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01/28/2026 08:54 AM Pages: 1 of 8 Fees: $310.50
Skagit County Auditor, WA

UNOFFICIAL DOCUMENT

FILED FOR RECORD AT REQUEST OF:

ELDER LAW OFFICES OF
MEYERS, NEUBECK & HULFORD, P.S.
2828 Northwest Avenue
Bellingham, WA 98225-2335

Real Estate Excise Tax
Exempt
Skagit County Treasurer
By Lena Thompson
Affidavit No. 20260219
Date 01/28/2026

WHEN RECORDED RETURN TO:

ELDER LAW OFFICES OF
MEYERS, NEUBECK & HULFORD, P.S.
2828 Northwest Avenue
Bellingham, WA 98225-2335

AFFIDAVIT IN SUPPORT OF COMMUNITY PROPERTY AGREEMENT

GRANTOR: GORDON O. CROYDON
GRANTEE: BARBARA J. CROYDON
PARCEL NUMBER: P134630
LEGAL DESCRIPTION: LOT 14, MONTREAUX PHASE 2 PLANNED UNIT DEVELOPMENT
(Additional legal found on pages 2 and 4-6)
REFERENCE NUMBERS: 202009160009 (Deed)
202601210020 (CPA)

STATE OF WASHINGTON)
) ss.
COUNTY OF WHATCOM)

BARBARA J. CROYDON ("Affiant"), being first duly sworn on oath, deposes and says:

1. The Community Property Agreement, recorded under the Skagit County Auditor's recording number referenced above, was executed by GORDON O. CROYDON ("Decedent") and BARBARA J. CROYDON ("spouse"), dated April 20, 2006. The Community Property Agreement and this Affidavit have been recorded for the estate of the Decedent. It is intended that the statements set forth herein shall be considered representations of fact which may be relied upon by all parties.

2. The Decedent died on February 28, 2025, in Mount Vernon, Skagit County, Washington, and was at the time of their death a resident of Mount Vernon, Skagit County, Washington, as evidenced by the Death Certificate attached hereto as **Exhibit A**.

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3. The parties to the Community Property Agreement entered into no subsequent Wills or Agreements which would have the effect of abrogating or nullifying the above-mentioned Community Property Agreement.

4. The Decedent left no separate estate.

5. Among other items of community property is the real property commonly known as 1057 Adams Court, Mount Vernon, Skagit County, Washington, which is legally described as follows:

LOT 14, MONTREAUX PHASE 2 PLANNED UNIT DEVELOPMENT, ACCORDING TO THE PLAT THEREOF RECORDED APRIL 5, 2019, UNDER AUDITOR'S FILE NO. 201904050014, RECORDS OF SKAGIT COUNTY, WASHINGTON.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

SUBJECT TO EXHIBIT B ATTACHED HERETO AND MADE A PART HEREOF

6. All obligations of the community owing at the date of death of the Decedent have been paid in full or provided for, and all expenses of last illness and for funeral and burial services have been paid in full or provided for.

7. The Decedent is survived by their spouse, BARBARA J. CROYDON, who resides at 1057 Adams Court, Mount Vernon, Skagit County, Washington.

8. No inheritance tax or estate tax is due to either the State of Washington or to the United States of America as a result of the Decedent's death.

9. This affidavit is made, in part, to induce a title company to issue its policies of title insurance on real property passing to the spouse in reliance upon the representations set forth above. Affiant agrees to indemnify and hold the title company harmless from loss or damage which may be suffered as a result of said reliance. The transfer of real property by this affidavit is made pursuant to WAC 458-61A-202(6)(a).

Dated this 20th day of January, 2026.

Barbara J. Croydon
BARBARA J. CROYDON

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Subscribed and sworn before me on this 20th day of January, 2026 by BARBARA J. CROYDON.

