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Skagit County Auditor

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LAWRENCE A. PIRKLE
P.O. Box 1788
Mount Vernon, WA 98273
(360) 336-6587

REVIEWED BY
SKAGIT COUNTY TREASURER
DEPUTY Kaylee Oudman
DATE 5/26/2023

DOCUMENT TITLE(S):

WASHINGTON STATE
CERTIFICATE OF DEATH

REFERENCE NUMBER(S):

GRANTOR:

STATE OF WASHINGTON

GRANTEE:

SELMA ANN MEDFORD (DECEASED)

ASSESSOR'S PARCEL NUMBERS:

P40958 (350610-3-004-0001);
P40959 (350610-3-005-0000);
P40973 (350610-3-010-0003)

ABBREVIATED LEGAL DESCRIPTION:

The Northeast 1/4 of the
Southwest 1/4 of Section 10,
Township 35 North, Range 6
East, W.M.

Situate in the County of Skagit,
State of Washington.

STATE OF WASHINGTON DEPARTMENT OF HEALTH



379 LOCAL FILE NUMBER

146 STATE FILE NUMBER

CERTIFICATE OF DEATH

Form with fields for Name (Selma Ann Medford), Sex (Female), Death Date (June 13, 1997), Age (85), Birth Date, Birthplace (Sylva, NC), City of Death (Sedro-Woolley), Cause of Death (advanced cancer of ovary), and Registrar Signature (Sharon D. Beeson).



Howard M.D. Health Officer Signed Sharon D. Beeson (Skagit County Deputy Registrar)

Date JUN 17 1997

ANY CHANGES MADE BELOW VOID THIS CERTIFICATE, A NEW CERTIFICATE MUST BE ISSUED TO VALIDATE CHANGES.

NUMBER OF CERTIFICATES	FEE NUMBER	INITIALS	DATE	AFFIDAVIT NUMBER
STATE OFFICE USE ONLY		STATE OFFICE USE ONLY		
The record of Birth <input type="checkbox"/> Marriage <input type="checkbox"/>		1. STATE FILE NUMBER		
Death <input type="checkbox"/> Dissolution <input type="checkbox"/> with		for		
2. NAME		3. DATE OF EVENT	4. PLACE OF EVENT (City and County)	
5. FATHER'S FULL NAME (If Birth), HUSBAND (If Marriage/Dissolution)		6. MOTHER'S FULL MAIDEN NAME (If Birth), WIFE (If Marriage/Dissolution)		
THE RECORD IS INCORRECT OR INCOMPLETE AS FOLLOWS:				
THE RECORD NOW SHOWS:		THE TRUE FACT IS:		
7.		8.		
9.		10.		
11.		12.		
13.		14.		
I REPRESENT THE PERSON AS (E.G. SELF, PARENT, GUARDIAN, ETC.) SPECIFY				15.
PHONE NUMBER: _____				
I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FORGOING IS TRUE AND CORRECT.				
16. SIGNATURE		17. DATE	18. ADDRESS	

DCH 110-007 (Rev. 8/96)

All vital records are registered as received. Changes must be made by affidavit. An item may be changed by affidavit only once. Subsequent changes must be made by court order. This certificate must be returned within one year of the date it was issued to receive a replacement copy free of charge.

Birth Certificates

- All changes must be established by documentary proof submitted with the affidavit.
- Only a parent, legal guardian or the adult (18 or older) may change the birth certificate.
- The proof(s) must match exactly the asserted true fact(s). For example, if the affidavit says the name is Mary Ann Doe, then the proof must show the name to be Mary Ann Doe, Mary A. Doe or M.A. Doe does not prove the name is Mary Ann Doe.
- The proof(s) for names must be five (or more) years old, while proof(s) for dates, places, or ages must have been established within five years of birth.
- Examples of documents of proof:

Baptismal Certificate	Marriage Record	School Record
Census Record	Medical Record	Voter's Registration Card
Hospital Records	Military Record (DD-214)	(if it bears an effective date)
Insurance Records	Your Child's Birth Record	Passport
- Surname changes require a certified copy of a court ordered name change, except that minor spelling changes may be made with an affidavit and documentary proof.
- Parent(s) may change their child's first or middle name with only their signature until the child's 18th birthday.
- This affidavit cannot be used to add a father to a birth certificate.

Death Certificates

- Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information.
- The medical information (cause of death) may be changed only by the attending physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

- Personal fact (minor spelling changes in name, date or place of birth or residence) may be changed by affidavit plus proof by the person. See description of proofs in births above.
- To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must sign the affidavit.

Please send the proof(s) and this form/certificate to:

Attn: Corrections
 Center for Health Statistics
 1112 Quince Street South
 P.O. Box 9709
 Olympia, WA 98507-9709

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

EE350603