

127546

BOOK 163 PAGE 270

RETURN ADDRESS

STEVEN M. Sowards
P.O. Box 5
Battle Ground, Wa 98604

FILED
SEALED
BY *Boyd, Gaffney
Sowards etc.*
MAR 11 4 23 PM '97
Olson
AUDITOR
GARY H. OLSON

Please Print neatly or Type information
DOCUMENT TITLE(S)

*Community Property Agreement
Death Certificate*

REFERENCE NUMBER(S) OF RELATED DOCUMENT(S)

Additional Reference #'s on page

GRANTOR(S)

Lingo, William

Additional Grantors on page

GRANTEE(S)

Lingo, Inez

Additional Grantees on page #

LEGAL DESCRIPTION (abbreviated form: i.e. lot, block, plat or section, township, range, quarter/quarter)

Lots 6, 7, 8 Parker Tracts

Additional Legal is on page #

ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER

Additional Parcel #'s on page

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

18657
REAL ESTATE EXCISE TAX

MAR 11 1997
PAID *exempt*

SKAMANIA COUNTY TREASURER

FILED
MAR 11 1997
GARY H. OLSON
AUDITOR

00694

COMMUNITY PROPERTY AGREEMENT

C 605343

827753

THIS AGREEMENT, made and entered into this 5th day of MAY, 1972, by and between WILLIAM W. LINGO and INEZ I. LINGO, husband and wife, residing at Vancouver, in the County of Clark, State of Washington,

WITNESSETH:

That whereas it is the desire, purpose and intention of WILLIAM W. LINGO and INEZ I. LINGO, husband and wife, to jointly enter into an agreement concerning the disposition of the whole of the community property, wheresoever situated, now owned or hereafter at anytime acquired by them, to take effect upon the death of either of them, whereby all of the said property shall pass without delay or expense at the death of either to the survivor of either. It is understood and agreed that all property owned by the parties herein is considered as Community Property and that neither party is possessed of any separate property.

Now, therefore, for and in consideration of the love and affection they bear one toward the other, and for and in consideration of the commingling of their joint efforts and earnings and properties heretofore, it is hereby agreed between the undersigned spouses as follows:

FIRST: That all property of whatsoever nature or description, whether real, personal or mixed and wheresoever situated, now owned or hereafter acquired by them or by either of them, including any separate property, shall be considered and is hereby declared to be Community Property, and each conveys and quitclaims to the other his or her interest in any separate property he or she may now own or hereafter acquire so as to convert the same as community property.

SECOND: That upon the death of either of the parties hereto, title to all community property as defined in the preceding paragraph shall immediately vest in fee simple in the survivor of them, absolutely and unconditionally as the separate property and estate of the survivor.

Gary M. Martin, Shumway County Assessor
Date 5/14/72 Percl B. 25-21-1-60
JML

BOOK -163- PAGE 272
827754

IN WITNESS WHEREOF, the said WILLIAM W. LINGO and INEZ I. LINGO,
have executed this agreement on the date and year in this agreement first
above written.

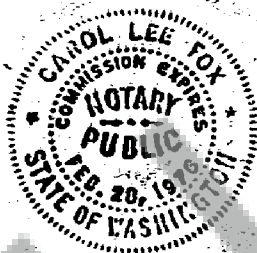
William W. Lingo

Inez I. Lingo

STATE OF WASHINGTON)
County of Clark) ss.

This certifies that on this 5th day of MAY, 1972, personally
appeared before me William W. Lingo and Inez I. Lingo, to me known to be the
individuals who executed the foregoing instrument, and acknowledged that they
signed the same as their free and voluntary act and deed for the uses and purposes
therein mentioned.

WITNESS my hand and official seal the day and year the certificate
first above written.



Carol Lee Fox
Notary Public in and for the State of
Washington, residing at Battle Ground.

