

136712

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## Return Address:

Winona E. Hopkins  
10412 Washington River Rd.  
Washougal, WA 98671

Winona Hopkins

NOV 2 11 35 AM '99

O'Leary

GARY

Please Print or Type Information.

Document Title(s) or transactions contained therein:	
1. Death Certificate	
2. CPA	
3.	
4.	
GRANTOR(S) (Last name, first, then first name and initials)	
1. Hopkins, Cecil C.	
2.	
3.	
4.	
<input type="checkbox"/> Additional Names on page _____ of document.	
GRANTEE(S) (Last name, first, then first name and initials)	REAL ESTATE EXCISE TAX
1. Hopkins, Winona E.	20512
2.	NOV - 2 1999
3.	PAID <u>exempt</u>
4.	<u>Washougal, Skamania</u>
<input type="checkbox"/> Additional Names on page _____ of document.	SKAMANIA COUNTY TREASURER
LEGAL DESCRIPTION (Abbreviated, I.E., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter)	
That Portion of Lots 42 + 43 of Washington Riverside Tracts	
See ATTACHED for Full Legal	
<input type="checkbox"/> Complete legal on page _____ of document.	
REFERENCE NUMBER(S) Of Documents assigned or released:	
<input type="checkbox"/> Additional numbers on page _____ of document.	
ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER	
<input checked="" type="checkbox"/> Property Tax Parcel ID is not yet assigned. 02-05-32-3-0-0-0800-00	
<input type="checkbox"/> Additional parcel #'s on page _____ of document. 02-05-32-3-0-0800-80	
The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.	

STATE OF WASHINGTON DEPARTMENT OF HEALTH											
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146											
21											
LOCAL FILE NUMBER											
CERTIFICATE OF DEATH											
STATE FILE NUMBER											
1. NAME Last First Middle <b>Gecil Charles HOPKINS</b>		2. SEX (M/F) <b>Male</b>		3. DEATH DATE (Mo, Day, Yr) <b>June 21, 1999</b>		4. AGE LAST BIRTH Date (Yr, Mo, Day) <b>79</b>		5. UNDER 1 YEAR Date (Mo, Day, Yr) <b>11/3/1919</b>		6. UNDER 1 DAY Date (Mo, Day, Yr) <b>11/3/1919</b>	
7. BIRTH PLACE (City, State or Foreign Country) <b>Tilden, NE</b>		8. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes/No) <b>Yes</b>		9. COUNTY OF DEATH <b>Skamania</b>		10. SOCIAL SECURITY NO. <b>536-12-6290</b>		11. DECEASED'S EDUCATION (Specify only highest grade completed) <b>10</b>		12. DECEASED'S RACE (Specify) <b>White</b>	
13. CITY/TOWN OR LOCATION OF DEATH <b>Washougal</b>		14. PLACE OF DEATH (If not for place then give address or institution name) <b>10412 Washougal River Rd.</b>		15. SURVIVING SPOUSE (If any give maiden name) <b>Winona Evelyn Fox</b>		16. USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED) <b>Craftmill</b>		17. KIND OF BUSINESS OR INDUSTRY <b>Paper Mill</b>		18. RESIDENCE - NUMBER AND STREET <b>10412 Washougal River Rd.</b>	
19. FATHER'S NAME - FIRST, MIDDLE, LAST <b>Robert Warren Hopkins</b>		20. MOTHER'S NAME - FIRST, MIDDLE, MAIDEN SURNAME <b>Edna Augusta Libby</b>		21. CITY/TOWN OR LOCATION <b>Washougal</b>		22. STATE <b>WA</b>		23. ZIP CODE <b>98671</b>		24. LENGTH OF RES. IN CO. <b>25 Yrs</b>	
25. BIRTH DATE (Mo, Day, Yr) <b>6/25/1919</b>		26. CEMETERY/CREMATORY - NAME <b>Fern Prairie Cemetery</b>		27. LOCATION - CITY/TOWN, STATE <b>Gamas, Washington</b>		28. ADDRESS OF FACILITY <b>325 NE 3rd Ave</b>		29. ADDRESS OF FACILITY <b>Gamas, WA 98607</b>		30. TO BE COMPLETED ONLY BY CERTIFYING PHYSICIAN	
31. SIGNATURE AND TITLE <b>Allen Alexander, MD</b>		32. DATE SIGNED (Mo, Day, Yr) <b>6-23-99</b>		33. HOUR OF DEATH (24 Hrs) <b>2235</b>		34. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) <b>Allen Alexander, MD</b>		35. ADDRESS OF CERTIFIER - PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print) <b>16701 SE McGillivray Blvd. Vancouver, WA 98681</b>		36. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH.	
37. IMMEDIATE CAUSE (Final disease or condition resulting in death) <b>metastatic carcinoma of prostate</b>		38. 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.		39. DUE TO OR AS A CONSEQUENCE OF <b>Gary H. Martin, Skamania County Assessor</b>		40. DATE <b>11-2-98</b>		41. PARCEL # <b>02 05 32 3 0080 00</b>		42. INTERVAL BETWEEN ONSET AND DEATH <b>16 mths</b>	
43. OTHER SIGNIFICANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN ABOVE		44. ACC. SUICIDE, HOW, UNDER OR PENDING INVEST. (Specify)		45. INJURY DATE (Mo, Day, Yr)		46. HOUR OF INJURY (24 Hrs)		47. PLACE OF INJURY - AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG ETC. (Specify)		48. LOCAL STREET OR RD NO., CITY/TOWN, STATE	
49. RECORD AMENDMENT (Preparer use only) ITEM DOCUMENT BY REVIEWED BY DATE		50. RE-STATE SIGNATURE <b>Kevin Stenjaert, MD</b>		51. DATE RECEIVED (Mo, Day, Yr) <b>7/2/99</b>		52. AUTOPSY? (Yes/No) <b>NO</b>		53. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes/No) <b>NO</b>		54. THIS CERTIFICATE IS TO BE RECORDED IN THE DEPARTMENT OF HEALTH RECORDS. IT IS THE OFFICIAL COPY.	



COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT, made this day by and between CECIL CHARLES HOPKINS and WINONA EVELYN HOPKINS, both of Clark County, Washington,

WITNESSETH:

That whereas said CECIL CHARLES HOPKINS and WINONA EVELYN HOPKINS are the owners of certain community and separate property, and whereas all of the property now owned, or which shall come into the possession of either hereafter, is hereby declared to be the community property of the said CECIL CHARLES HOPKINS and WINONA EVELYN HOPKINS, and whereas said parties are desirous of providing for the disposition of said property upon the death of either, under and by virtue of and in conformity with the provisions of Section 26.18.120, Revised Code of Washington, and to provide that said property and all other property of which either may die possessed, both real and personal and wherever situate, shall pass without delay or expense in case of the death of either of said parties to the survivor:

NOW, THEREFORE, in consideration of the love and affection that each of said parties has for the other, IT IS HEREBY AGREED:

I

That all property now owned or hereafter acquired by the parties hereto, or by either of them, whether separate or community, is hereby conveyed and converted into community property and hereafter shall be deemed community property for all purposes under the laws of the State of Washington.

II

That in case of the death of the said CECIL CHARLES HOPKINS, leaving the said WINONA EVELYN HOPKINS surviving, the whole of the said property hereinbefore described, together with any other property by them hereafter acquired, shall at once vest in the said WINONA EVELYN HOPKINS, in fee simple, as her sole and separate property; and in case of the death of the said WINONA EVELYN HOPKINS, leaving the

Community Property Agreement:

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said CECIL CHARLES HOPKINS surviving, the whole of said property hereinbefore described, together with any other property by them hereafter acquired, shall at once vest in the said CECIL CHARLES HOPKINS, in fee simple, as his sole and separate property.

IN WITNESS WHEREOF, the said parties have hereunto set their hands in duplicate this 3rd day of <sup>June</sup> ~~May~~, 1971.

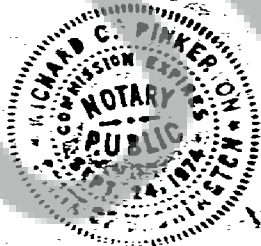
*Cecil Charles Hopkins Winona Evelyn Hopkins*

STATE OF WASHINGTON )

COUNTY OF CLARK ) ss.

On this 3rd day of <sup>June</sup> ~~May~~, 1971, before me a Notary Public in and for the State of Washington, personally appeared the above named CECIL CHARLES HOPKINS and WINONA EVELYN HOPKINS, husband and wife, and acknowledged to me that they signed, sealed and executed the above Community Property Agreement as their free act and deed, for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year in the certificate first above written.



Gary H. Martin, Skamania County Assessor

Date 11-2-99 Parcel # 0205323 00800 00  
810 0800 80

*Richard C. Pinker*  
Notary Public in and for the State of  
Washington, Residing at Camas.



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11-2-98  
That portion of Lots 42 and 43 of WASHOUGAL RIVERSIDE TRACTS according to the official plat thereof on file and record at pages 80 and 81 of Book A of Plats, records of Skamania County, Washington, described as follows:

Beginning at the Westerly corner of the said Lot 43; thence in a Southeasterly direction following the Westerly line of said lot 525 feet; thence North 48° 04' East 138.1 feet; thence North 50° 38' East 261.9 feet to intersection with the Easterly line of said Lot 42; thence in a Northwesterly direction following the Easterly line of said lot 525 feet to the Northerly corner of said lot; thence following the Northerly lines of said Lots 43 and 42 South 50° 38' West 261.9 feet and thence South 48° 04' West 138.1 feet to the point of beginning.

SUBJECT TO: Easements and rights of way for County Road No. 1106 designated as the Washougal River Road.

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