JESSICA A BRUNER
NOTARY PUBLIC
200524
COMMISSION EXPIRES
5-29-26
STATE OF WASHINGTON

JESSICA A. BRUNER
Notary Public in and for the
State of Washington
Residing in Bellingham
My commission expires: 05/29/2026

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STATE OF WASHINGTON
DEPARTMENT OF HEALTH

EXHIBIT A

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2025-011752

DATE ISSUED: 03/10/2025
FEE NUMBER: 37

FIRST AND MIDDLE NAME(S): GORDON OLIVER
LAST NAME(S): CROYDON

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: FEBRUARY 28, 2025
HOUR OF DEATH: 11:19 AM
SEX: MALE AGE: 84 YEARS
SOCIAL SECURITY NUMBER: [redacted]

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

BIRTH DATE: [redacted]
BIRTHPLACE: HONOLULU, HI

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: BARBARA JEAN WINSLOW

OCCUPATION: BUSINESS OWNER
INDUSTRY: FURNACE REPAIR
EDUCATION: NO DIPLOMA, 9TH - 12TH GRADE
US ARMED FORCES: YES

INFORMANT: BARBARA JEAN CROYDON
RELATIONSHIP: SPOUSE
ADDRESS: 1057 ADAMS COURT MOUNT VERNON, WA 98274

CAUSE OF DEATH:
A: PARKINSONS DISEASE
INTERVAL: YEARS
B:
INTERVAL:
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: DYSPHAGIA, URINARY TRACT INFECTIONS

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

LOCATION OF INJURY:

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

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: NURSING HOME/LONG TERM CARE FACILITY
FACILITY OR ADDRESS: 1810 E DIVISION STREET
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98274

RESIDENCE STREET: 1057 ADAMS COURT
CITY, STATE, ZIP: MOUNT VERNON, WA 98274
INSIDE CITY LIMITS: YES COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 4 YEARS

FATHER: FRED CROYDON
MOTHER: MARGARET [redacted]

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: SEATTLE SERVICE GROUP CREMATORY

CITY, STATE: SEATTLE, WASHINGTON
DISPOSITION DATE: MARCH 12, 2025

FUNERAL FACILITY: NEPTUNE SOCIETY - BELLINGHAM

ADDRESS: 118 WEST STUART RD
CITY, STATE, ZIP: BELLINGHAM, WASHINGTON 98226
FUNERAL DIRECTOR: LORI B. BANES

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: NOT APPLICABLE

CERTIFIER NAME: ERIKA POPE, DO
TITLE: DO
CERTIFIER ADDRESS: 227 FREEWAY DRIVE SUITE A
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
DATE SIGNED: FEBRUARY 28, 2025

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

LOCAL DEPUTY REGISTRAR: CHRISTIAN STECHER
DATE RECEIVED: MARCH 10, 2025

DOH 422-132 (8/18)

NOT VALID IF PHOTOCOPIED OR ALTERED

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Health

DOH 422-034 August 2019

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

Record Type: ☐ Birth ☐ Death ☐ Marriage ☐ 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 Person on Record: ☐ Self ☐ Parent(s) ☐ Guardian ☐ Funeral Director ☐ Informant ☐ Other (specify) ☐ Hospital

7. Return Mailing Address: 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 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:

- 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

- If legal guardian(s), include certified court order proving guardianship.
- Up to age one or up to one year following the filing of an Acknowledgement 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.

*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.

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.

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.

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 70.58 RCW, and at the direction of Amy Harley, Health Officer.

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

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EXHIBIT B

1. Easement, including the terms and conditions thereof, granted by instrument(s):
   Recorded: December 9, 1985
   Auditor's No(s): 8512090055, records of Skagit County, Washington
   In favor of: Public Utilities District No. 1
   For: Water pipe line
   Affects: A portion of said premises

2. Covenants, conditions, restrictions, recitals, reservations, easements, easement provisions, dedications, building setback lines, notes and statements, if any, but omitting any covenants or restrictions, if any, including but not limited to those based upon race, color, religion, sex, sexual orientation, familial status, marital status, disability, handicap, national origin, ancestry, or source of income, as set forth in applicable state or federal laws, except to the extent that said covenant or restriction is permitted by applicable law, as set forth on CITY OF MOUNT VERNON SHORT PLAT NO. MV-20-81:
   Recording No: 8110280008