RECORDED FOR RECORD

John Fox
JUN 21 9 23 AM '72

AUDITOR DON BUNKER

CERTIFICATE OF DEATH

BOOK 163 PAGE 273

Vital Records Unit

FOR ANNOTATION
SEE
HANDBOOK

DECEDENT

IF DEATH
OCCURRED IN
INSTITUTION
SEE HANDBOOK
RECORDING
COMPLETION OF
RESIDENCE ITEMS

DISPOSITION

1
2
3

CERTIFIER

CONDITIONS
IF ANY
WHICH HAVE
BORN TO
IMMEDIATE
CAUSE
STATING THE
UNDERLYING
CAUSE LAST

CAUSE OF
DEATH

DECEASED—NAME First Middle Last WILLIAM WOODROW LINGO		State File Number 2 November 26, 1953	
1 RACE White, Black, American Indian, etc. (Specify)	2 SEX Male	3 AGE—Last birthday 66	4 DATE OF BIRTH (month, day, year) 6 March 13, 1917
5 CITY, TOWN OR LOCATION OF DEATH Portland	6 HOSPITAL OR OTHER INSTITUTION—NAME (If not in either, give street and number) St. Vincent Hospital	7 F HOSP. OR INST. Indicate DOA, OP, Emer., Am., Inpatient (Specify) Inpatient	8 COUNTY OF DEATH Washington
9 STATE OF BIRTH (If not in U.S., name country) Washington	10 CITIZEN OF WHAT COUNTRY U.S.A.	11 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married	12 SPOUSE (If married, widowed) Inez I. (Smith)
13 SOCIAL SECURITY NUMBER [REDACTED]	14 USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Retired Locomotive Engineer	15 KIND OF BUSINESS OR INDUSTRY Burlington-Northern Railroad	16 WAS DECEDENT EVER IN U.S. ARMED FORCES? (Specify Yes or No) No
17 RESIDENCE—STATE Washington	18 COUNTY Clark	19 CITY, TOWN OR LOCATION Vancouver	20 STREET AND NUMBER OR R.F.D., ZIP 2912 Weigel Avenue 98660
21 FATHER—NAME first middle last Elmer Lingo	22 MOTHER—Name first middle last (Piendl) Beatrice E. Lingo	23 INFORMANT—NAME and relationship to decedent Mrs. Inez I. Lingo (wife)	24 LOCATION city or town state Vancouver, Washington
25 BURIAL, CREMATION, RESURRACTION, NAME (Specify) Burial	26 CEMETERY OR CREMATORY—NAME Evergreen Memorial Gardens	27 NAME AND ADDRESS OF FACILITY Hamilton-Mylan Funeral Home, Inc., 302 West 11th Street, Vancouver, Washington 98660-3197	28 DATE SIGNED (Mo., Day, Yr.) 11/30/83
29 NAME AND ADDRESS OF CERTIFIER (Type or Print) Richard A. Buckingham, M.D., 800 S.W. 13th Avenue, Portland, Oregon 97205	30 NAME AND ADDRESS OF PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)	31 DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) DEC 6 1983	32 REGISTRAR [Signature]
23 IMMEDIATE CAUSE (a) Myocardial infarction with shock		Interval between onset and death hours	
(b) Chronic coronary heart infection		Interval between onset and death months	
(c) Coronary artery disease, recurrent		Interval between onset and death 2 years	
PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not related to cause given in PART I (a)			
33 ACCIDENT (Specify Yes or No)	34 DATE OF INJURY (Mo., Day, Yr.)	35 HOUR OF INJURY	36 DESCRIBE HOW INJURY OCCURRED
37 INJURY AT WORK (Specify Yes or No)	38 PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)	39 LOCATION	40 STREET OR R.F.D. NO. CITY OR TOWN STATE

STATE OF OREGON, COUNTY OF WASHINGTON)ss

DATE ISSUED
DEC 6 1983

I HEREBY CERTIFY THAT THE FOREGOING COPY HAS BEEN COMPARED BY ME WITH THE ORIGINAL DOCUMENT AND IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE AS RECORDED IN THE VITAL STATISTICS SECTION OF THE WASHINGTON COUNTY DEPARTMENT OF PUBLIC HEALTH AND ON PERMANENT FILE WITH THE OREGON STATE HEALTH DIVISION.

REGISTRAR

Audrey Winters

NOT VALID WITHOUT RAISED SEAL OF DEPARTMENT OF PUBLIC HEALTH, WASHINGTON COUNTY

Gary H. Martin, Registrar
 Date 3/10/87
 Off 49