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SKAMANIA CO. WASH  
BY CLARK COUNTY TITLE

AUG 1 12 56 PM '02

*Olson*  
AUDITOR

J MICHAEL GARVISON

**RETURN ADDRESS:**

Clark County Title Company  
1400 Washington Street  
Suite 100  
Vancouver, WA 98660

Please print or type information

OCT 65927MD

Document Title(s) (or transactions contained therein):

**AFFIDAVIT / TRUST AGREEMENT / DEATH CERTIFICATE**

**Reference Number(s) of Documents:**

Grantor(s) (Last name first, then first name and initials)

1. PAUL, CLARENCE Trustee of THE PAUL FAMILY LIVING TRUST
2. PAUL, ARLENE Trustee of THE PAUL FAMILY LIVING TRUST

3. ☐ Additional names on page of document.

Grantee(s) (Last name first, then first name and initials)

1. PAUL, ARLENE Trustee of THE PAUL FAMILY LIVING TRUST

2. ☐ Additional names on page of document.

**REAL ESTATE EXCISE TAX**

Legal description (abbreviated: i.e. lot, block, plat or section, township, range) 22412  
#101 Section 28, Township 2, Range 6

☐ Additional legal on page of document.

Assessor's Property Tax Parcel/Account Number  
02-06-20-00010100

☐ Additional on page of document.

PAID *exempt*  
*Vicki Christensen*  
SKAMANIA COUNTY TREASURER

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 provided herein.



The PAUL FAMILY Living Trust  
Article One  
Creation of Our Trust

Section 1. Our Trust

We are husband and wife. This is our Living Trust, dated AUG 16 1994, by CLARENCE L. PAUL, the husband Trustmaker, also known as CLARENCE LEROY PAUL, ARLENE E. PAUL, the wife Trustmaker, also known as ARLENE ELIZABETH PAUL and the following initial Trustees:

CLARENCE L. PAUL

ARLENE E. PAUL

Our trust is a joint revocable living trust that contains our instructions for our own well-being and that of our loved ones. All references to "our trust" or "trust," unless otherwise stated, shall refer to this Living Trust and the trusts created in it. All references to "Trustee" shall refer to our initial Trustee or Trustees, or their successor or successors in trust.

When the term "Trustmaker" is used in our trust, it shall have the same legal meaning as "Grantor," "Settlor," "Trustor," or any other term referring to the maker of a trust.

Notwithstanding anything in our trust to the contrary, when we are serving as Trustees under our trust, either of us may act for and conduct business on behalf of our trust as a Trustee without the consent of any other Trustee.

Section 2. The Name of Our Trust

For convenience, our trust shall be known as the:

PAUL FAMILY LIVING TRUST, dated

AUG 16 1994

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For purposes of beneficiary designations and transfers directly to our trust, our trust shall be referred to as:

CLARENCE L. PAUL and ARLENE E. PAUL, Trustees,  
or their successors in trust, under the PAUL FAMILY  
LIVING TRUST, dated ~~AUG 16 1994~~, and any  
amendments thereto.



distributions of net income under this agreement may remove any Trustee.

**d. Notice of Removal**

Neither of us, nor any of our beneficiaries, need not give any Trustee being removed any reason, cause, or ground for such removal.

Notice of removal shall be effective when made in writing by either:

Personally delivering notice to the Trustee and securing a written receipt, or

Mailing notice in the United States mail to the last known address of the Trustee by certified mail, return receipt requested.

**Section 3. Replacement of Trustees**

Whenever a Trustee is removed, dies, resigns, becomes legally incapacitated, or is otherwise unable or unwilling to serve, that Trustee shall be replaced as follows:

**a. The Death or Disability of a Trustee While We Are Serving as Trustees**

We may serve as the only Trustees or we may name any number of Trustees to serve with us. If any of these other Trustees subsequently die, resign, become legally incapacitated, or are otherwise unable or unwilling to serve as a Trustee, we may or may not fill the vacancy, as we both agree.

**b. Disability Trustees of CLARENCE L. PAUL**

Upon the disability of CLARENCE L. PAUL, ARLÈNE E. PAUL shall serve as disability Trustee.

If the nondisabled Trustmaker is then serving as a Trustee, she shall continue to serve upon the disability of CLARENCE L. PAUL.

If the disability Trustee is unwilling or unable to serve, or cannot continue to serve for any other reason, then the following shall be named as replacement disability Trustees in the order in which their names appear:

First, ELIZABETH A. PAUL; then

Second, MARK E. PAUL; then

Third, JANET R. BOERS and CHERYLE L. PAUL.

c. Disability Trustees of ARLENE E. PAUL

Upon the disability of ARLENE E. PAUL, CLARENCE L. PAUL shall serve as disability Trustee.

If the nondisabled Trustmaker is then serving as a Trustee, he shall continue to serve upon the disability of ARLENE E. PAUL.