3. Agreement and Easement, including the terms and conditions thereof; entered into:
   By: Burr C. Reeve and Esther C. Reeve, husband and wife
   And Between: Cedar Development Corp, et al
   Recorded: October 4, 1989
   Auditor's No.: 8910040097, records of Skagit County, Washington
   Providing: Easement Agreement relating to roadway, drainage and utilities

   AMENDED by instrument(s):

   Recorded: June 14, 1993
   Auditor's No.: 9306140111, records of Skagit County, Washington

   Recorded: June 14, 1993
   Auditor's No.: 9306140112, records of Skagit County, Washington

4. Agreement and Easement, including the terms and conditions thereof; entered into:
   By: Sea-Van Investment Associates
   And Between: Burr C. Reeve and Esther E. Reeve
   Recorded: June 14, 1993
   Auditor's No.: 9306140119, records of Skagit County, Washington
   Providing: Easement Relocation Agreement

5. Easement, including the terms and conditions thereof, granted by instrument(s):

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Recorded:	October 30, 2006
Auditor's No(s).:	200610300144, records of Skagit County, Washington
In favor of:	Puget Sound Energy, Inc.
For:	Electric transmission and/or distribution line, together with necessary appurtenances

6. Easement(s) for the purpose(s) shown below and rights incidental thereto, as granted in a document:

Granted to:	Public Utility District No. 1 of Skagit County
Purpose:	Pipe Line(s)
Recording Date:	December 9, 1985
Recording No.:	8512090055
Affects:	Portion of said premises

We note an Easement Agreement Relating to Roadway, Drainage and Utilities recorded under Auditor's File No. 8910040097.

7. Resolution No. 900 including the terms, covenants and provisions thereof

Recording Date:	January 25, 2016
Recording No.:	201601250025

8. Easement(s) for the purpose(s) shown below and rights incidental thereto as set forth in a document:

In favor of:
Purpose:
Recording Date:
Recording No.:
Affects:

9. Covenants, conditions, restrictions, recitals, reservations, easements, easement provisions, dedications, building setback lines, notes, statements, and other matters, if any, but omitting any covenants or restrictions, if any, including but not limited to those based upon race, color, religion, set, sexual orientation, familial status, marital status, disability, handicap, national origin, ancestry, or source of income as set forth in applicable state or federal laws, except to the extent that said covenant or restriction is permitted by applicable law, as set forth on Montreaux Phase 2 Planned Unit Development:

Recording No: 201904050014

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10. Covenants, conditions and restrictions but omitting any covenants or restrictions, if any, including but not limited to those based upon race, color, religion, sex, sexual orientation, familial status, marital status, disability, handicap, national origin, ancestry, source of income, gender, gender identity, gender expression, medical condition or genetic information, as set forth in applicable state or federal laws, except to the extent that said covenant or restriction is permitted by applicable law, as set forth in the document.

    Recording Date: April 5, 2019
    Recording No.: 201904050015

    Modification(s) of said covenants, conditions and restrictions

    Recording Date: September 25, 2019
    Recording No.: 201909250093

11. Any unpaid assessments or charges and liability to further assessments or charges, for which a lien may have arisen (or may arise), all as provided for in instrument set forth below:

    Imposed by: Montreaux West Homeowners Association
    Recording Date: April 5, 2019
    Recording No.: 201904050015

12. Agreement for Planned Unit Development

    Grantor: Montreaux Inc, a Washington Corporation
    Grantee: City of Mount Vernon, a Municipal Corporation
    Recording Date: April 5, 2019
    Recording No.: 201904050016

13. Assessments, if any, levied by the City of Mount Vernon.

14. Assessments, if any, levied by Montreaux West Homeowners Association.

15. City, county or local improvement district assessments, if any.

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