AFTER RECORDING MAIL TO:

335 NE Fifth Avenue Camas, Washington 98607 Doc # 2005156798

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Date: 04/01/2005 03:27P

Filed by: MAGENSEN STRAMM

Filed & Recorded in Official Records
of SKAMANIA COUNTY

J. MICHAEL GARVISON

AUDITOR

Fee: \$23.00

COMMUNITY PROPERTY AGREEMENT

Grantor:

Herbert S. Mitchell, husband

Grantee:

Virginia I. Mitchell, wife

Legal Description:

Additional legal description on page _____ of document

Reference No. of documents assigned or released:

Additional reference on page ____ of document.

Assessor's Property Tax Parcel Account Number:

Gary H. Martin, Skamania County Assessor

Date 41-05 Parcel #02-05-31-43-1100-00

REAU ESTATE EXCISE TAX

24806

APR - 1 2005

PAID exampt

SKAMANIA COUNTY TREASURER

COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT, made this day by and between HERBERT S. MITCHELL and VIRGINIA I.

MITCHELL, husband and wife, both of Skamania County, Washington.

WITNESSETH:

That whereas said HERBERT S. MITCHELL and VIRGINIA I. MITCHELL are the owners of certain community and separate property, and whereas all of the property now owned, or which shall hereafter be acquired by them or either of them, is hereby declared to be the community property of the said HERBERT S. MITCHELL and VIRGINIA I. MITCHELL. And whereas said parties are desirous of providing for the disposition of said community property upon the death of either, under and by virtue of and in conformity with the provisions of Section 26.16.120, Revised Code of Washington, and to provide that said community property and all separate 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 the 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 of whatsoever nature or description, whether separate or community, whether real, personal or mixed and wheresoever situate, now owned or hereafter acquired by them or either of them, is hereby conveyed and converted into community property for all purposes under the laws of the State of Washington.

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COMMUNITY PROPERTY AGREEMENT FOR HERBERT S. MITCHELL AND VIRGINIA I, MITCHELL PAGE 2 OF 3

H

That in case of the death of the said HERBERT S. MITCHELL while the said VIRGINIA I. MITCHELL survives, the whole of the said community property hereinbefore described, together with any other community property by them hereafter acquired, shall at once vest in the said VIRGINIA I. MITCHELL, in fee simple, as her sole and separate property; and in case of the death of the said VIRGINIA I. MITCHELL, leaving the said HERBERT S. MITCHELL surviving, the whole of said community property hereinbefore described, together with any other community property by them hereafter acquired, shall at once vest in the said HERBERT S. MITCHELL, in fee simple, as his sole and separate property.

Upon the death of either spouse, the surviving spouse may disclaim any interest passing under this Agreement in whole or in part, or with reference to specific parts, shares or assets thereof, in which event the interest disclaimed shall pass as if the provisions of paragraph II had been revoked as to such interest with such interest passing as provided by any testamentary document or statute providing an alternate disposition.

IV

This Community Property Agreement is executed for the purpose of efficiently transferring property to a surviving spouse herein. Either party may unilaterally rescind this agreement upon the separation or the filing of a divorce action, by written notice, with such notice being personally served on the other party as allowed by Washington law, and by recording the written instrument of

> ---Hagensen -ATTORNEYS -STRAHM Tel (360) 834-3502

335 NF Fifth Avenue Camas, Washington 98607

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revocation in the office of the auditor of Clark County, Washington. Should this agreement be rescinded unilaterally or upon agreement of the parties, this agreement shall have no force and effect and shall be considered void as of the date of execution.

IN WITNESS WHEREOF, the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set their hand in duplicate this 27 the said parties have hereunto set the said parties have here and the s IBONIA I. MITCHELL STATE OF WASHINGTON)ss. COUNTY OF CLARK

I certify that I know or have satisfactory evidence that HERBERT S. MITCHELL and VIRGINIA I. MITCHELL, husband and wife, are the persons who appeared before me, and said persons 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.

DATED this 27th day of San 2004.

JOHN P. HAGENSEN STATE OF WASHINGTON NOTARY ---- PUBLIC My Commission Expires Oct. 27, 2005

NOTARY PUBLIC

My appointment expires: __

-Hagensen ATTORNEYS -Strahm 335 NE Fifth Avenue

Camas, Washington 98607

Tel (360) 834-3502

STANTE OF WASHINGTON DEPARTMENT JOE HEALTH

Herbert	Spencer	MITCHELL	11-10	-3004		
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,	r -	Hours Minutes			Skama	•
7. Birthdate 8s 08-28-1930	Oklahoma City	Oklahoma	H. Decedent's Ed	lucation 's degree	. =	**************************************
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13c. Residence: County	13d. Tribal Reservation Nam	e (if applicable) [13e. State of F	oreign Country	Washo	ugai	13g. inside City Limit
Skamania 14. Estimated length of time at res	i	WA		98671		☐ Yes 22 No ☐
14. Esumbled lengin of time at res	Married Married		pouse's Name (Give name p nia I. Steinbi	rior to first marriage)		
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Property Develops	r	F	ical Estate 🖃			
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21. Informant's Name	22. Relationship to D	ecedent 23. Mailing Address	Orma Louise Pa	City or Town	Sinte	Zer
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24. Piece of Death, If Death Occurred in	a Hospital:	Place	of Death, if Death Occurred Son	sewhere Other than e	Hospital:	
25. Facility Name (If not a facility, give	number & street or location)	D8	cedent's Home 28s. City, Town, or Local	Se of Salar Be	ib. Šlaie	
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