202306260049 06/26/2023 11:44 AM Pages: 1 of 3 Fees: \$41.00

When recorded return to:

Dennis Whaten Jacklyn Whaten 39549 Via Gallates Murriet CA 20565

SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX 2023 - 7024 JUN 2 6 2023

Amount Paid \$
Skagit Co Treasurer
By Deputy

COVER SHEET

Document Title: Denth Coefficia	te
Reference Number: 2053-7059	1
Grantor(s):	()additional grantor names on page
1. State of Washington	
2	
Grantee(s):	()additional grantee names on page
1. Shirley (eanotte Montis	
2	
Abbondated bank decadates	A 26 H.L
Abbreviated legal description:	()full legal on page
Lot 21 Meadow Lane Addition	as per plat recorded
in Volume 8 of Plats, Page	as per plat recorded 16, receiveds of Shagit Ceruty
Parcel/Tax ID Number: ()ac	lditional tax parcel number(s) on page
Platylle	
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STATE OF WASHINGTON 1-14-AM PAGE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

DATE ISSUED 05/23/2023 FEE NUMBER: 161715986

CERTIFICATE NUMBER 2023-022541

FIRST AND MIDDLE NAME(S): SHIRLEY JEANET, TE

LAST NAME(S): MONTIS

COUNTY OF DEATH: SKAGIT DATE OF DEATH: APRIL 26, 2023 HOUR OF DEATH: 08:25 AM FOUND

SEX: FEMALE

AGE: 85 YEARS

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BÎRTH DATE: BIRTHPLACE

MARITAL STATUS WIDOWED ...

SURVIVING SPOUSE: NOT APPLICABLE

OCCUPATION: UNKNOWN INDUSTRY: UNKNOWN

EDUCATION. SOME COLLEGE CREDIT, BUT NO DEGREE

US ARMED FORCES NO

INFORMANT BARRY MASSEY

RELATIONSHIP: FRIEND

ADDRESS: 9465 CLAYBROOK RD SEDRO WOOLLEY, WA 98284

PLACE OF DEATH: DECEDENT'S HOME FACILITY OR ADDRESS. 9465 CLAYBROOK ROAD CITÝ, STATE ŽIP. SEDRO-WOOLLEY, WASHINGTON 98284

RESIDENCE STREET: 9465 CLAYBROOK RD CITY, STATE, ZIP. SEDRO WOOLLEY, WA 98284-1310 INSIDE CITY LIMITS: NO COUNTY: SKAGIT TRIBAL RESERVATION: NOT APPLICABLE LENGTH OF TIME AT RESIDENCE: 10 YEARS

FATHER: UNKNOWN MOTHER UNKNOWN

METHOD OF DISPOSITION CREMATION PLACE OF DISPOSITION: NORTHWEST CREMATORY

CITY STATE ANACORTES, WASHINGTON DISPOSITION DATE: MAY 09, 2023

UNERAL FACILITY JERNS FUNERAL CHAPEL

ADDRESS: 4131 HANNEGAN RD SUITE #106 CITY STATE ZIE BELLINGHAM, WASHINGTON 98225 FUNERAL DIRECTOR: JAKE WAGGONER

LOCAL DEPUTY REGISTRAR MARIA VIVANCO DATE RECEIVED: MAY 09, 2023

202306260049

Affidavit for Correction

06/26/2023 11 AAA Menter go Reach Etatistics

P.O. Box 47814 Olympia, WA 98504-7814 360-236-4300

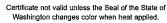
This is a legal document. Complete in ink and do not alter.

STATE OFFICE USE ONLY											
State	e File Number	Fee I	Number		Initi		Date	Affid	avit Number		
Required information must match current information on record											
	Record Type: Right Death Marriage Dissolution (Divorce)										
ӯ	1. Name on Record:				age		2. Date of Event:		ace of Event:		
اع. ا	First	Middle	L	ast			MM/DD/YYYY	1 1	City or County)		
Required	4. Father/Parent Full Bir	th Name (Spouse	A for Marriage or	Dissolution)	5. Mother/Pare	ent Full	Birth Name (Spouse		• • • • • • • • • • • • • • • • • • • •		
ĕ	First	Middle	ŭ	ast/Maiden	First	o	Middle	2 2 101 Maria	Last/Maiden		
~	6. Name of Person Regi			Relationship			Guardian	□ Informan			
	o. Name of Ferson Requ	desting Correction			ecord: 🗌 Parer		☐ Funeral Director				
	7. Return Mailing Address:										
	Box or Street Address				City		State	Zi	p		
(ohone Number:)				Email Address	S:					
Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:											
<u>_</u>	The i	record currently	shows:				The true	fact is:			
8					9.						
10.					11.						
12.					13.						
	I declare under penalty of perjury under the laws of the State of Washington that the forgoing is true and correct.										
14a.	Signature:				14b. Signature	e of 2 nd	parent (if required):				
Print	ed name:		Dat	e:	Printed name:			***************************************	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 (DD-214) • School transcripts • Social Security Numident Report • Certificate of Naturalization • Hospital/medical 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 from DOH 422-159). Child under 18 I gigal guardian(s), include certified court order proving guardianship. Up to age one or up to one year following the filling 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 parent's information, one proof documentation from a medical provider 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											
 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. The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner. Marriage/Dissolution (Divorce) Certificates											

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.
 To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.



This is a true and exact certification of the record officially registered and on file with the Washington State Department of Health, issued under the authority of Chapter 70.58A RCW, and at the direction of Katherine Hutchinson, PhD, MSPH, Deputy State Registrar.





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