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Skagit County Auditor

When Recorded Please Return To:
LAWRENCE A. PIRKLE
P.O. Box 1788
Mount Vernon, WA 98273

REVIEWED BY
SKAGIT COUNTY TREASURER
DEPUTY *Lena Thompson*
DATE *7.15.24*

DOCUMENT TITLE(S):

AFFIDAVIT OF SURVIVING SPOUSE
FOR LACK OF PROBATE AND CLAIM
OF EXEMPTION BASED UPON
INHERITANCE OF REAL ESTATE

REFERENCE NUMBER(S):

N/A

GRANTOR:

DAVID R. LUCHI

GRANTEE:

PUBLIC

ASSESSOR'S PARCEL NUMBER:

P99763 (360432-4-002-0300)

LEGAL DESCRIPTION:

PARCEL A:

Tract 3, SKAGIT COUNTY SHORT PLAT NO. 91-026, approved August 5, 1991, and recorded August 21, 1991, in Volume 10 of Short Plats, page 2, under Auditor's File No. 9108210057, records of Skagit County, Washington; being a portion of the North Half of the Northwest Quarter of the Southeast Quarter of Section 32, Township 36 North, Range 4 East of the Willamette Meridian.

PARCEL B:

An easement for ingress, egress, and utilities over that portion of Tract 1 shown as Cottontail Lane and over the East 20 feet of Tract 4 as shown on the face of Skagit County Short Plat No. 91-026, recorded in Volume 10 of Short Plats, page 2, records of Skagit County, Washington.

ALL situated in Skagit County, Washington.

**AFFIDAVIT OF SURVIVING SPOUSE
FOR LACK OF PROBATE AND
CLAIM OF EXEMPTION BASED UPON INHERITANCE OF REAL ESTATE**

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

DAVID R. LUCHI, being first duly sworn, deposes and says:

FIRST, that this Affidavit is for the purpose of supplying information pertaining to the Estate of ROSE M. LUCHI, deceased, and it is intended that the statements set forth herein (and hereto attached, if applicable), shall be considered representations of fact which may be relied upon by all persons dealing with the real property located in Skagit County, Washington, commonly known as 19692 Cottontail Lane, Sedro Woolley, Washington, and legally described as set forth on Exhibit "A" attached hereto and incorporated herein by this reference.

SECOND, I am the surviving spouse of ROSE M. LUCHI and we owned this property as husband and wife.

THIRD, that said Decedent passed away on June 7, 2023, in Skagit County, State of Washington. Decedent's original/certified Death Certificate is recorded separately, with a copy attached hereto as Exhibit "B" and incorporated herein by this reference.

FOURTH, that said Decedent executed no Wills, agreements to convey, conveyances, mortgages, deeds of trust, lien agreements or other instruments for the purpose of conveying or encumbering said land, any portion thereof, or any interest therein, other than those instruments which have been duly recorded in the office of the Auditors of said County, except as follows: NONE.

FIFTH, that the Estate of said Decedent at the date of death was in excess of its liabilities.

SIXTH, that all obligations of the Estate owing at the date of death of said Decedent have been paid in full, and all expenses of last sickness and for funeral services have been paid.

SEVENTH, that the following list comprises all of the heirs at law by whom said Decedent was survived.

<u>Name</u>	<u>Relationship</u>	<u>Age</u>
DAVID R. LUCHI 19692 Cottontail Lane Sedro Woolley, WA 98284	Spouse	Legal
BRYAN R. LUCHI 4316 Apache Drive Mount Vernon, WA 98273	Son	Legal
ANGELA R. VALLEE 4816 S. Pender Lane Spokane, WA 99224	Daughter	Legal
AMANDA R. GARRISON 12121 40th Drive SE Everett, WA 98208	Daughter	Legal
ALEXANDER D. LUCHI 1317 State Route 20 Burlington, WA 98233	Son	Legal

EIGHTH, I, DAVID R. LUCHI, affirm that I am the sole and rightful heir to the property legally described above.

