202304120022
04/12/2023 11:05 AM Pages: 1 of 4 Fees: $206.50
Skagit County Auditor

Return Address:
Sara Ziegenbein
18540 Palatine Pl. N.
Shoreline, WA. 98133

SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX
2023 6085
APR 12 2023
Amount Paid $ 0
Skagit Co. Treasurer
By LT Deputy

AFFIDAVIT (LACK OF PROBATE)

The undersigned affiant/grantee Sara Ziegenbein (Name of Affiant), being first duly sworn 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 the daughter (Relationship to decedent) of Antonio Gaspar Rodriguez (Decedent/Grantor), who died on 2/21/98 (Date) at Pueblo (City) Pueblo (County) Colorado (State)

REAL PROPERTY SUBJECT TO THE AFFIDAVIT:

Abbreviated Legal Description:

BEG ON S LI SEC ST 108FT W OF W LI OF 6TH ST EXT TH W ALG S LI SEC ST 58FT TH S 150FT E 58FT N 150FT TPB, SECTION 29, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M.

Assessor's Property Tax Parcel/Account Number: P28416
(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)

REV 84 0017 (1/3/17)

Sara Elizabeth Ziegenbein, 46, Daughter
18540 Palatine Pl. N, Shoreline, WA. 98133
Full name, age, relationship, address

Erico Gaspar Rodriguez, 51, Son
7548 34th Ave SW, Seattle, WA. 98126
Full name, age, relationship, address

Mary Ellen Rodriguez, 74, Spouse
208 E. Section, Mt. Vernon, WA. 98273
Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Dated: April 12, 2023

Sara Elizabeth Ziegenbein
Affiant's full name

(206) 321-5494
Telephone number

18540 Palatine Pl. N.
Street

Shoreline | WA. | 98133
City | *State* | *Zip Code*

Sara Ziegenbein
Signature

4/12/23
Date

State of WA County of Skagit

I know or have satisfactory evidence that Sara E Ziegenbein
(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: 4/12/23

Paula H
Signature of Notary Public

(SEAL OR STAMP)

PAULA HERNANDEZ
APPOINTMENT EXPIRES JULY 17, 2023
NOTARY PUBLIC
Commission # 209913
STATE OF WASHINGTON

Residing at: Skagit County, Banner Bank

Notary Public in and for the State of WA

My appointment expires: July 17, 2023

REV 84 0017 (1/3/17)

STATE OF COLORADO
CERTIFICATE OF DEATH

255-192-98

DECEDENT

Antonio Gaspar RODRIGUEZ | M | February 21, 1998

[redacted] | 52 | Pueblo, Colorado

Parkview Hospital | Pueblo | Pueblo

Coordinator and Investigator | US Government | Married | Mary Ellen Pearson

Washington | Skagit | Mt. Vernon | 208 E. Section

X Yes | 98273 | Spanish | White | 17

PARENTS

Jasper Rodriguez | Matilda [redacted] | Mary Ellen Rodriguez/Wife

DISPOSITION

X Burial X Cremation | Pueblo Cremation Services | Pueblo, Colorado

MSP 1058

Romero Family Funeral Homes, Inc.
110 Cleveland Pueblo, CO ZIP 81004

FEB 25 1998

02:20 P | 02 | 21 | 1998 | 02:20PM | No

TO BE COMPLETED ONLY BY CERTIFYING PHYSICIAN

TO BE COMPLETED BY CORONER

CERTIFIER

28 DATE SIGNED (Month, Day, Year): 23 Feb 1998

30 NAME, TITLE AND MAILING ADDRESS OF CERTIFIER CORONER (Type Print): William Herrera mo 2002 Lake Ave Pueblo Co 81004 ZIP

31 NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type Print)

32 MANNER OF DEATH: X Natural | Pending Investigation | Accident | Suicide | Undetermined Manner | Homicide

33a DATE OF INJURY (Month, Day, Year) | 33b TIME OF INJURY | 33c INJURY AT WORK? Yes No | 33d DESCRIBE HOW INJURY OCCURRED

33e PLACE OF INJURY: At home, farm, street, factory, office building, etc. (Specify) | 33f LOCATION (Street and Number or Rural Route Number, City, County, State)

CAUSE OF DEATH

34 IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) Do not enter mode of dying, e.g. Cardiac or Respiratory Arrest, Asphyxia

PART I CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

(a) Cerebral hemorrhage — DUE TO OR AS A CONSEQUENCE OF
(b) hypertension — DUE TO OR AS A CONSEQUENCE OF
(c) diabetes mellitus

Interval between Onset and Death

PART II OTHER SIGNIFICANT CONDITIONS. Conditions contributing to death but not related to cause in PART I (e.g., alcohol abuse, obesity, smoker)

35 AUTOPSY (Yes or No): No

36 IF YES were findings considered in determining cause of death?

State of Colorado
County of Pueblo

I here by certify this document is a true and correct copy of the original record in my custody.
Issued in Pueblo this day FEB 25 1998

Claudine Herrera-Lucero D.O.H.A.

Local Registrar

Deputy Registrar

This copy not valid unless prepared on yellow [redacted] basket weave paper and [redacted] impressed with raised seal of the Local Registrar of Vital Statistics.

PENALTY BY LAW: Section 25-2-118, Colorado Revised Statutes, 1982, if any person alters, uses, or attempts to use, furnishes to another for deceptive use or supplies false information for any vital statistics certificates.