



00000919201900016170030033

Marilyn Dent  
8180 SW Fairway Dr  
Portland OR 97225

SKAMANIA COUNTY  
REAL ESTATE EXCISE TAX

N/A

SEP 3 2019

P/A

PAID  
*Victor J. Deane*  
SKAMANIA COUNTY TREASURER

**Affidavit of Surviving Spouse or Domestic Partner  
for Claiming an Exemption Based on  
Inheritance of Real Estate**

State of Washington

County of

Skamania

Name of deceased

David Dent

I, (survivor's name)

Marilyn Dent

affirm

that I am the sole and rightful heir to the property described as:

Parcel number(s)

96001101000000

JW 9/3/19

Cabin 101 at

Government Mineral

Springs in Wind River area of

Moffat Pinchot National Forest

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signed this

26

day of

August, 2019

at

Stevenson, WA

(month)

(year)

(city)

(state)

*Marilyn Dent*

(Signature of surviving spouse or registered domestic partner)

Marilyn Dent

(Printed name of surviving spouse or registered domestic partner)

8180 SW Fairway Dr Portland OR 97225

(Address of surviving spouse or domestic partner)

(city)

(state)

(zip)

**Note:** See Senate Bill (SB) 6851 on page 2 for statutory requirements.

# STATE OF OREGON

## CERTIFICATION OF VITAL RECORD

### OREGON HEALTH AUTHORITY CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

866601

ID TAG NO.

STATE FILE NUMBER

1. Legal Name First: David Middle: Alan Last: Dent Suffix:		2. Death Date February 21, 2019	
3. Sex Male	4. Age 74 years	5. Social Security Number [REDACTED]	
6. County of Death Washington		7. Decedent's Education Bachelor's degree	
8. Birthplace Vallejo, California		9. Decedent's Race(s) White	
10. Was Decedent of Hispanic Origin? No		11. Was Decedent Ever in U.S. Armed Forces? No	
12. Residence: Number and Street 8180 SW Fairway Drive		13. City/Town Portland	
14. Residence County Washington		15. State or Foreign Country Oregon	
16. Zip Code 97225		17. Inside City Limits? No	
18. Marital Status at Time of Death Married		19. Spouse's Name Prior to First Marriage Marilyn Schmokel	
20. Usual Occupation Marine Surveyor		21. Kind of Business/Industry Shipping	
22. Father's Name Burney Dent		23. Mother's Name Prior to First Marriage Dorothy Mae Cooper	
24. Informant's Name Marilyn Dent		25. Telephone Number Not Available	
26. Relationship to Decedent Spouse		27. Mailing Address 8180 SW Fairway Drive, Portland, OR 97225	
28. Place of Death Decedent's Residence - Hospice		29. Facility Name	
30. Location of Death 8180 SW Fairway Drive		31. City/Town or Location of Death Portland	
32. State Oregon		33. Zip Code 97225	
34. Method of Disposition Cremation		35. Place of Disposition Cascade Cremation Center	
36. Name and Complete Address of Funeral Facility Crown Memorial Center, Cremation & Burial - Tigard 12995 SW Pacific Highway, Tigard, Oregon 97223		37. Date of Disposition TBD	
38. Funeral Director's Signature Christopher C Allen		39. OR License Number CO-3944	
40. Registrar's Signature Jesse L Clark		41. Date Received MAR 06 2019	
42. Amendment		43. Local File Number 19-0588	

\*7125244\*

TO BE COMPLETED BY FUNERAL FACILITY

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORDS FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS.

DATE ISSUED:

MAR 06 2019

JENNIFER A. WOODWARD, PH.D.  
STATE REGISTRAR

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Unofficial  
Copy



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