

Doc # 2007167227
Page 1 of 4
Date: 08/10/2007 01:12P
Filed by: DONNA PETERSON
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$43.00

WHEN RECORDED RETURN TO:

DONNA PETERSON
12 PASSAGE WAY
STEVENSON, WA 98648

DOCUMENT TITLE(S)

COMMUNITY PROPERTY AGREEMENT
DEATH CERTIFICATE

REFERENCE NUMBER(S) of Documents assigned or released:

☐ Additional numbers on page ____ of document.

GRANTOR(S):

FRANCIS KEITH PETERSON

☐ Additional names on page ____ of document.

GRANTEE(S):

DONNA LORRAINE PETERSON

☐ Additional names on page ____ of document.

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

LOTS 3 & 4 COLUMBIA HOME TRACTS

☒ Complete legal on page 3 of document.

TAX PARCEL NUMBER(S):

03-75-36-4-0-0800-00
03-75-36-4-0-0900-00
03-75-36-4-0-0300-00

☐ Additional parcel numbers on page ____ of document.

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information.

COMMUNITY PROPERTY AGREEMENT

KNOW ALL PERSONS BY THESE PRESENTS:

This agreement, made and entered into this 5 day of July, 1988,
by and between Francis Keith Peterson
and Donna Lorraine Peterson, husband and wife,
of Skamania County, State of Washington, pursuant to the provisions of
§26.16.120RCW, 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 each other, and in consideration of the mutual
benefits to be derived by each of us, it is hereby agreed, covenanted, and promised as follows:

I.

That all property of whatsoever nature or description whether real, personal or mixed and
wheresoever situated now owned or hereafter acquired by us or either of us, including separate
property, shall be considered and is hereby declared to be community property, and each of us
hereby conveys and quit claims to the other his or her interest in any separate property he or she
now owns and hereafter acquires so as to convert the same to community property.

REAL ESTATE EXCISE TAX
27188
AUG 10 2007
PAID EXEMPT
Audrey Tokuni Akutsu
SKAMANIA COUNTY TREASURER

Skamania County Assessor
Date 8-10-07 Parcel# 0375364830000
110 03753640080000
03753640090000

II.

That upon the death of either of us, title to all community property as herein defined shall
immediately vest in fee simple in the survivor.

IN WITNESS WHEREOF, we F. Keith Peterson & Donna L. Peterson
and _____ have hereunto set our hands
this 5th day of JULY, 1988.

Francis K. Peterson
WITNESS

F. Keith Peterson
SPOUSE

F. W. Peterson
WITNESS

Donna L. Peterson
SPOUSE

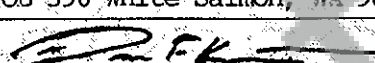
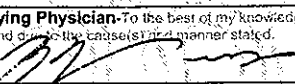

STATE OF WASHINGTON,
County of SKAMANIA } ss.

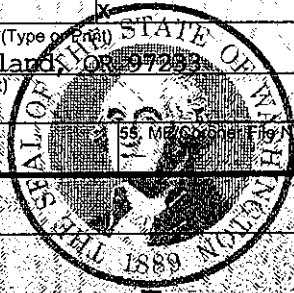
This is to certify on this 5th day of July, 1988, before me
LARRY E. ARMOUR a Notary Public in and for the State of Washington
duly commissioned and sworn, personally came F. Keith Peterson
and DONNA L. PETERSON husband and wife, to me known to be the
individual described in and who executed the within instrument, and acknowledged to me that
they signed the same as their free and voluntary act and deed for the uses and purposes therein
mentioned.

WITNESS my hand and official seal the day and year in this certificate first above written.

Larry E. Armour
Notary Public in and for the State of Washington, residing at Stevenson

