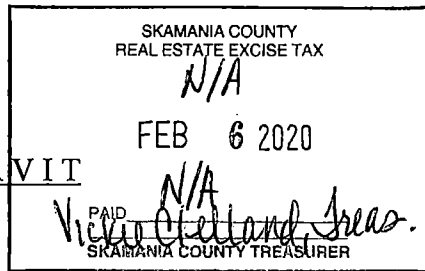




Return Address:

Shawn R. MacPherson
 430 NE Everett Street
 Camas, WA 98607



AFFIDAVIT

Grantor: Archie M. Rodgers, Jr.
 Grantee: Anita C. Rodgers
 Legal desc. (abbrev): LOT 1 ARCHIE RODGERS SP BK 3/PG 201; and
 LOT 2 RODGERS S/P BK 3 PG 201
 Assessor's Tax Parcel ID Nos: 01050610020000 and 01050610020100
 Prior Document/Reference No:

STATE OF WASHINGTON)
) ss.
 COUNTY OF CLARK)

Skamania County Assessor
 Date 2-6-20 Parcel# 01050610020000
01050610020100
fm

Anita C. Rodgers, hereby certifies the following is true and correct, and

1. This affidavit is made for the purpose of supplying information of record pertaining to that certain Community Property Agreement executed by Archie M. Rodgers, Jr. and Anita C. Rodgers, husband and wife, dated August 10, 1967, and recorded in the office of the Auditor of Skamania County, Washington. The information set forth in this affidavit may be relied upon by any person dealing with property, real or personal, the title to which is deraigned through said Community Property Agreement.

2. Archie M. Rodgers, Jr. died on or about December 24, 2019, in Clark County, Washington, being at the time of his death, a resident of Clark County, Washington.

3. The parties to said Community Property Agreement did no act which would rescind or abrogate such agreement, nor did they, or either of them, execute any testamentary writing which would have the effect of nullifying or abrogating such agreement. Said Community Property Agreement was valid in all respects, and was in full force and effect at the date of death of Archie M. Rodgers, Jr., one of the parties thereto.

4. The total value of all assets in this estate is less than the minimum value which requires the filing of a federal estate tax return under federal law applicable as of the date of death, and no such tax return has been or will be filed. No taxes imposed by the Washington Estate and Transfer Tax Reform Act are due.

5. Included among the assets of the community estate of Archie M. Rodgers, Jr. and Anita C. Rodgers, husband and wife, was the following described residential real property, the

disposition of which is controlled by the terms of said Community Property Agreement:

County of Skamania, State of Washington

See attached Exhibit "A" and Exhibit "B"

6. No proceedings have been instituted to contest or set aside or cancel said Community Property Agreement.

7. Said decedent, at the time of death, owned no separate property of any kind nor held any interest in any separate property.

8. All obligations of the marital community composed of Archie M. Rodgers, Jr. and Anita C. Rodgers, husband and wife, and all separate obligations of the said Archie M. Rodgers, Jr. have been paid in full or otherwise provided for, and all expenses of last illness and funeral expenses have been paid or otherwise provided for.

9. In addition to Anita C. Rodgers, the surviving spouse, the said Archie M. Rodgers, Jr. was also survived by three children, namely Cheryl Randall, Joene Hancock, and Gordon Rodgers, all of whom have attained majority.

IN WITNESS WHEREOF, I have hereunto set my hand this 27th day of January, 2020.

Anita C. Rodgers
Anita C. Rodgers

SUBSCRIBED and SWORN or AFFIRMED to before me this 27th day of January, 2020.

Shawn R MacPherson

SHAWN R MACPHERSON
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION NUMBER 72893
COMMISSION EXPIRES DEC. 08. 2023

NOTARY PUBLIC in and for the State
of Washington, residing at Camas
My commission expires: 12-8-

EXHIBIT "A"

The following described real estate situated in Skamania County, State of Washington:

A tract of Land located in Section 6, Township 1 North, Range 5 East of the Willamette Meridian, and in Section 31, Township 2 North, Range 5 East of the Willamette Meridian, described as follows:

BEGINNING at a point marked by an iron pipe which was formerly the center line of a 30 foot road, said pipe being 198.4 feet South and 159 feet West of the section corner common to Sections 31 and 32, Township 2 North, Range 5 East of the Willamette Meridian, and Sections 5 and 6, Township 1 North, Range 5 East Willamette Meridian; thence South 02°00' East 351.9 feet to an iron pipe on the river bank; thence following the meanderings of the Washougal River downstream North 31°22' West 344.0 feet to a point; thence North 42°05' West 192.0 feet to a point thence North 51°25' West 106.1 feet to a point; thence North 64°59' West 174.0 feet to a point; thence South 67°54' West 59.7 feet to an iron pipe; thence departing from meanderings of said river North 48°54' East 260.2 feet to an iron pipe; thence North 36°45' East 185.0 feet to an iron pipe in the center of a 30 foot used roadway; thence following the center line of said road South 66°24' East 34.1 feet to an iron pipe; thence South 40°41' East 171.7 feet to an iron pipe; thence departing from said roadway South 05°17' East 200.2 feet to an iron pipe; thence South 34°42' East 216.4 feet to the point of beginning.

EXCEPT Public Roads.

EXHIBIT "B"

County of Skamania, State of Washington:

Beginning at a point marked by an iron pipe which was formerly the centerline of a 30 foot road, said pipe being 198.4 feet South and 159 feet West of the section corner common to Sections 31 and 32, Township 2 North, Range 5 East of the Willamette Meridian, and Sections 5 and 6, Township 1 North, Range 5 East of the Willamette Meridian; thence North $34^{\circ}39'40''$ West 216.28 feet to an iron pipe; thence North $5^{\circ}17'00''$ West 173.56 feet to the true point of beginning; thence South $36^{\circ}45'00''$ West to a point on the Northern boundary of the Washougal River; thence following the meanderings of the Washougal River downstream North $51^{\circ}25'00''$ West 72.19 feet; thence North $69^{\circ}59'00''$ West 174 feet to an iron pipe; thence South $67^{\circ}54'00''$ West 59.7 feet; thence North $48^{\circ}54'00''$ East 260.20 feet to an iron pipe; thence North $36^{\circ}45'$ East 185 feet to an iron pipe in the center of a 30 foot used roadway; thence following the centerline of said road South $66^{\circ}24'00''$ East 34.1 feet to an iron pipe; thence South $40^{\circ}41'$ East 171.1 feet to an iron pipe; thence departing from said road South $5^{\circ}17'$ East 26.64 feet to the true point of beginning.

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2019-056474

LOCAL FILE NUMBER: 6521

DATE ISSUED: 12/27/2019
FEE NUMBER:

FIRST AND MIDDLE NAME(S): ARCHIE MILTON
LAST NAME(S): RODGERS JR

COUNTY OF DEATH: CLARK
DATE OF DEATH: DECEMBER 24, 2019
HOUR OF DEATH: 04:10 AM
SEX: MALE AGE: 89 YEARS
SOCIAL SECURITY NUMBER: [REDACTED]

PLACE OF DEATH: HOSPICE
FACILITY OR ADDRESS: RAY HICKEY HOSPICE HOUSE
CITY, STATE, ZIP: VANCOUVER, WASHINGTON 98661

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO
RACE: WHITE

RESIDENCE STREET: 62 DOLAN RD.
CITY, STATE, ZIP: WASHOUGAL, WA 98671
INSIDE CITY LIMITS: NO COUNTY: SKAMANIA
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 24 YEARS

BIRTH DATE: JANUARY 01, 1930
BIRTHPLACE: CAMAS, WA

FATHER: ARCHIE MILTON RODGERS SR
MOTHER: MARY ELIZABETH SCHICK

MARITAL STATUS: MARRIED
SURVIVING SPOUSE: ANITA CLAIRE HUTCHISON

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: COLUMBIA RIVER CREMATORY

OCCUPATION: MAINTENANCE SUPERVISOR
INDUSTRY: PAPER MILL
EDUCATION: ASSOCIATE DEGREE
US ARMED FORCES: YES

CITY, STATE: WHITE SALMON, WASHINGTON
DISPOSITION DATE: DECEMBER 27, 2019

INFORMANT: ANITA RODGERS
RELATIONSHIP: WIFE
ADDRESS: 62 DOLAN RD, WASHOUGAL, WA 98671

FUNERAL FACILITY: STRAUB'S FUNERAL HOME & COLUMBIA RIVER
CREMATION
ADDRESS: 325 NE THIRD AVE
CITY, STATE, ZIP: CAMAS, WASHINGTON 98607
FUNERAL DIRECTOR: CHRISTIAN M. DIERICKX

CAUSE OF DEATH:
A: MYOCARDIAL INFARCTION
INTERVAL: 2 WEEKS
B:
INTERVAL:
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

MANNER OF DEATH: NATURAL
AUTOPSY: NO
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE
CAUSE OF DEATH: NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH: NO
PREGNANCY STATUS-IF FEMALE: NO RESPONSE

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK:
PLACE OF INJURY:

CERTIFIER NAME: ALAN JONES, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: 222 NE PARK PLAZA DR, SUITE #100
CITY, STATE, ZIP: VANCOUVER, WA 98684
DATE SIGNED: DECEMBER 24, 2019

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:

DESCRIBE HOW INJURY OCCURRED:

CASE REFERRED TO ME/CORONER: YES
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN: ALAN JONES, MD

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: KIMBERLY ST. CYR
DATE RECEIVED: DECEMBER 26, 2019



Affidavit for Correction

Mail to: Center for Health Statistics
P.O. Box 47814
Olympia, WA 98504-7814
360-236-4300

This is a legal document. Complete in ink and do not alter.

STATE OFFICE USE ONLY

State File Number	Fee Number	Initials	Date	Affidavit Number
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Required information must match current information on record

Required	Record Type: <input type="checkbox"/> Birth <input type="checkbox"/> Death <input type="checkbox"/> Marriage <input type="checkbox"/> Dissolution (Divorce)			
	1. Name on Record: First Middle Last		2. Date of Event: MM/DD/YYYY	3. Place of Event: (City or County)
	4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution) First Middle Last/Maiden		5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution) First Middle Last/Maiden	
	6. Name of Person Requesting Correction: Relationship to <input type="checkbox"/> Self <input type="checkbox"/> Guardian <input type="checkbox"/> Informant <input type="checkbox"/> Hospital Person on Record: <input type="checkbox"/> Parent(s) <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other (specify)			
	7. Return Mailing Address: PO Box or Street Address City State Zip			
	Telephone Number: ()		Email Address:	

Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows:

The record now shows:	The true fact is:
8.	9.
10.	11.
12.	13.
14.	15.

I declare under penalty of perjury under the laws of the State of Washington that the forgoing is true and correct

16a. Signature:	16b. Signature of 2 nd parent (if required):		
Printed name:	Date:	Printed name:	Date:

INSTRUCTIONS -- go to www.doh.wa.gov for more information

Driver's license, Social Security card or hospital decorative birth certificate cannot be used as proof

Required documentary proof must be submitted with the affidavit and include full name and birth date. Examples of documentary proof include:

- Birth/Marriage/Divorce record
- Military record (DD-214)
- School transcripts
- Social Security Numident Report
- Certificate of Naturalization
- Hospital/medical record
- Passport
- Green/Permanent Resident card (I-551)

Birth Certificates

- Only a parent(s), legal guardian (if the child is under 18), or the named individual (if 18 or older) may change the birth certificate
 - The proof(s) must match** the asserted fact(s). For example, if the affidavit says the name should be Mary Ann Doe, the proof must show the name to be Mary Ann Doe
 - Documentary proof must be five or more years old or established within five years of birth
- | | |
|---|--|
| <p>Child under 18</p> <ul style="list-style-type: none"> • If legal guardian(s), include certified court order proving guardianship • Up to age one, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names)* • After age one, a court order is required to change the last name • No proof is required to change the first or middle name* • To correct parent's information, one documentary proof is required. • To correct the sex of the child, one documentary proof from a medical provider is required. | <p>Adult (18 years or older)</p> <ul style="list-style-type: none"> • Only the adult can change his or her birth certificate • If the first or middle name is missing, three pieces of documentary proof are required • If the first, middle and/or last name is misspelled, or date of birth is incorrect, two pieces of documentary proof are required • To correct parent's birth date, place of birth, or name, one documentary proof is required |
|---|--|
- *To change any part of the name of a child using this form, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate with request.

This affidavit cannot be used to add a father to a birth certificate (use paternity acknowledgment form DOH 422-032)

Death Certificates

- Only the informant, the funeral director, or executors/administrators (if evidence confirming such position is presented) may change the non-medical information. Proof is required to make changes if requested by a family member not listed as the informant on the certificate (family members are spouse or registered domestic partner, parent, sibling or adult child or stepchild). Marital status requires a certified copy of a court order if someone other than the informant is requesting the change.
- The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

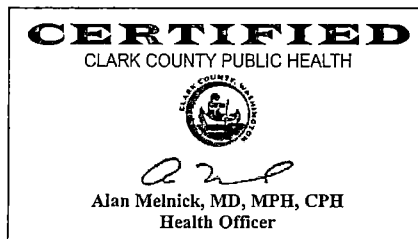
Marriage/Dissolution (Divorce) Certificates

- Personal facts (minor spelling changes in name, date or place of birth or residence) may be changed by the person with one piece of documentary proof
- To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit

DOH 422-034 January 2015



Certificate not valid unless the Seal of the State of Washington changes color when heat applied.



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