Doc # 2005156545
Page 1 of 3
Date: 03/11/2005 11:22A
Filed by: MARJORIE KELSON
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$21.00

Return Address: Marjorie M. Kelson 11 Edgewater Drive Carson, WA 98610 SKAMANIA COUNTY TREASURER'S OFFICE PAID

MAR 1 1 2005

Cherie Flood Treasurer

Document Title(s) or transactions contained herein:	
Death Certificate	* (/ ` '
CPA	
GRANTOR(S) (Last name, first name, middle initial)	4.9
Kelson, Byron L.	
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4-7-26-2-100	6.5. 3/11/05
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REFERENCE NUMBER(S) of Documents assigned or rele	eased:
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ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUM	MRER
6.5.	
04-07-26-2-0-0100-00	
[] Property Tax Parcel ID is not yet assigned	
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The Auditor/Recorder will rely on the information provide	led on the form. The Staff will not read
the document to verify the accuracy or completene	ess of the indexing information.

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OREGON DEPARTMENT OF HUMAN SERVICES HEALTH DIVISION CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

4. SOCIAL SECURITY NUMBER Sa. AGE-Last Birthday Sb. Under 1 Year Sc. Under 1 Day 8. BIRTHPLACE (City and State of Poreign 7 DATE OF BIRTH (Market) April 27, 192 8. WAS DECEDENT EVER IN U.S. AFRINED FORCES? Yes No. Days Hours Mine. Butte, MT April 27, 192 8. WAS DECEDENT EVER IN U.S. AFRINED FORCES? Yes No. Post of DEATH Check only one) U.S. AFRINED FORCES? Yes No. No. No. Days Hours Mine. Days Mine. Butte, MT April 27, 192 9a. PLACE OF DEATH (Check only one) Other (Check only one) Other (Check only one) Other (Check only one) 9b. FACILITY NAME (if not institution, give street and number) 9c. CITY, TOWN, OR LOCATION OF DEATH Portland Portland Multinor (Check only one) 100. KIND OF BUSINESS/INDUSTRY 11. MARITAL STATUS - Abstract Medicing (Check only one) 12 SPOUSE (If Merried, Widown Check only one) 13 SPOUSE (If Merried, Widown Check only one) 13 SPOUSE (If Merried, Widown Check only one) 14 SPOUSE (If Merried, Widown Check only one) 15 SPOUSE (If Merried, Widown Check one) 15 SPOUSE (If Merried, Widown Check only one	003 of, Day, Ye 925 YOF DEA Omah Widowood Kelso CATION completed) college (1-4 decessed
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29. To the best of my knowledge, death occurred at the time, date, place and due to the current at the date.	n death oc
due to the cause and manner stated. (Signature) (Signature)	ated.
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34. NAME, TITLE, ADDRESS AND ZIP OF CERTIFICRAMEDICAL EXAMINER (Type or Pdat)	- 15 pr
Darcy Deering, MD, 2801 N. Gantenbein Ave., Portland, OR 97227	WASAN.
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DATE ISSUED:

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DESCRIPTION OF THE MULTNOMAH COUNTY REGISTRAR.

AUG 0 4 2003

THIS COPY NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER

LILA WICKHAM, RNMS COUNTY REGISTRAR TNOMAH COUNTY, OREGON

COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT, made and entered into this 3/2 day of Oct., 1990, by and between BYRON LEE KELSON and MARJORIE MARIE KELSON, husband and wife, residing in Skamania County, State of Washington, pursuant to the provisions of Sec. 26.16.120 of the Revised Code of Washington permitting agreements between husband and wife, fixing the status and disposition of community property to take effect upon the death of either, WITNESSETH:

That in consideration of the love and affection that each of us has for the other, and in consideration of the mutual benefits to be derived by each of us, it is hereby agreed, promised and covenanted 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 either of us, including separate property, shall be considered and is hereby declared to be community property, and each of us hereby conveys and quitclaims to the other, his or her interest in any separate property he or she now owns or hereafter acquires so as to convert the same to community property.

<u>Second:</u> That upon the death of either of us, title to all community property as defined in the preceding paragraph is to vest immediately in fee simple to the survivor.

IN WITNESS WHEREOF, We, BYRON LEE KELSON and MARJORIE MARIE KELSON, have hereunto set our hands and seals this 3/2/ day of October, 1990.

Byron Lee Mileon (Seal)

STATE OF WASHINGTON) ss.

County of Skamania

I CERTIFY that I know or have satisfactory evidence that BYRON LEE KELSON and MARJORIE MARIE KELSON signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes mentioned in the instrument.

Dated:

STATE

1990.

Notary Public in and for the State of Washington, residing at Stevenson My commission expires 2/4/94

RECORDER'S NOTE:
NOT AN ORIGINAL DOCUMENT