STATE OF WASHINGTON DEPARTMENT OF HEALTH

File Number D2 28		Washington State Certificate of Death		State File Number	
1. Legal Name (Include AKA's if any) First Middle LAST Francis Keith PETERSON			2. Death Date July 19, 2007		
3. Sex (M/F) Male	4a. Age - Last Birthday 60	4b. Under 1 Year Months Days 0 0	4c. Under 1 Day Hours Minutes 0 0	5. Social Security Number [REDACTED]	6. County of Death Skamania
7. Birthdate Feb. 12, 1947		8a. Birthplace (City, Town, or County) Vancouver	8b. (State or Foreign Country) Washington	9. Decedent's Education Bachelor's Degree	
10. Was Decedent of Hispanic Origin? (Yes or No) If yes, specify. No			11. Decedent's Race(s) White		12. Was Decedent ever in U.S. Armed Forces? No
13a. Residence: Number and Street (e.g., 624 SE 5th St.) (Include Apt. No.) 12 Passage Way				13b. City or Town Stevenson	
13c. Residence: County Skamania		13d. Tribal Reservation Name (if applicable)		13e. State or Foreign Country Washington	13f. Zip Code + 4 98648
14. Estimated length of time at residence. 31 Years		15. Marital Status at Time of Death Married		16. Surviving Spouse's Name (Give name prior to first marriage) Donna Lorraine Easton	
17. Usual Occupation (Indicate type of work done during most of working life. (DO NOT USE RETIRED)) Teacher			18. Kind of Business/Industry (Do not use Company Name) Education		
19. Father's Name (First, Middle, Last, Suffix) Keneth Winton Peterson			20. Mother's Name Before First Marriage (First, Middle, Last) Elsie Mildred Janson		
21. Informant's Name Donna Peterson		22. Relationship to Decedent Wife		23. Mailing Address: Number and Street or RFD No. City or Town State Zip 12 Passage Way Stevenson WA 98648	
24. Place of Death, if Death Occurred in a Hospital: Decedent's Residence					
25. Facility Name (If not a facility, give number & street or location) 12 Passage Way			26a. City, Town, or Location of Death Stevenson		26b. State WA
					27. Zip Code 98648
28. Method of Disposition Cremation		29. Place of Final Disposition (Name of cemetery, crematory, other place) Columbia River Crematory		30. Location-City/Town, and State White Salmon, Washington	
31. Name and Complete Address of Funeral Facility Gardner Funeral Home POB 390 White Salmon, WA 98672					32. Date of Disposition July 21, 2007
33. Funeral Director Signature X 					
Cause of Death (See instructions and examples):					
34. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Add additional lines if necessary.					
IMMEDIATE CAUSE (Final disease or condition resulting in death) →		a. Metastatic Lung Cancer to Brain		Interval between Onset & Death 3 Years	
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST		b. Lung Cancer		Interval between Onset & Death 4 Years	
		c.		Interval between Onset & Death	
		d.		Interval between Onset & Death	
35. Other significant conditions contributing to death but not resulting in the underlying cause given above				36. Autopsy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				37. Were autopsy findings available to complete the Cause of Death? <input type="checkbox"/> Yes <input type="checkbox"/> No	
38. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Undetermined <input type="checkbox"/> Suicide <input type="checkbox"/> Pending		39. If female <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days before death <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year		40. Did tobacco use contribute to death? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Probably <input type="checkbox"/> No <input type="checkbox"/> Unknown	
41. Date of Injury (MM/DD/YYYY)		42. Hour of Injury (24hrs)		43. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)	
44. Injury at Work? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk					
45. Location of Injury: Number & Street, City or Town, State, Zip Code + 4: 12 Passage Way Stevenson WA 98648					
46. Describe how injury occurred: Slip on stairs					
47. If transportation injury, specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other (Specify)					
48a. Certifying Physician - To the best of my knowledge, death occurred at the time, date, and place and due to the cause(s) and manner stated. X 			48b. Medical Examiner/Coroner - On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place and due to the cause(s) and manner stated. X		
49. Name and Address of Certifier - Physician, Medical Examiner or Coroner (Type or Print) Benjamin Brody 19500 SE Stark St. Portland, OR 97253			50. Hour of Death (24hrs) 1945		
51. Name and Title of Attending Physician if other than Certifier (Type or Print)			52. Date Signed (MM/DD/YYYY) July 20, 2007		
53. Title of Certifier MD		54. License Number MD 23966		55. ME/Coroner File Number	
57. Registrar Signature 		58. Date Received (MM/DD/YYYY) August 2, 2007			



Portions of Lots 3 and 4 of COLUMBIA HOME TRACTS according to the official plat thereof on file and of record at page 76 of Book A of Plats, Records of Skamania County, Washington, described as follows:

Beginning at the southwest corner of Lot 3 of COLUMBIA HOME TRACTS aforesaid; thence following the west line of said Lot 3 north 377 feet to the initial point of the tract hereby described; thence east 250 feet to the east line of said Lot 3; thence following the line common to Lots 3 and 4 aforesaid north 75 feet; thence north $74^{\circ} 47' 15''$ east 488.38 feet to a point on the east line of the said Lot 4; thence following the northerly lines of Lots 4 and 3 aforesaid northwesterly, southwesterly, and northwesterly to the northwest corner of said Lot 3; thence south to the initial point;

TOGETHER WITH an easement and right of way for a private access road approximately 20 feet in width along the west line of said Lot 4 and connecting with the existing driveway leading to State Road 14;

SUBJECT TO easements of record.

Beginning at the intersection of the East line of tract 2 of Columbia Home Tracts (as shown at page 76, official plat book), with the North line of State Road No. 8; thence West on said North line 100 feet; thence North and parallel to the East line of said Lot 2, a distance of 477 feet; thence East 100 feet to said East line; thence South on said line 477 feet to the place of beginning, and being in Lots 11 and 12 of Section 36, Township 3 North, Range 7 1/2 East, Willamette Meridian.

ALSO Beginning at the Southwest corner of Lot 3, Columbia Home Tracts; thence North 377 feet following the West boundary of said Lot 3, thence East 250 feet to the East boundary of said Lot 3, thence following the East line thereof South 319 feet more or less to the Southeast corner thereof, thence in a Southwesterly direction about 255 feet following the South boundary of said Lot 3 to the place of beginning, all in Section 36, Township 3 North, Range 7 1/2 East, Willamette Meridian, Skamania County, Washington.

Skamania County Assessor

Date 8-10-97 Parcel 0375364 0030000
080000
090000

TRACT 5 OF COLUMBIA HOME TRACTS,
ACCORDING TO THE OFFICIAL PLAT
THEREOF, ON FILE AND OF RECORD
AT PAGE 76 OF BOOK "A" OF PLATS,
RECORDS OF SKAMANIA COUNTY, WASH-
INGTON.

SUBJECT TO EASEMENTS AND RIGHTS OF WAY FOR WATER PIPELINES AS DISCLOSED IN BOOK 30 OF DEEDS, AT PAGE 189 AND IN BOOK M OF DEEDS AT PAGE 77;

EASEMENT IN FAVOR OF THE U.S.A. RECORDED IN BOOK 68 OF DEEDS AT PAGE 815, UNDER AUDITOR'S FILE NO. 79140.