

138535

BOOK 200 PAGE 607

RETURN ADDRESS:

Nelta Paasch
192 Erickson Rd.
Stevenson, WA 98648

Nelta Paasch
JUL 7 2000
Q Lowry
GARFIELD COUNTY

Please Print or Type Information.

Document Title(s) or transactions contained therein:

1. Death Certificate
2. _____
3. _____
4. _____

GRANTOR(S) (Last name, first, then first name and initials)

1. Paasch, August Michael
2. _____
3. _____
4. _____

☐ Additional Names on Page _____ of Document.

GRANTEE(S) (Last name, first, then first name and initials)

1. Public, The
2. _____
3. _____
4. _____

☐ Additional Names on Page _____ of Document.

REAL ESTATE EXCISE TAX

20930

JUL - 7 2000

PAID Exempt

SKAMANIA COUNTY TREASURER

LEGAL DESCRIPTION (Abbreviated: i.e., Lot, Block, Plat or Section Township, Range, Quarter:Quarter)

Section 26, T3N R8E

☐ Complete Legal on Page 2 of Document.

REFERENCE NUMBER(S) Of Document assigned or released:

☐ Additional Numbers on Page _____ of Document.

ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER

3-8-26-300

☐ Property Tax parcel ID is not yet assigned.

☐ Additional Parcel Numbers on Page _____ of Document.

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									
05					BOOK 200 PAGE 608				
LOCAL FILE NUMBER					146				
CERTIFICATE OF DEATH					STATE FILE NUMBER				
1. NAME		First		Middle		Last		2. SEX (M/F)	
August		Michael		PAASCH		M		3. DEATH DATE (Mo Day Yr)	
86		7/30/1912		Pine Grove, OR		NO		Jan. 7, 1999	
4. AGE LAST BIRTH DAY (Yr)		5. UNDER 1 YEAR		6. UNDER 1 DAY		7. BIRTH DATE (Mo Day Yr)		8. BIRTH PLACE (City, State or Foreign Country)	
86		NO		NO		7/30/1912		Pine Grove, OR	
9. CITY, TOWN OR LOCATION OF DEATH		10. PLACE OF DEATH		11. PLACE OF DEATH		12. PLACE OF DEATH		13. COUNTY OF DEATH	
Stevenson		192 Erickson Road		192 Erickson Road		192 Erickson Road		Skamania	
14. MARITAL STATUS (Married, Single, Widowed, Divorced)		15. SURVIVING SPOUSE (Name and address)		16. SOCIAL SECURITY NO.		17. DECEASED'S EDUCATION (Specify only highest grade completed)		18. RACE (Specify)	
Married		Nelta A. Barnes				8		White	
19. USUAL OCCUPATION (If kind of work done during most of working life, DO NOT USE RETIRED)		20. KIND OF BUSINESS OR INDUSTRY		21. Was Decedent of Hispanic origin or descent? (Specify race or ethnicity)		22. RACE (Specify)		23. LENGTH OF RES. IN CO.	
Truck driver		County Road Dept.		No		White		53 yrs WA	
24. RESIDENCE (Number and street)		25. CITY, TOWN OR LOCATION		26. COUNTY		27. STATE		28. ZIP CODE	
192 Erickson Road		Stevenson		No		Skamania		98648	
29. FATHER'S NAME - FIRST MIDDLE LAST		30. MOTHER'S NAME - FIRST MIDDLE MAIDEN SURNAME		31. INFORMANT - NAME		32. MAILING ADDRESS		33. CITY OR TOWN	
Fred - Paasch		Mary - Altman		Nelta A. Paasch		192 Erickson Road		Stevenson, WA	
34. BIRTH DATE (Mo Day Yr)		35. CEMETERY/CREMATORY NAME		36. LOCATION - CITY/TOWN/STATE		37. ADDRESS OF FACILITY		38. ADDRESS OF FACILITY	
1/11/1999		Win-quatt Crematory		The Dalles, Oregon		POB 390		White Salmon, WA 98672	
39. NAME OF FACILITY		40. NAME OF FACILITY		41. NAME OF FACILITY		42. NAME OF FACILITY		43. NAME OF FACILITY	
GARDNER FUNERAL HOME		GARDNER FUNERAL HOME		GARDNER FUNERAL HOME		GARDNER FUNERAL HOME		GARDNER FUNERAL HOME	
44. TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED		45. 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		46. SIGNATURE AND TITLE		47. SIGNATURE AND TITLE		48. SIGNATURE AND TITLE	
X		X		X		X		X	
49. DATE SIGNED (Mo Day Yr)		50. HOUR OF DEATH (24 Hrs)		51. DATE SIGNED (Mo Day Yr)		52. HOUR OF DEATH (24 Hrs)		53. DATE SIGNED (Mo Day Yr)	
1-11-1999		11:15							
54. NAME AND TITLE OF ATTENDING PHYSICIAN (If other than certifier, Type or Print)		55. PRONOUNCED DEAD (Mo Day Yr)		56. HOUR PRONOUNCED DEAD (24 Hrs)		57. NAME AND ADDRESS OF CERTIFIER - PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print)		58. MFCORONER FILE NUMBER	
						Paul Hamada, M.D. 1784 May St. Hood River, OR 97031			
59. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH		60. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH		61. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH		62. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH		63. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH	
IMMEDIATE CAUSE (Final disease or condition resulting in death)		A. CHRONIC RENAL FAILURE		B. CHRONIC RENAL FAILURE		C. CHRONIC RENAL FAILURE		D. CHRONIC RENAL FAILURE	
DO NOT ENTER THE MODE OF DYING, SUCH AS CHOKING OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE OF DEATH LINE.		DUE TO OR AS A CONSEQUENCE OF		DUE TO OR AS A CONSEQUENCE OF		DUE TO OR AS A CONSEQUENCE OF		DUE TO OR AS A CONSEQUENCE OF	
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST.									
64. OTHER SIGNIFICANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN ABOVE		65. AUTOPSY? (Yes/No)		66. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes/No)		67. DATE RECEIVED (Mo Day Yr)		68. DATE RECEIVED (Mo Day Yr)	
CONGESTIVE HEART FAILURE		No		Yes		1/15/99		1/15/99	
69. ADD. SUICIDE, HOMICIDE, OR PENDING INVEST. (Specify)		70. INJURY DATE (Mo Day Yr)		71. HOUR OF INJURY (24 Hrs)		72. PLACE OF INJURY - AT HOME, FARM, STREET, FACTORY, OFFICE, OR LOCATION (Specify)		73. INJURY AT WORK? (Yes/No)	
						Gary H. Martin, Skamania County Assessor		Date 7/1/00	
74. RECORD AMENDMENT (Specify or use only)		75. REVIEWED BY		76. DATE		77. SIGNATURE		78. DATE RECEIVED (Mo Day Yr)	
EVIDENCE						X		1/15/99	

