

After recording, return to:

Debra L. Brockman  
The Estate Brockman  
18039 N Palo Verde Ave  
Waddell, AZ 85385

REVIEWED BY  
SKAGIT COUNTY TREASURER  
DEPUTY Lena Thompson  
DATE 04/14/2025

Grantor (Name of Decedent): Timothy Brockman  
Grantee (Heirs): Jessica Vogt-Dora, Justine Hipple,  
Stacey Cox

Abbreviated Legal Description: PTN GOVT LT 8, SEC 6-35-11E, W.M.

Tax Parcel No.(s): P45844 / 351106-0-032-0002 and P45846 / 351106-0-033-0001

Chicago Title  
620058583

**INHERITANCE LACK OF PROBATE AFFIDAVIT**

**(To Be Recorded for Excise Tax Affidavit Claiming Exempt Transfer of Ownership)**

STATE OF Washington

COUNTY OF Skagit

The undersigned, Jessica Vogt-Dora, executes this affidavit relating to the estate of Timothy Brockman (herein "Decedent"), who died on 12-13-2024, in the County of Yuma, State of Arizona, then being a resident of the City of Yuma, County of Yuma, State of Arizona.

**(A copy of the death certificate is attached hereto.)**

The undersigned, being first duly sworn, on oath deposes and says:

- 1. This Affidavit is to be recorded as an affirmation of facts showing that I am a rightful heir to the property described below.

**Relationship of the Affiant to the Decedent**

- 2. The undersigned is (check one):
  - the lawful surviving spouse of the Decedent
  - Registered domestic partner of the Decedent
  - Surviving child of the Decedent
  - One (1) of the joint tenants named in that certain instrument creating a joint tenancy with a right of survivorship identified in that certain deed recorded on \_\_\_\_\_ [mm/dd/yyyy], under Recording No. \_\_\_\_\_, in \_\_\_\_\_ County, Washington.

**INHERITANCE LACK OF PROBATE AFFIDAVIT**  
(To Be Recorded for Excise Tax Affidavit Claiming Exempt Transfer of Ownership)  
(continued)

**Names of All Heirs of the Decedent**

3. That all the heirs at law of the decedent that were living at the time decedent's death are listed below.  
(Use the reverse side or attach a list if necessary)

- Name and relationship: Jessica Voge-Dora - daughter
- Name and relationship: Justine Hipple - daughter
- Name and relationship: Stacey Cox - daughter
- Name and relationship: \_\_\_\_\_
- Name and relationship: \_\_\_\_\_
- Name and relationship: \_\_\_\_\_
- Name and relationship: \_\_\_\_\_
- Name and relationship: \_\_\_\_\_
- Name and relationship: \_\_\_\_\_

**Description of the Property**

4. That among the items of real property owned by the Decedent at the time of death was real estate located in the County of Skagit, State of Washington, and described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

**5. Status of the Will (if any)**

- The decedent left a Will that devises real property.
- The decedent left no Will that devises real property.

IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

Jessica Voge-Dora  
Signature

Jessica Voge-Dora  
Print Name

State of Washington  
County of Snohomish

This record was acknowledged before me on 04/12/2025 by  
Jessica Voge-Dora

Colleen Blake  
(Signature of notary public)  
Notary Public in and for the State of Washington  
My commission expires: 10/19/2027

COLLEEN T BLAKE  
NOTARY PUBLIC  
STATE OF WASHINGTON  
COMMISSION # 210372  
COMMISSION EXPIRES 10/19/2027

Notarized remotely online using communication technology via Proof.

**EXHIBIT "A"**  
Legal Description

For APN/Parcel ID(s): P45844 / 351106-0-032-0002 and P45846 / 351106-0-033-0001

PARCEL A: (P45844 / 351106-0-032-0002)

THAT PORTION OF GOVERNMENT LOT 8 OF SECTION 6, TOWNSHIP 35 NORTH, RANGE 11, E. W.M., EXCEPT THE NORTH 15 ACRES THEREOF AND EXCEPT ROADS, DESCRIBED AS FOLLOWS:

BEGINNING AT THE INTERSECTION OF THE SOUTH LINE OF THE NORTH 15 ACRES WITH THE WEST BANK OF THE SKAGIT RIVER AS THE SAME EXISTED ON JUNE 1, 1958;  
THENCE WEST ALONG THE SOUTH LINE OF THE NORTH 15 ACRES OF SAID LOT 8, A DISTANCE OF 350 FEET;  
THENCE SOUTHERLY PARALLEL TO THE WEST BANK OF THE SKAGIT RIVER 225 FEET;  
THENCE EAST PARALLEL TO THE SOUTH LINE OF SAID NORTH 15 ACRES OF LOT 8, A DISTANCE OF 350 FEET TO THE SKAGIT RIVER;  
THENCE NORTHERLY ALONG THE WEST BANK OF THE SKAGIT RIVER TO THE POINT OF BEGINNING.  
EXCEPT THE NORTH 25 FEET;

PARCEL B: (P45846 / 351106-0-033-0001)

THAT PORTION OF GOVERNMENT LOT 8 OF SECTION 6, TOWNSHIP 35 NORTH, RANGE 11, E. W.M., EXCEPT THE NORTH 15 ACRES THEREOF AND EXCEPT ROADS, DESCRIBED AS FOLLOWS:

