

WHEN RECORDED RETURN TO:

Crandall Law Group, PLLC

8596 N. Wayne Dr., Ste. B

Hayden, ID 83835

DOCUMENT TITLE(S)

Community Property Agreement

REFERENCE NUMBER(S) of Documents assigned or released:

☐ Additional numbers on page _____ of document.

GRANTOR(S):

Robert R. Younkin

SKAMANIA COUNTY
REAL ESTATE EXCISE TAX

33436

AUG 14 2018

☐ Additional names on page _____ of document.

GRANTEE(S):

Augusta J. Younkin

PAID EXEMPT
Stacy Kanni Deputy
SKAMANIA COUNTY TREASURER

☐ Additional names on page _____ of document.

LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter):
A tract of land located in the Northeast Quarter of Section 26, Township 4 North, Range 7 East of the
Willamette Meridian, in the County of Skamania, State of Washington, described as follows:
Lot 2 Amended Younkin Short Plat recorded in Book 3 of Short Plats, Page 75, Skamania County Records.

☐ Complete legal on page _____ of document.

Skamania County Assessor

TAX PARCEL NUMBER(S):

04072610110200

Date 8-14-18 Parcel# 4-7-26-1-1102

☐ 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.

**I am requesting an emergency nonstandard recording for an additional fee as provided in
RCW 36.18.010. I understand that the recorded processing requirements may cover up
or otherwise obscure some part of the text of the original document.**

Company Name: _____

Signature/Title: _____

COMMUNITY PROPERTY AGREEMENT

KNOW ALL MEN BY THESE PRESENTS, that we, ROBERT R. YOUNKIN and AUGUSTA J. YOUNKIN, husband and wife, of Clark County, Washington, for and in consideration of the love and affection we each bear, one toward the other, and further in consideration of the mutual helpfulness we have been, one to the other in the past, and for and in consideration of the commingling of our joint efforts in earnings heretofore, do hereby mutually agree, one with the other, the following:

FIRST: That each and every piece, lot or tract of land, wheresoever situated, and each and every particle of mixed property, wheresoever situated, and each and every particle of personal property, wheresoever situated, shall be by us and all other persons whomsoever, deemed, esteemed, regarded, treated and known as a community property. In this agreement so made one with the other, the date of acquiring, whether heretofore or hereafter, the manner of acquiring, and all statements by either of us heretofore or hereafter made respecting alleged separate property, or affecting any property, is to be regarded and esteemed as of no effect. The full intent and purpose of this instrument is to be construed by the court, our heirs, executors and assigns, and by all other persons whomsoever, as a voluntary conveyance from one to the other, and unitedly to the community, of all our earthly possessions whether heretofore or hereafter acquired, in such form and manner that the same shall from this date be the property of the community of ourselves as husband and wife.

SECOND: And being desirous that said property shall pass unto the survivor without delay or expense in case of the death of either of the said husband or the said wife; that in case of the death of the said husband while the said wife survives, the said community property as above stated, now owned by us, or which may hereafter be acquired by us, shall at once vest in the said wife in fee simple as her sole and separate property; and in the event of the death of the said wife, leaving the said husband surviving her, the whole of the said property now owned by us or which may hereafter be acquired by us shall at once vest in the said husband in fee simple as his sole and separate property.

IN WITNESS WHEREOF, the parties hereto have hereunto set their hands and seals this 20th day of April, 1976.

Robert R. Younkin
Robert R. Younkin, Husband

Augusta J. Younkin
Augusta J. Younkin, Wife

STATE OF WASHINGTON)
: ss.
County of Clark)

On this day personally appeared before me ROBERT R. YOUNKIN and AUGUSTA J. YOUNKIN, husband and wife, to me known to be the individuals described in and who executed the within and foregoing instrument, and acknowledged that they signed the same as their free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this 20 day of April, 1976.

John P. Young
Notary Public in and for the State of
Washington, residing at Vancouver.

BLAIR, SCHAEFER, HUTCHISON,
WYNNE, POTTER & HORTON
Attorneys at Law
1014 Franklin Street
Vancouver, Washington 98660

STATE OF IDAHO

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

CERTIFICATE OF DEATH

Date Filed JULY 16, 2007State File No. 2007-05432

DECEDENT - LEGAL NAME ROBERT R. YOUNKIN			
SEX MALE	SOCIAL SECURITY NUMBER 231-28-0944	AGE 79 YEARS	DATE OF BIRTH AUGUST 31, 1927
BIRTHPLACE CONFLUENCE, PENNSYLVANIA		PLACE OF RESIDENCE ATHOL, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED		NAME OF SURVIVING SPOUSE (if wife, maiden name) AUGUSTA JOHANNA HANSEN	WAS DECEDENT EVER IN U.S. ARMED FORCES? YES
FATHER - NAME JOHN B. YOUNKIN			BIRTHPLACE PENNSYLVANIA
MOTHER - MAIDEN NAME LOTTIE MAE FIRESTONE			BIRTHPLACE PENNSYLVANIA
METHOD OF DISPOSITION CREMATION		FUNERAL SERVICE LICENSEE DARRELL L. KATHKA	
NAME AND ADDRESS OF FUNERAL FACILITY YATES FUNERAL HOME, COEUR D'ALENE, IDAHO			
DATE OF DEATH JUNE 26, 2007	TIME OF DEATH 4:50 P.M.	CITY/TOWN OR LOCATION OF DEATH ATHOL, IDAHO	COUNTY OF DEATH KOOTENAI
CAUSE OF DEATH (underlying cause last) a. CHRONIC OBSTRUCTIVE PULMONARY DISEASE			Approximate Interval Between Onset and Death 5+ YEARS
b. DUE TO (or as a consequence of):			
c. DUE TO (or as a consequence of):			
d. DUE TO (or as a consequence of):			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE STATED			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL		NAME OF CERTIFIER MARK D. YOVICHIN, M.D.	TITLE PHYSICIAN
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

JULY 25, 2018

DATE ISSUED:

This copy not valid unless prepared on engraved border displaying state seal and signature of the Registrar

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Unofficial
Copy



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