADDRESS: 1105 32ND STREET
CITY, STATE, ZIP: ANACORTES, WASHINGTON 98221
FUNERAL DIRECTOR: LEONARD J. WILLIAMS

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

CERTIFIER NAME: ANITA M. MEYER, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 227 FREEWAY DRIVE, SUITE A
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
DATE SIGNED: APRIL 28, 2022

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: MELISSA M. DOSS
DATE RECEIVED: APRIL 29, 2022



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

Form fields for State Office Use Only including State File Number, Fee Number, Initials, Date, Affidavit Number, and Required information matching current information on record.

Form fields for Return Mailing Address, Telephone Number, and Email Address.

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

Form fields for requesting changes on the record, including 'The record currently shows' and 'The true fact is' sections.

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

Form fields for signatures and printed names of the declarant and a second parent (if required).

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 records, Military record (DD-214), School transcripts, Social Security Numident Report, Certificate of Naturalization, Hospital records of record, Copy of Passport (Enhanced ID), Green Permanent Resident card (I-551). You cannot use a Driver's license, Social Security card, or hospital decorative birth certificate as proof documentation.

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. 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.
Hospital records can change the first or middle name.
To correct parent 15 information, one proof documentation is required.
To correct the sex of the child, one proof documentation 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.

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. Family members are spouse or registered domestic partner, parent, sibling, or adult child or stepchild. Marital status requires a certified 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 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

MAY 02 2022

Signature of Howard T. Howard, M.D., Health Officer
Skagit County Health Department
Howard T. Howard, M.D., Health Officer



0 5 4 9 2 8 2 7

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

COMMUNITY PROPERTY AGREEMENT

Gary F. McKinney and Delle M. McKinney, husband and wife, residing at West 5307 Woodview Court, Spokane, Washington 99208 desiring to avail themselves of the provisions of Sections 26.16.120 and 11.02.090 of the Revised Code of Washington, hereby agree that all of the property now owned or hereafter acquired by either of them is and shall be the community property of both.

The parties have executed reciprocal Wills and acknowledge that no Will disposing of their property contrary to the provisions of this agreement shall be of any force and effect, unless this agreement is first amended or cancelled. The parties further acknowledge that this agreement shall not defeat the rights of creditors nor avoid lawful estate or inheritance taxes.

In the event our marriage is terminated by divorce or dissolution, this agreement terminates on the date of entry of the Decree of Divorce or Dissolution.

EXECUTED ON April 20, 1990.

Gary F. McKinney
Gary F. McKinney

Delle M. McKinney
Delle M. McKinney

STATE OF WASHINGTON)
 : ss
County of Spokane)

On this day personally appeared before me Gary F. McKinney and Delle M. McKinney, husband and wife, to me known to be the persons described in and who executed the within and foregoing instrument and acknowledged that they signed the same as their free and voluntary act and deed for the uses and purposes therein mentioned.

GIVEN under my hand and official seal on April 20, 1990.

John F. Blair
NOTARY PUBLIC in and for the State of Washington, residing in Spokane
My Commission Expires: 3-4-94

COMMUNITY PROPERTY AGREEMENT: 1

MAIL TO: MULLIN, CROWIN & BLAIR
N. 115 Washington, 3rd fl.
Spokane, WA 99201