If the disability Trustee is unwilling or unable to serve, or cannot continue to serve for any other reason, then the following shall be named as replacement disability Trustees in the order in which their names appear:

First, ELIZABETH A. PAUL; then

Second, MARK E. PAUL; then

Third, JANET R. BOERS and CHERYLE L. PAUL.

d. Death Trustees of CLARENCE L. PAUL

On the death of CLARENCE L. PAUL, ARLENE E. PAUL acting as our death Trustee shall replace all of our initial Trustees, if they are then serving, or all of the disability Trustees, if they are then serving.



If the surviving Trustmaker is then serving as a Trustee, she shall continue to serve upon the death of CLARENCE L. PAUL.

If the death Trustee is unwilling or unable to serve as a death Trustee, or cannot continue to serve for any other reason, then the following shall be named as successor death Trustees in the order in which their names appear:

First, ELIZABETH A. PAUL; then

Second, MARK E. PAUL; then

Third, JANET R. BOERS and CHERYLE L. PAUL.

e. Death Trustees of ARLENE E. PAUL

On the death of ARLENE E. PAUL, CLARENCE L. PAUL acting as our death Trustee shall replace all of our initial Trustees, if they are then serving, or all of the disability Trustees, if they are then serving.

If the surviving Trustmaker is then serving as a Trustee, he shall continue to serve upon the death of ARLENE E. PAUL.

If the death Trustee is unwilling or unable to serve as a Trustee, or cannot continue to serve for any other reason, then the following shall be named as successor death Trustees in the order in which their names appear:

First, ELIZABETH A. PAUL; then

Second, MARK E. PAUL; then

Third, JANET R. BOERS and CHERYLE L. PAUL.

f. Successor Trustees

A successor death Trustee shall be replaced upon death, resignation, or legal disability and the next successor death Trustee in the order named above shall serve and carry out the terms and provisions of



our trust.

A Trustee may be listed more than once in this Section or an initial Trustee may also be named as a disability Trustee or a Trustee who will serve at death. Naming a Trustee more than once is done as a convenience only and is not to be construed as a termination of that Trustee's trusteeship.

**g. Unfilled Trusteeship**

In the event no named Trustees are available, a majority of the beneficiaries then eligible to receive mandatory or discretionary distributions of net income under this agreement shall forthwith name a corporate fiduciary.

If a majority of the beneficiaries then eligible to receive mandatory or discretionary distributions of net income under this agreement cannot agree on a corporate fiduciary, any beneficiary can petition a court of competent jurisdiction, ex parte, to designate a corporate fiduciary as a Trustee.

The court that designates the successor Trustee shall not acquire any jurisdiction over any trust created under this agreement, except to the extent necessary to name a corporate fiduciary as a successor Trustee.

**Section 4. Corporate Fiduciaries**

Any corporate fiduciary named in this trust agreement or appointed by a court of competent jurisdiction as a Trustee must be a bank or trust company situated in the United States having trust powers under applicable federal or state law.

Such fiduciary shall have a combined capital and surplus of at least 10 million dollars.

**Section 5. Powers and Liabilities of Successor Trustee**

Any successor Trustee, whether corporate or individual, shall have all of the

rights, powers, and privileges, and be subject to all of the obligations and duties, both discretionary and ministerial, as given to the original Trustees.

Any successor Trustee shall be subject to any restrictions imposed on the original Trustees. No successor Trustee shall be required to examine the accounts, records, and acts of any previous Trustees.

No successor Trustee shall in any way be responsible for any act or omission to act on the part of any previous Trustees.



We have executed this agreement the day and year first written above.

We certify that we have read our foregoing revocable living trust agreement, and that it correctly states the terms and conditions under which our trust property is to be held, managed, and disposed of by our Trustee. We approve this revocable living trust in all particulars, and request our Trustee to execute it.

Clarence L. Paul  
CLARENCE L. PAUL, Trustmaker

Arlene E. Paul  
ARLENE E. PAUL, Trustmaker

Clarence L. Paul  
CLARENCE L. PAUL, Trustee

Arlene E. Paul  
ARLENE E. PAUL, Trustee

STATE OF WASHINGTON

COUNTY OF CLARK

ss.

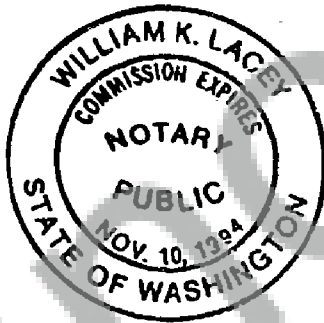
I certify that I know or have satisfactory evidence that CLARENCE L. PAUL and ARLENE E. PAUL is the person who appeared before me, and said person acknowledged that they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes mentioned in the instrument. The foregoing living trust agreement was acknowledged before me on AUG 16 1994, by CLARENCE L. PAUL and ARLENE E. PAUL, as Trustmaker and Trustee.

Witness my hand and official seal.

