

STATE OF WASHINGTON DEPARTMENT OF HEALTH

856
LOCAL FILE NUMBER

116929

CERTIFICATE OF DEATH

BOOK 137 PAGE 187
146

STATE FILE NUMBER

1. NAME First Middle Last JAMES THOMAS STOUT				2. SEX (M / F) Male		3. DEATH DATE (Mo Day Yr) June 26, 1993	
4. AGE LAST BIRTH DAY (Yr) 71		5. UNDER 1 YEAR Mo Days Yrs 11 11 11		6. UNDER 1 DAY Mo Days Yrs 11 11 11		7. BIRTH DATE (Mo Day Yr) July 29, 1921	
8. BIRTH PLACE (City, State or Foreign Country) Springfield, Tenn.		9. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes / No) Yes		10. COUNTY OF DEATH Clark			
11. CITY, TOWN OR LOCATION OF DEATH Vancouver				12. PLACE OF DEATH—BE BOX FOR PLACE THEN GIVE ADDRESS OR INSTITUTION NAME 1 <input type="checkbox"/> HOME 2 <input type="checkbox"/> IN TRANSPORT 3 <input type="checkbox"/> EMERG. RM. 4 <input checked="" type="checkbox"/> HOSP. 5 <input type="checkbox"/> NUR. HOME 6 <input type="checkbox"/> OTHER PLACE Southwest Washington Medical Center			
13. SURVIVING SPOUSE (If only give maiden name) Myrna Duffy		14. SOCIAL SECURITY NO. [REDACTED]		15. DECEASED'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (10-12) 12 College (13-16) 12			
16. MARITAL STATUS—Married Never Married Widowed Divorced (Specify) Married		17. USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED) Electrician		18. KIND OF BUSINESS OR INDUSTRY Reynolds Metal		19. Was Decedent of Hispanic origin or descent? (Ancestry) (Specify Yes or No. If Yes, specify Cuban, Mexican, Puerto Rican, etc.) (Yes / No) Specify No	
20. RACE (Specify) White		21. RESIDENCE—NUMBER AND STREET 4107 Spruce St.		22. CITY/TOWN OR LOCATION Vancouver		23. INSIDE CITY LIMITS? (Yes / No) Yes	
24. COUNTY Clark		25. LENGTH OF RES. IN CO. 20yrs		26. STATE Wa.		27. ZIP CODE 98660	
28. FATHER'S NAME—FIRST, MIDDLE, LAST Harvey Stout				29. MOTHER'S NAME—FIRST, MIDDLE, MAIDEN SURNAME Louise Durham			
30. INFORMANT—NAME Myrna D. Stout-Spouse				31. MAILING ADDRESS—STREET OR RFD NO. CITY OR TOWN STATE ZIP 4107 Spruce St. Vancouver, Wa. 98660			
32. BURIAL CREMATION REMOVAL OTHER (Specify) Burial		33. DATE (Mo Day Yr) June 30, 1993		34. CEMETERY/CREMATORY—NAME Park Hill Cemetery		35. LOCATION—CITY/TOWN STATE Vancouver, Washington	
36. FUNERAL DIRECTOR'S SIGNATURE Robert H. Hamilton		37. NAME OF FACILITY Hamilton-Mylan Funeral Home, Inc.		38. ADDRESS OF FACILITY 302 W. 11th Street Vancouver, Washington 98660			
39. TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED SIGNATURE AND TITLE X Thomas R. Kovaric, M.D.				40. ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION, IN MY OPINION DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED SIGNATURE AND TITLE X [Signature]			
41. DATE SIGNED (Mo. Day Yr) 6/28/93		42. HOUR OF DEATH (24 Hrs) 19:11		43. DATE SIGNED (Mo. Day Yr) 6/28/93		44. HOUR OF DEATH (24 Hrs) 19:11	
45. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) Thomas R. Kovaric, M.D. 700 N.E. 87th Avenue Vancouver, Wa. 98664				46. PRONOUNCED DEAD (Mo. Day Yr) 6/28/93			
47. NAME AND ADDRESS OF CERTIFIER—PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print) Thomas R. Kovaric, M.D. 700 N.E. 87th Avenue Vancouver, Wa. 98664				48. MEDICORNER FILE NUMBER [REDACTED]			
49. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH.							
IMMEDIATE CAUSE (Final disease or condition resulting in death) Myocardial infarction		DO NOT ENTER THE MODE OF DYING SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST Aortic stenosis		50. OTHER SIGNIFICANT CONDITIONS—CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN ABOVE None		51. AUTOPSY? (Yes / No) No	
52. ACC. SUICIDE, HOMICIDE, UNDET. OR PENDING INVEST. (Specify) None		53. INJURY DATE (Mo. Day Yr) 6/26/93		54. HOUR OF INJURY (24 Hrs) 19:11		55. DESCRIBE HOW INJURY OCCURRED None	
56. INJURY AT WORK? (Yes / No) No		57. PLACE OF INJURY—AT HOME, FARM, STREET, FACTORY OFFICE BLDG. ETC. (Specify) None		58. LOCATION—STREET OR RFD NO., CITY/TOWN STATE None		59. DATE RECEIVED (Mo. Day Yr) JUN 28 1993	
60. RECORD AMENDMENT (Register use only) ITEM DOCUMENTARY EVIDENCE REVIEWED BY DATE [REDACTED]		61. REGISTER SIGNATURE [Signature]		62. COUNTY TREAS. RECEIPT PAID		63. INDEXED, DIR. INDIRECT, FILMED, MAILED Registered, Indexed, Dir. Indirect, Filmed, Mailed	

FOR INSTRUCTIONS SEE BACK AND HANDBOOK

DOH 110-008 (Rev. 7/81) (Formerly DSHS 8-150)

ADOH 01-003 (5/92)

THIS IS A CERTIFIED COPY OF THE RECORD ON FILE WITH CENTER FOR HEALTH STATISTICS. CERTIFIED COPIES MUST HAVE THE OFFICIAL SEAL.

FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TITLE

COPY
ORIGINAL FILED

JUL 13 1993

JoAnne McBride, Clerk, Clark Co

AUG 6 3 51 PM '93
P. Lowry
AUDITOR
GARY M. OLSON

BOOK 137 PAGE 188

IN THE SUPERIOR COURT OF WASHINGTON FOR CLARK COUNTY

In the Estate of:

JAMES T. STOUT,

Deceased.

NO. 93 4 00418 5

ORDER:

- 1) PROBATING WILL AND
APPOINTING PERSONAL
REPRESENTATIVE WITHOUT
BOND;
- 2) ADJUDICATING ESTATE TO BE
SOLVENT
- 3) DIRECTING ADMINISTRATION
WITHOUT COURT INTERVENTION

The petitioner herein, having filed with the Court a petition for order probating will and appointing Personal Representative without bond, adjudicating estate to be solvent, and directing administration without Court intervention, the Court finds:

1. **Jurisdiction.** JAMES T. STOUT died a resident of Clark County, Washington on June 26, 1993, leaving real and personal property in this county subject to the jurisdiction of this Court.

2. **Testacy.** Decedent died testate, having duly executed his Last Will and Testament, which is dated March 27, 1975, before David C. Hutchison and Barbara J. Gallagher, competent witnesses. The testimony of said witnesses was reduced to writing at the time of

ORDERS - 1

BLAIR, SCHAEFER, HUTCHISON & WOLFE
ATTORNEYS AT LAW
1014 FRANKLIN STREET
POST OFFICE BOX 1148
VANCOUVER, WASHINGTON 98666
TELEPHONE (206) 693 5883 -- PORTLAND (503) 285 4103

Glenda J. Kimmel, Skamania County Assessor
By: *[Signature]*
Parcel # 010505-80060701
82-93

1 the execution of the Will and is attached to the Will. The
2 testimony of said witnesses is accepted as sufficient testimony in
3 proof of the Will.

4 3. **Heirs and Beneficiaries.** The heirs and beneficiaries
5 named in the Will and the heirs of the decedent are listed on the
6 attached schedule, marked Schedule "A".

7 4. **Personal Representative.** The Petitioner resides in the
8 State of Washington, and the Personal Representative nominated and
9 appointed by the decedent in his will to act and is willing and
10 qualified to act.

11 5. **Decedent's Estate Solvent.** Petitioner is well
12 acquainted with all of the decedent's financial affairs. Decedent's
13 estate consists of real and personal property which has a value in
14 excess of \$ 50,000.00 . To the best of Petitioner's knowledge,
15 decedent's debts, including funeral and medical expenses, are not
16 expected to exceed a maximum of \$ 6,000.00 and have either been
17 paid or provided for. The estate of the decedent is fully solvent.

18 NOW, THEREFORE, IT IS HEREBY ORDERED, ADJUDGED AND DECREED as
19 follows:

- 20 a. Said Will is hereby admitted to probate;
- 21 b. Myrna D. Stout is confirmed as Personal Representative,
22 to serve without bond, upon filing oath;
- 23 c. That Letters Testamentary be issued to the Petitioner;
- 24 d. That the estate is declared to be fully solvent; and
- 25 e. That further administration hereof shall be handled in
26 accordance with the laws of the State of Washington pertaining to

ORDERS - 2

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1014 FRANKLIN STREET
POST OFFICE BOX 1149
VANCOUVER, WASHINGTON 98666
TELEPHONE (206) 693 5883 - PORTLAND (503) 285 4103

1 the settlement of estates without the further intervention of any
2 court.

3 DATED this 12 day of July, 1993.

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JUDGE

Presented by:

David C. Hutchison, WSBA #01660
Of Attorneys for Personal
Representative

ORDERS - 3

BLAIR, SCHAEFER, HUTCHISON & WOLFE
ATTORNEYS AT LAW
1014 PRAIRIE STREET
POST OFFICE BOX 1143
VANCOUVER, WASHINGTON 98666
TELEPHONE (206) 693 5883 - PORTLAND (503) 285 4103

SCHEDULE "A"
HEIRS OF DECEDENT
AND DISTRIBUTEES UNDER THE WILL

<u>NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AGE</u>	<u>SHARE</u>
Myrna D. Stout 4107 Spruce Vancouver, WA 98660	Surviving spouse	Maj.	100% of residue
Dorris Corvin 1047 Walnut Wood Court Los Banos, CA 93635	Daughter	Maj.	1/4 of inheritance of decedent's mother
James Harvey Stout 1528 Springvale Rd. Chattanooga, TN 37412	Son	Maj.	1/4 of inheritance of decedent's mother
JoAnn Taylor (referred to in Will as JoAnn Ramsey) 1730 Austell Rd. Marietta, GA 30060	Daughter	Maj.	1/4 of inheritance of decedent's mother
Linda Ruth Lee 341 Frawley Rd. Chattanooga, TN 37412	Daughter	Maj.	1/4 of inheritance of decedent's mother
Darla R. Raynor 5512 NE 45th St. Vancouver, WA 98661	Daughter of surv. spouse	Maj.	None
Diana Armstrong (referred to in Will as Dianna Blevins) 5228 Ocean Beach Highway Longview, WA 98632	Daughter of surv. spouse	Maj.	None

SCHEDULE "A"

COPY
ORIGINAL FILED

JUL 13 1993

JoAnne McBride, Clerk, Clark Co

Last Will and Testament

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OF

JAMES T. STOUT

I, JAMES T. STOUT, of Clark County, Washington, presently residing at 4107 Spruce, Vancouver, being over the age of majority, of sound and disposing mind and memory, and not acting under any duress, menace, fraud or undue influence, do make, publish and declare this to be my Last Will and Testament, hereby annulling, canceling and revoking any and all former wills and codicils thereto made by me at any time.

ARTICLE I. GENERAL MATTERS AND INFORMATION

Section 1. Family. My family consists of my wife, Myrna D. Stout, and my four children by a previous marriage, Doris Corvin, whose present address is 3456 Sagewood Lane, San Jose, California; James Stout, Jr., whose present address is 1717 South Seminole Drive, Chattanooga, Tennessee; JoAnn Ramsey, whose present address is 3915 Conner Street, Chattanooga, Tennessee; and Linda Ruth Lee, who presently resides in Chattanooga, Tennessee. I have no other children, either natural or adopted. My wife has two children by a previous marriage, Darla R. Raynor, whose present address is 700 NW Sluman Road, Vancouver, Washington; and Dianna Blevins, whose present address is 5516 Mt. Solo Road, Longview, Washington.

Section 2. Payment of Debts. I hereby direct and order that all just debts for which proper claims are filed against my estate and the expenses of my last illness and funeral be paid by my personal representative as soon after my death as is practicable; provided, however, that this direction shall not authorize any creditor to require payment of any debt or obligation prior to its normal maturity in due course.

Section 3. Social Security Number. My Social Security Number is

410-28-9027

ARTICLE II. PERSONAL REPRESENTATIVE

Section 1. Appointment. I hereby appoint my wife, Myrna D. Stout, as my personal representative to administer this my Last Will and Testament, if she survives me. In the event that she fails to survive me or in the event that we die simultaneously or as a result of a common disaster, or she is unable or unwilling to act for any reason, then I hereby appoint Dorris June Corvin to act as my personal representative.

Section 2. Court Intervention. I direct that my estate be settled in the manner provided for in this will without the intervention of any court or courts insofar as may be conformable to law, it being my intention that my estate be settled in accordance with Chapter 11.68 of the Revised Code of Washington, and such acts and decisions as may be amendatory or declaratory thereof.

Section 3. Powers. Without limiting the generality of the foregoing, my personal representative or the successor or substitute shall, in carrying out the provisions of this will, and in otherwise administering my estate, have full and plenary power, authority and discretion without court authorization, confirmation or in-

Testator's Initials J. T. S.

Date 2-27-75

SW

intervention to do all that may to her seem necessary or desirable in managing, conserving and distributing the assets of my estate during the administration thereof.

Section 4. Bond. I direct that no bond be required of my personal representative or the successor or substitute in this or in any other jurisdiction.

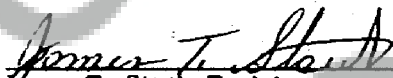
ARTICLE III. DISPOSITION OF PROPERTY

Section 1. Specific Bequest. There is a possibility that I may inherit property from my mother, Flossie Vester. In the event that any of such inheritance is identifiable at the time of my death, then I hereby give, devise and bequeath said property to my children, Doris Corvin, James Stout, Jr., JoAnn Ramsey, and Linda Ruth Lee, or the survivors of them, to be divided among them equally, share and share alike. In the event that all of my four children should predecease me, or we should die simultaneously or as a result of a common disaster, then I hereby give, devise and bequeath such inheritance to their living legal descendants by right of representation.

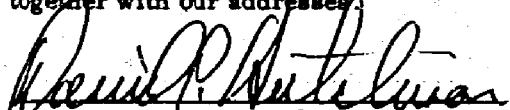
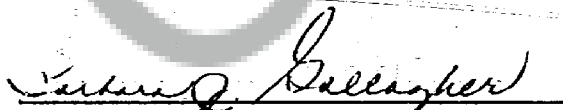
Section 2. Principal Beneficiary. I hereby give, devise and bequeath to my wife, Myrna D. Stout, if she survives me, all of the rest, residue and remainder of the property which I may own in full or in part or to which I may be entitled at the time of my death, real, personal and mixed, and wherever situated, including therein all property with respect to which I may then have any power of appointment.

Section 3. Contingent Beneficiaries. In the event that my wife, Myrna D. Stout, falls to survive me, or in the event that we die simultaneously or as a result of a common disaster, then I give, devise and bequeath all of the rest, residue and remainder of the property which I may own, in whole or in part, or to which I may be entitled at the time of my death, real, personal, and mixed, and wherever situated, including therein all property with respect to which I may then have any power of appointment, to my children, Doris Corvin, James Stout, Jr., JoAnn Ramsey, and Linda Ruth Lee, and to my wife's children, Darla R. Raynor and Dianna Blevins, or to the survivor (or survivors) of them at the time of my death, to be divided between (or among) them equally as the case may be, share and share alike.

IN WITNESS WHEREOF, I have hereto set my hand this 29th day of March, 1975, at Vancouver, Clark County, Washington.


James T. Stout, Testator

The foregoing instrument, consisting of three (3) pages, including the attached Request of Testator and Affidavit for Proof of Will, was on this 27th day of March, 1975, signed by James T. Stout and declared by him to be his Last Will and Testament, in the presence of us, the undersigned, who, at his request and in his presence and in the presence of each other, and believing him to be of sound and disposing mind and memory, and not acting under any duress, menace, fraud or undue influence, have subscribed our names as witnesses to such Last Will and Testament, together with our addresses:

 
Address 1014 Franklin Address 5605 NE 118th St.
Vancouver, Washington Vancouver, Washington

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James T. Stout
James T. Stout

above and is made to comply with RCW 11.20.020.

Robert P. Hutcheon Barbara J. Gallagher

Ronald M. Dodge
Notary Public in and for the State of
Washington, residing at Vancouver.

- 3 -