

150349

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FILED
 SEP 19 4 03 PM '03
 J. H. H. H.
 Larry Birkenfeld
 P. Lowry

Return Address:

Larry Birkenfeld
 2620 Maranatha
 Stevenson WA 98648

Document Title(s) or transactions contained herein:		REAL ESTATE EXCISE TAX
Death Certificate		23300
		SEP 22 2003
		PAID <u>Exempt</u>
GRANTOR(S) (Last name, first name, middle initial)		SKAMANIA COUNTY TREASURER
Birkenfeld, Donald Lee		
☐ Additional names on page _____ of document.		
GRANTEE(S) (Last name, first name, middle initial)		
Birkenfeld, Larry A		
" Martin L		
" Leslie L		
☐ Additional names on page _____ of document.		
LEGAL DESCRIPTION (Abbreviated i.e., Lot, Block, Plat or Section, Township, Range, Quarter, Quarter)		
All of Lot 7, Westerly 10 feet of Lot 6 <u>Riverview Addition</u>		
☐ Complete legal on page 2 of document.		
REFERENCE NUMBER(S) of Documents assigned or released:		
☐ Additional numbers on page _____ of document.		
ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER		
03-07-36-4-4-2700-00		
☐ 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											
OFFICE USE ONLY		2003-1049 LOCAL FILE NUMBER									
2 COPIES 6		Health CERTIFICATE OF DEATH 146 STATE FILE NUMBER									
3 HOSPITAL		1 NAME: Donald Lee BIRKENFELD 2 SEX: Male 3 DEATH DATE: Sept. 6, 2003									
4 AGE LAST BIRTH DAY: 73		5 UNDER 1 YEAR: 6 UNDER 1 DAY: 7 BIRTH DATE: 12/25/1929 8 BIRTH PLACE: North Bend, OR 9 HAS DELEGATE EVER IN U.S. ARMY FORCES: No 10 COUNTY OF DEATH: Klickitat									
5 RESIDENCE		11 CITY, TOWN OR LOCATION OF DEATH: White Salmon 12 PLACE OF DEATH: Skyline Hospital 13 SMOKING IN LAST 15 YEARS: Yes									
6 RACE		14 MARITAL STATUS: Widowed 15 SPOUSAL STATUS: 16 SOCIAL SECURITY: 544-26-3888 17 DECEASED'S EDUCATION: Elementary Secondary (1-12) College (13-16) 18 USUAL OCCUPATION: Logger 19 KIND OF BUSINESS OR INDUSTRY: Timber 20 Was Deceased of Hispanic or Mexican origin? No 21 RACE (Specify): White									
7 OCCUPATION		22 RESIDENCE - NUMBER AND STREET: 97 Columbia St. 23 CITY, TOWN OR LOCATION: Stevenson 24 MARRIAGE: Yes 25 COUNTY: Skamania 26 LENGTH OF RES. IN CO: 40 Yrs. 27 STATE: WA 28 ZIP CODE: 98648									
8		29 FATHER'S NAME - FIRST, MIDDLE, LAST: Louis T. Birkenfeld 30 MOTHER'S NAME - FIRST, MIDDLE, LAST: Ruth W. Thompson									
9		31 INFORMANT - NAME: Larry Birkenfeld 32 ADDRESS: 262 Maranatha Stevenson, WA 98648									
10		33 BURIAL OR CREMATION: Burial 34 DATE: 9/12/2003 35 CEMETERY OR CREMATION: Mt. View Cemetery 36 LOCATION - CITY, TOWN, STATE: Hood River, Oregon									
11		37 FUNERAL DIRECTOR SIGNATURE: [Signature] 38 NAME OF FUNERAL HOME: Gardner Funeral Home 39 ADDRESS OF FACILITY: POB 390 White Salmon, WA 98672									
12		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: [Signature] 40 DATE SIGNED: 9/19/03 41 HOUR OF DEATH: 0335									
13		42 NAME AND TITLE OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER): 43 SIGNATURE AND TITLE: [Signature] 44 DATE SIGNED: 9/19/03 45 HOUR OF DEATH: 0335									
14		46 NAME AND ADDRESS OF CERTIFIER - PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print): Raymond FitzSimmons, M.D. POB 1519 White Salmon, WA 98672									
15		50. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH. IMMEDIATE CAUSE: Chronic Obstructive Lung Disease 51. OTHER SIGNIFICANT CONDITIONS: Smoking 52. AUTOPSY: No 53. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? No									
16		54. ACC. SUICIDE, HOMICIDE, UNDET. OR PENDING INVEST. (Specify): 55. INJURY DATE: 56. HOUR OF INJURY: 57. DESCRIBE HOW INJURY OCCURRED: 58. INJURY AT WORK? No 59. PLACE OF INJURY: 60. LOCATION: 61. RECORD AMENDMENT (If applicable, use only): 62. REG. STAMP SIGNATURE: [Signature] 63. DATE RECEIVED: SEP 10 2003									

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All of Lot 7; the Westerly 10 feet of Lot 6; and the Easterly 10 feet of Lot 8; of Block Seven of RIVERVIEW ADDITION TO THE TOWN OF STEVENSON according to the official plat thereof on file and of record in the office of the Auditor of Skamania County, Washington.