My commission expires:

11-10-94

William K. Lacey  
Notary Public





OFFICE  
USE  
ONLY

DISTRICT

8 &amp; VA

7 INSP. M.

4 SURVIVORS

5 HOSPITAL

6 TACE

7 OCCUPATION

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TYPE OR PRINT IN PERMANENT BLACK INK

291

LOCAL FILE NUMBER

## CERTIFICATE OF DEATH

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STATE FILE NUMBER

1. NAME First: Clarence Middle: Leroy Last: Paul		2. SEX (M/F) Male	3. DEATH DATE (Mo, Day, Yr) February 21, 2001	
4. AGE LAST BIRTHDAY (Yr, Mo, Day) 76	5. UNDER 1 YEAR MOS DAYS HOURS MIN	6. BIRTH DATE (Mo, Day, Yr) 07-03-1924	7. BIRTH PLACE (City, State or Foreign Country) Camas, Washington	
11. CITY, TOWN OR LOCATION OF DEATH Vancouver		12. PLACE OF DEATH — X HOME 2 IN TRANSPORT 3 IN HOME 4 IN INSTITUTION (Nursing Home, Hosp., etc.) 4312 NE 40th Street		
14. MARITAL STATUS — Married (Married, Widowed, Divorced, Single)		15. SURVIVORS SPOUSE (if wife, give maiden name) Arlene Belisle		
16. SOCIAL SECURITY NO.		17. DECEASED'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (12) College (14 or 16)		
18. USUAL OCCUPATION (Give level of work done during most of working life. DO NOT USE RETIRED)		19. KIND OF BUSINESS OR INDUSTRY Bonneville Power		
20. Was Decedent of Hispanic origin or descent? (Yes/No) Specify: No		21. RACE (Specify) White		
22. RESIDENCE — NUMBER AND STREET 4312 NE 40th Street		23. CITY/TOWN OR LOCATION Vancouver	24. INSIDE CITY LIMITS? (Yes/No) No	
25A. COUNTY Clark		25B. LENGTH OF RES. IN CO. 76yrs	26. STATE Wa.	
27. ZIP CODE 98661		28. FATHER'S NAME — FIRST, MIDDLE, LAST Clarence William Paul		
29. MOTHER'S NAME — FIRST, MIDDLE, MAIDEN SURNAME Margaret Marie Zulauf		30. INFORMANT — NAME Arlene E. Paul		
31. MAILING ADDRESS 4312 NE 40th Street, Vancouver, Washington 98661		32. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		
33. DATE (Mo, Day, Yr) 02-26-2001		34. CEMETERY/CREMATORY — NAME Evergreen Memorial Gardens		
35. LOCATION — CITY/TOWN, STATE Vancouver, Washington		36. ADDRESS OF FACILITY 110 E. 12th St., Vancouver, Washington 98660		
37. NAME OF FACILITY Vancouver Funeral Chapel		38. ADDRESS OF FACILITY 110 E. 12th St., Vancouver, Washington 98660		
TO BE COMPLETED ONLY BY CERTIFYING PHYSICIAN				
39. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED				
40. DATE (Mo, Day, Yr) 2/21/01				41. HOUR OF DEATH (24 Hrs) 0800
42. NAME AND TITLE OF ATTENDING PHYSICIAN (Type or Print) Dr. Jeffery E. Ford, M.D., 14406 NE 20th Ave., Vancouver, Wa. 98684				
43. 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				
44. DATE SIGNED (Mo, Day, Yr)				45. HOUR OF DEATH (24 Hrs)
46. PRONOUNCED DEAD (Mo, Day, Yr)				47. HOUR PRONOUNCED DEAD (24 Hrs)
48. NAME AND ADDRESS OF CERTIFIER — PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print) Dr. Jeffery E. Ford, M.D., 14406 NE 20th Ave., Vancouver, Wa. 98684				49. MEDICORNER FILE NUMBER
50. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH				
IMMEDIATE CAUSE (Final disease or condition resulting in death) Colon Cancer				INTERVAL BETWEEN ONSET AND DEATH 1.5 years
DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE, LIST ONLY ONE CAUSE ON EACH LINE. Sequitally list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST.				INTERVAL BETWEEN ONSET AND DEATH
51. OTHER SIGNIFICANT CONDITIONS — CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN ABOVE				INTERVAL BETWEEN ONSET AND DEATH
52. AUTOPSY? (Yes/No) No				53. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes/No) Yes
54. ACC. SUICIDE, HOMICIDE, OR PENDING INVEST. (Specify)				55. INJURY DATE (Mo, Day, Yr)
56. HOUR OF INJURY (24 Hrs)				57. DESCRIBE HOW INJURY OCCURRED
58. INJURY AT WORK? (Yes/No)				59. PLACE OF INJURY — AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG., ETC. (Specify)
60. LOCATION — STREET OR RFD NO., CITY/TOWN, STATE				61. RECORD ATTENDMENT (Registrar use only) ITEM DOCUMENTARY EVIDENCE REVIEWED BY DATE
62. REGISTRAR'S SIGNATURE Karen R. Steingart, M.D.				63. DATE RECEIVED (Mo, Day, Yr) FEB 22 2001

FOR INSTRUCTIONS SEE BACK AND HANDBOOK

DOH 110-008 Rev. 08/01/00 1595 1-10