

After recording return to:

Real Estate Excise Tax
Exempt
Skagit County Treasurer
By Lena Thompson
Affidavit No. 20241113
Date 06/26/2024

Grantor: Catherine G. Schwartz

Grantee: Stephan Schwartz

Reference Numbers: AF# 202406210055- CPA;
AF# 201006140178 - Deed P65055

Legal Description: Lots 22 & 23, Dewey Beach Addition No. 3, Plat Volume 6, p. 32

AFFIDAVIT IN SUPPORT OF COMMUNITY PROPERTY AGREEMENT

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

The undersigned, Stephan Schwartz a/k/a Steve Schwartz, being first duly sworn, upon oath, deposes and says:

1. This Affidavit provides information for the record regarding that certain Community Property Agreement dated June 11, 1990, and executed by Stephan Schwartz and Catherine G. Schwartz, husband and wife, (the 'Agreement'). The Agreement was recorded in the Skagit County Auditor's Office under AF# 202406210055 on June 21, 2024.

2. The statements set forth in this Affidavit are representations of fact that may be relied upon by all parties dealing with the real estate located in Skagit County, Washington and more fully described below, which is owned by them and husband and wife:

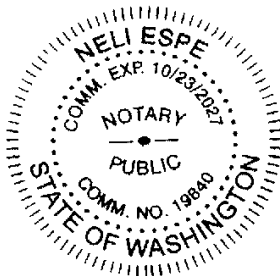
P65055 - LOTS 22 AND 23, DEWEY BEACH ADDITION NO. 3, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 6 OF PLATS, PAGE 32, RECORDS OF SKAGIT COUNTY, WASHINGTON.


3. Catherine G. Schwartz was one of the parties to the Agreement and died on January 18, 2024 in Anacortes, Skagit County, Washington. See attached Certificate of Death.
4. The parties to the Agreement were legally competent at the time of the Agreement and executed no subsequent Wills or agreements that would have the effect of abrogating or nullifying the Agreement.
5. Catherine G. Schwartz left no separate estate.
6. No estate or inheritance tax is due to the State of Washington or to the United States.
7. All obligations of the community owing at the date of death of Catherine G. Schwartz have been paid in full or provided for, and all expenses of last illness and for funeral services have been paid or provided for.
8. Catherine G. Schwartz is survived by her husband, Stephan Schwartz, who resides at 5975 Central Avenue, Anacortes, WA 98221.

Dated this 25th day of June, 2024.


Stephan Schwartz

Subscribed and sworn to before me this 25th day of June, 2024.




NELI T. ESPE, Notary Public
State of Washington, residing at Anacortes
My Appointment expires: Nov. 23, 2027

1 2 6 5 9 7 2 0

NOT VALID IF PHOTOCOPIED OR ALTERED



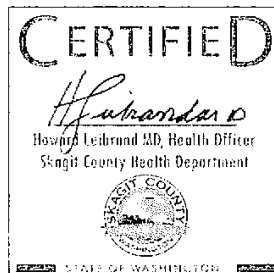
Affidavit for Correction

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

Mail To: Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
360-236-4300

| STATE OFFICE USE ONLY | | | | |
|--|--|---|---|--------------------|
| State File Number | Fee Number | Initials | Date | Affidavit Number |
| Required information must match current information on record | | | | |
| Required | Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution (Divorce) | | | |
| | 1. Name on Record: | | 2. Date of Event: | 3. Place of Event: |
| | 4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution) | | 5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution) | |
| | 6. Name of Person Requesting Correction: Relationship to <input type="checkbox"/> Self <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Hospital Person on Record: <input type="checkbox"/> Parent(s) <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (specify) _____ | | | |
| 7. Return Mailing Address: | | | | |
| Telephone Number: | | Email Address: | | |
| Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows: | | | | |
| The 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 of 2nd parent (if required): | | |
| Printed name: | Date: | 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: | | | | |
| <ul style="list-style-type: none"> • 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 form DOH 422-159). | | | | |
| Child under 18 | | | | |
| <ul style="list-style-type: none"> • 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. • No proof is required to change the first or middle name. • To correct parent's information, one proof documentation is required. • To correct the sex of the child, one proof documentation from a medical provider is required. | | | | |
| Adult (18 years or older) | | | | |
| <ul style="list-style-type: none"> • Only the adult can change his or her birth certificate. • If the first or middle name is missing, three pieces of proof documentation are required. • If the first, middle and/or last name is misspelled, or month and/or day of birth is incorrect, two pieces of proof documentation are required. • To correct parent's birth date, place of birth, or name, one proof documentation 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. | | | | |

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



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