NINETH, that the transfer of this property is exempted from the real estate excise tax pursuant to WAC 458-61A-202(6)(h).

DATED this 11th day of July, 2024.

David R. Luchi
DAVID R. LUCHI

EXHIBIT "A"

Assessor's Parcel Number: P99763 (360432-4-002-0300)

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ALL situated in Skagit County, Washington.

TOGETHER WITH AND SUBJECT TO: All covenants, conditions, restrictions, reservations, agreements, easements and assessments of record, if any.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2023-027743

DATE ISSUED: 06/08/2023
FEE NUMBER:

FIRST AND MIDDLE NAME(S): ROSE MARIE
LAST NAME(S): LUCHI

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: JUNE 07, 2023
HOUR OF DEATH: 12:30 AM
SEX: FEMALE AGE: 63 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

PLACE OF DEATH: DECEDENT'S HOME
FACILITY OR ADDRESS: 19692 COTTONTAIL LANE
CITY, STATE, ZIP: SEDRO-WOOLLEY, WASHINGTON 98284

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

RESIDENCE STREET: 19692 COTTONTAIL LANE
CITY, STATE, ZIP: SEDRO WOOLLEY, WA 98284
INSIDE CITY LIMITS: NO COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 26 YEARS

BIRTH DATE: [REDACTED]
BIRTHPLACE: SPRUCE PINE, NC

FATHER: DOUGLASS MCGUIRE
MOTHER: GENEVA CARPENTE [REDACTED]

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: DAVID RAY LUCHI

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MOUNT VERNON CREMATORY

OCCUPATION: HOMEMAKER/STUDENT AIDE
INDUSTRY: OWN HOME/PUBLIC EDUCATION
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES: NO

CITY, STATE: MOUNT VERNON, WASHINGTON
DISPOSITION DATE: JUNE 09, 2023

INFORMANT: DAVID RAY LUCHI
RELATIONSHIP: HUSBAND
ADDRESS: 19692 COTTONTAIL LANE, SEDRO-WOOLLEY, WA 98284

FUNERAL FACILITY: KERN FUNERAL HOME

ADDRESS: 1122 S. 3RD STREET
CITY, STATE, ZIP: MT. VERNON, WASHINGTON 98273
FUNERAL DIRECTOR: SARA E. PERRY

CAUSE OF DEATH:
A: BREAST CANCER
INTERVAL: 22 YEARS

B:
INTERVAL:

C:
INTERVAL:

D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: METASTATIC DISEASE TO BONE, PERICARDIUM AND PLEURA

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

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK:
PLACE OF INJURY:

CERTIFIER NAME: ANITA M. MEYER, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 227 FREEWAY DRIVE, SUITE A
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
DATE SIGNED: JUNE 07, 2023

LOCATION OF INJURY:
CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

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

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: MARIA VIVANCO
DATE RECEIVED: JUNE 08, 2023



Affidavit for Correction

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

STATE OFFICE USE ONLY

State File Number	Fee Number	Initials	Date	Affidavit Number
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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: First Middle Last			2. Date of Event: MM/DD/YYYY	3. Place of Event: (City or County)
	4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution) First Middle Last/Maiden			5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution) First Middle Last/Maiden	
	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: PO Box or Street Address City State Zip				
	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 2 nd 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:
- 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

- 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.
- 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.
- Proof documentation must be five or more years old or established within five years of birth.
- 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.
- 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)

- 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

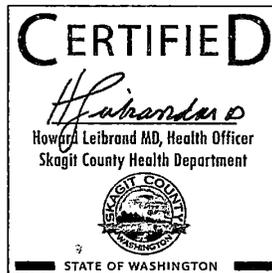
- Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family member may change the non-medical information with proof documentation. Family members are spouse or registered domestic partner, parent, sibling, or adult 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.



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



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