A parcel of land located in Government Lot 3 of Section 26, Township 3 North, Range 8, East of the Willamette Meridian, more particularly described as:

Beginning at a point in the center of the county road known and designated Erickson Road, No. 32260, said point lying North 60 degrees 22' 55" East, 1,065.58 feet from the southwest corner of Section 26, Township 3 North, Range 8 E.W.M.; thence North 0 degrees 16' 57" West, 20.00 feet; thence North 77 degrees 40' 41" East, 291.00 feet; thence South 33 degrees 57' 54" East, 35.00 feet to the centerline of said Erickson Road; thence westerly along the centerline of said road 319 feet more or less to the point of beginning.

Excepting existing rights of way. Gary H. Martin, Skamania County Assessor
Date 12/1/95 Parcel # 5-8-24-300

AND, that portion of Government Lots 2 and 3 and of the East half of the Southwest quarter of Section 26, Township 3 North, Range 8 E.W.M. more particularly described as follows:

Beginning at a point 8 chains North of the Southwest corner of the said Government Lot 3; thence East 13.5 chains; thence North 12 chains; thence East 12 chains; thence North 20 chains to the North line of the Southwest quarter of said Section 26; thence West to the Northwest corner of the said Government Lot 2; thence South 32 chains to the point of beginning.

ALSO, beginning at a point 528 feet North and 1,201 feet East of the Southwest corner of Section 26, Township 3 North, Range 8, E.W.M.; running thence North 792 feet; thence East 112 feet; thence in a southwesterly direction to a point 396 feet North and 66 feet East of the point of beginning; thence in a southwesterly direction to the point of beginning.

ALSO, that certain right of way granted to Ethel Hauser by Deed dated July 6, 1931, and recorded July 27, 1931, at page 39 of Book X of Deeds, Records of Skamania County, Washington.

EXCEPTING, the following described tract of land:

Beginning at a point 528 feet North and 795 feet East of the Southwest corner of Section 26, Township 3 North, Range 8, E.W.M.; running thence West 485 feet; thence North 91 feet; thence in a southeasterly direction to the point of beginning.

ALSO EXCEPT, that portion lying northerly of county road number 3271 designated as the Home Valley Cut-Off Road;

ALSO EXCEPT, that portion conveyed to Skamania County by Deed recorded August 22, 1980, in Book 78, Page 580, Auditor's File No. 91139, Skamania County Deed Records.

Said above described real property is subject to a life estate reserved to AUGUST M. PAASCH and NELTA A. PAASCH, as set forth on the Deed recorded in Book 117, Page 564 records of Skamania County, Washington.