BEGINNING AT THE INTERSECTION OF THE SOUTH LINE OF THE NORTH 15 ACRES WITH THE WEST BANK OF THE SKAGIT RIVER AS THE SAME EXISTED ON JUNE 1, 1958;  
THENCE WEST ALONG THE SOUTH LINE OF THE NORTH 15 ACRES OF SAID LOT 8, A DISTANCE OF 350 FEET;  
THENCE SOUTHERLY PARALLEL TO THE WEST BANK OF THE SKAGIT RIVER 225 FEET;  
THENCE EAST PARALLEL TO THE SOUTH LINE OF SAID NORTH 15 ACRES OF LOT 8, A DISTANCE OF 350 FEET TO THE SKAGIT RIVER;  
THENCE NORTHERLY ALONG THE WEST BANK OF THE SKAGIT RIVER TO THE POINT OF BEGINNING.  
EXCEPT THE NORTH 150 FEET;  
AND EXCEPT THAT PORTION CONVEYED TO STATE OF WASHINGTON UNDER AUDITOR'S FILE NO. 845983.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

**STATE OF ARIZONA**  
**CERTIFICATION OF VITAL RECORD**

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ORIGINAL  
STATE COPY

STATE OF ARIZONA  
DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS  
**CERTIFICATE OF DEATH**

State File Number  
102-2024-066600

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX) <b>TIMOTHY, EDWIN, BROCKMAN</b>		2. AKA'S (IF ANY)		3. DATE OF DEATH <b>12/13/2024</b>	
4. SEX <b>MALE</b>	5. SOCIAL SECURITY NUMBER	6. DATE OF BIRTH	7. AGE <b>63 YEARS</b>		
8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH <b>YUMA, YUMA, 85365</b>					
9. PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY NAME/ADDRESS) <b>RESIDENCE - 310 W CASA BLANCA DRIVE</b>					
10. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) <b>GROTON, CONNECTICUT</b>		11. MARITAL STATUS <b>DIVORCED</b>		12. NAME OF SURVIVING SPOUSE PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) <b>NOT LISTED</b>	
13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, COUNTY, STATE, ZIP) <b>310 W CASA BLANCA DRIVE, YUMA, YUMA, AZ, 85365</b>					
14. DECEDENT'S HISPANIC ORIGIN(S) <b>NO, NOT SPANISH/HISPANIC/LATINO</b>		15. DECEDENT'S RACE(S) <b>WHITE</b>		16. EVER IN ARMED FORCES <b>NO</b>	
17. OCCUPATION <b>LINE COOK</b>		18. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX) <b>FREDRICK, BROCKMAN</b>			
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) <b>BARBARA, A, BROWN</b>		20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX) <b>DEBORAH, JESSICA LYN, VOGEL</b>			
21. RELATIONSHIP <b>DAUGHTER</b>		22. INFORMANT'S MAILING ADDRESS <b>1857 COUNTRY CLUB ROAD, WILLIAMS, AZ, 86046</b>			
23. NAME AND ADDRESS OF FUNERAL FACILITY OR RESPONSIBLE PERSON <b>REYES DOMBROWSKI FUNERAL HOME 3880 S 4TH AVENUE, YUMA, AZ, 85364</b>		24. FUNERAL DIRECTOR'S NAME OR RESPONSIBLE PERSON <b>ARICK, DOMBROWSKI</b>		25. LICENSE NUMBER <b>FDL-001275</b>	
26. METHOD(S) OF DISPOSITION <b>CREMATION</b>		27. NAME AND LOCATION OF 1ST DISPOSITION FACILITY <b>ARIZONA CREMATORY, YUMA, AZ, US</b>		28. NAME AND LOCATION OF 2ND DISPOSITION FACILITY	
<b>MEDICAL CERTIFICATION SECTION CAUSE OF DEATH PART I</b>					
29. A. IMMEDIATE CAUSE OF DEATH <b>ACUTE RESPIRATORY FAILURE</b>				30. APPROXIMATE INTERVAL <b>UNKNOWN</b>	
31. B. DUE TO OR AS A CONSEQUENCE OF: <b>MALIGNANT NEOPLASM OF PROSTATE</b>				32. APPROXIMATE INTERVAL <b>UNKNOWN</b>	
33. C. DUE TO OR AS A CONSEQUENCE OF: <b>SECONDARY MALIGNANT NEOPLASM OF BONE</b>				34. APPROXIMATE INTERVAL <b>UNKNOWN</b>	
35. D. DUE TO OR AS A CONSEQUENCE OF:				36. APPROXIMATE INTERVAL	
<b>CAUSE OF DEATH PART II</b>					
37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: <b>RESPIRATORY FAILURE</b>		38. INJURY? <b>NO</b>		39. INJURY AT WORK? <b>NO</b>	
40. MANNER OF DEATH <b>NATURAL DEATH</b>		41. TIME OF DEATH <b>10:30 PM</b>		42. WAS AN AUTOPSY PERFORMED? <b>NO</b>	
43. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?		44. NAME OF PERSON COMPLETING CAUSE OF DEATH <b>JOSE, L, VEGA</b>			
45. DATE CERTIFIED <b>12/17/2024</b>		46. CERTIFIER'S ADDRESS <b>2320 S 22ND DRIVE #A, YUMA, AZ, 85364</b>			

Date Registered: 12/17/2024      Date Issued: 12/23/2024      VS-49 Rev. 12/2017



This is a true certification of the facts on file with the Arizona Department of Health Services, Bureau of Vital Records, PHOENIX, ARIZONA. Revised 07/2016

*Krystal Colburn*  
**KRYSTAL GOLBURN**  
ASSISTANT STATE REGISTRAR



This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency.

**ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE**