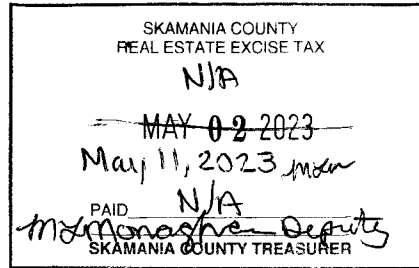




After Recording Mail To:
Carolyn A. Simms, Attorney
P.O. Box 169
Washougal, WA 98671



AFFIDAVIT IN SUPPORT OF COMMUNITY PROPERTY AGREEMENT

Grantor/Decedent: RAYMOND BARRY TERNAHAN, deceased
Grantee/Affiant: CAROLYN E. TERNAHAN, surviving spouse
Abbreviated Legal descriptions: PER BLA SW1/4 SE1/4 SEC 20 T3N R10EWM
Tax Parcel No's.: 03-10-20-3-4-1300-00

STATE OF WASHINGTON)
COUNTY OF CLARK) SS.

CAROLYN E. TERNAHAN, being first duly sworn, on oath deposes and says:

1. I am the surviving spouse of RAYMOND BARRY TERNAHAN, who died on January 4, 2023, a resident of Skamania County, Washington.
2. This Affidavit provides information for the record regarding that certain Community Property Agreement dated November 3, 2022 and executed by RAYMOND BARRY TERNAHAN and CAROLYN E. TERNAHAN, husband and wife (the Agreement). The Agreement is attached and made a part hereof as Exhibit A. The statements set forth in this Affidavit are representations of fact that may be relied upon by all parties dealing with any real and personal property located in Skamania County, Washington and more fully described herein.
3. The parties to the Agreement were legally competent at the time of the Agreement and executed no subsequent wills or agreements that would have the effect of abrogating or nullifying the Agreement.
4. The Real Estate legal description subject to the Community Property Agreement is attached hereto and made a part hereof as Exhibit B, for property known as 61 TERNAHAN LANE, UNDERWOOD, WASHINGTON 98651 (TPN 03102034130000).

5. The Decedent left no separate property that has not been otherwise provided for; all personal property and community property shall pass to the surviving spouse as provided in the Agreement.
6. All obligations of the community composed of the Decedent and the affiant owing at the date of the Decedent's death have been paid in full, and all expenses of last illness, funeral and burial services of the Decedent have been paid.
7. The estate is not subject to estate tax either in the State of Washington or under the Internal Revenue Code, as all of the property is passing under the Community Property Agreement to the surviving spouse.
8. The Decedent was survived by his spouse.
9. The personal property that is part of the Decedent's estate transferring to the surviving spouse, as provided herein, includes any and all bank accounts, CD's, annuities and investment accounts, held either in the name of the Decedent or both the Decedent and surviving spouse, the Decedent's pension, together with any and all personal property owned by Decedent or in which Decedent otherwise held an interest.

DATED this 14th day of April, 2023.

Carolyn E. Ternahan
CAROLYN E. TERNAHAN
61 Ternahan Lane Rd
Underwood, WA 98651
No number is being provided for privacy

SUBSCRIBED AND SWORN TO before me this 14th day of April, 2023.

NOTARY PUBLIC
STATE OF WASHINGTON
CAROLYN A SIMMS
MY COMMISSION EXPIRES
SEPTEMBER 01, 2025
COMMISSION # 62015

Carol A. Simms
NOTARY PUBLIC in and for Washington
Residing at Clark County
My appointment expires: 9-1-2025

EXHIBIT A

COMMUNITY PROPERTY AGREEMENT

RAYMOND BARRY TERNAHAN and **CAROLYN E. TERNAHAN** wife and husband, residing at 61 Ternahan Road in Underwood, Washington, desiring to fix the status of our property agree as follows:

I

That all property of whatever nature and wherever located which is now owned by us or either of us is hereby declared to be community property.

II.

That all property acquired by each of us or both of us after the date of the Agreement, including gifts, devises, bequests and inheritances, shall immediately become our community property.

III

That upon the death of either of us, all of our community property shall vest absolutely in the survivor of us.

IN WITNESS WHEREOF, the parties have executed this Agreement on the 3 day of November, 2022.

Raymond B. Ternahan
Raymond Barry Ternahan

Carolyn E. Ternahan
Carolyn E. Ternahan

STATE OF Washington)

County of Blount) ss.

I hereby certify that I know or have satisfactory evidence that **Raymond Barry Ternahan** and **Carolyn E. Ternahan** signed this instrument and acknowledged it to be the free and voluntary act of each of them for the uses and purposes mentioned in this instrument.

Dated November 3, 2022

Davina Torres Murillo

NOTARY PUBLIC FOR Washington State

My Commission expires March 1, 2024



Exhibit "B"
Schedule

Community Property of Raymond Barry Ternahan and Carolyn E. Ternahan:

Real Estate:

Residence: 61 Ternahan Lane
Underwood, WA 98651

Legally described as:

PARCEL I:

A tract of land in the Southwest Quarter of the Southeast Quarter of Section 20, Township 3 North, Range 10 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:

Beginning at the initial point of description of Scenic Heights No. 1, as the same appears of record at Page 133 of Book A of Plats, records of Skamania County, State of Washington, said point being the Northeast corner of said Plats and Marked by an iron bar in the centerline of County Road No. 3041, designated as the Cooks-Underwood Road; thence South 10°51' West 104 feet; thence South 21°43' East 150.31 feet; thence North 59°48' East 76.07 feet; thence South 34°23' East 78.55 feet; thence South 21°43' East 305.37 feet, more or less, to the West line of a tract of land conveyed to Joseph B. Legler, Jr. and Joy C. Legler, husband and wife, by Deed recorded at Page 16 of Book 56 of Deeds; records of Skamania County, State of Washington; thence Northerly following the Westerly boundary of said Legler tract to intersection with the centerline of said Cooks-Underwood Road; thence Southwesterly following the centerline of said road to the point of beginning.

EXCEPTING THEREFROM that portion conveyed to Thomas L. Grainger, et ux, by deed recorded under Auditor's File No. 2005159163, Records of Skamania County, Washington.

PARCEL II:

The Westerly 30 feet of the following described property:

A tract of land located in the Southwest Quarter of the Southeast Quarter of Section 20, Township 3 North, Range 10 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:

Beginning at the Northeast corner of the Southwest Quarter of the Southeast Quarter of the said Section 20, thence South 00°13' West along the East line of the Southwest Quarter of the Southeast Quarter of the said Section 20 to a point 127.78 feet Southerly from the center line of the county road known and designated as the Cook-Underwood Road, said point being the initial point of the tract hereby described; thence South 48°30' West 80.11 feet; thence South 00°13' West 645 feet, more or less, to the intersection with the South line of the said Section 20, thence East along said South line 60 feet to the Southeast corner of the Southwest Quarter of the Southeast Quarter of the said Section 20; thence North 00°13' East 697.27 feet, more or less, to the initial point.

PARCEL III:

A tract of land located in the Southeast Quarter of Section 20, Township 3 North, Range 10 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:

Beginning at the Northwest corner of the Southeast Quarter of the Southeast Quarter of said Section 20; thence South 00°13' West along the West line of the Southeast Quarter of the Southeast Quarter of said Section 20 to a point 127.78 feet Southerly from the Cook-Underwood Road, and the True Point of Beginning; thence North 48°30' East along the Southerly side of a private road a distance of 154.50 feet to a point on the Southerly Right of Way line of said Cook-Underwood Road; thence Easterly along the Southerly Right of Way line of said road 150 feet, thence South 10°17' East 127.78 feet to the True Point of Beginning.

Other Personal Property and Bank Accounts:

Any and all remaining.

Skamania County Assessor

Date 5/11/23 Parcel# 3-10-20-3-4-1300



STATE OF WASHINGTON DEPARTMENT OF HEALTH



CERTIFICATE OF DEATH



CERTIFICATE NUMBER: 2023-001210

DATE ISSUED: 01/12/2023
FEE NUMBER: 155509594

FIRST AND MIDDLE NAME(S): **RAYMOND BARRY**
LAST NAME(S): **TERNAHAN**

COUNTY OF DEATH: **SKAMANIA**
DATE OF DEATH: **JANUARY 04, 2023**
HOUR OF DEATH: **04:40 AM**
SEX: **MALE** AGE: **88 YEARS**
SOCIAL SECURITY NUMBER: [REDACTED]

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

BIRTH DATE: **FEBRUARY 19, 1934**
BIRTHPLACE: **SEATTLE, WA**

MARITAL STATUS: **MARRIED**
SURVIVING SPOUSE: **CAROLYN CUFF**

OCCUPATION: **MARKETING/ PR**
INDUSTRY: **PHONE COMPANY**
EDUCATION: **BACHELOR'S DEGREE**
US ARMED FORCES: **YES**

INFORMANT: **CAROLYN TERNAHAN**
RELATIONSHIP: **SPOUSE**
ADDRESS: **61 TERNAHAN LANE, UNDERWOOD, WA 98651**

CAUSE OF DEATH:
A: **CONGESTIVE HEART FAILURE**
INTERVAL: **UNKNOWN**
B:
INTERVAL:
C:
INTERVAL:
D:
INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: **CARDIORENAL SYNDROME**

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

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: **NOT APPLICABLE**

PLACE OF DEATH: **DECEDENT'S HOME**
FACILITY OR ADDRESS: **61 TERNAHAN LANE**
CITY, STATE, ZIP: **UNDERWOOD, WASHINGTON 98651**

RESIDENCE STREET: **61 TERNAHAN LANE**
CITY, STATE, ZIP: **UNDERWOOD, WA 98651**
INSIDE CITY LIMITS: **NO** COUNTY: **SKAMANIA**
TRIBAL RESERVATION: **NOT APPLICABLE**
LENGTH OF TIME AT RESIDENCE: **82 YEARS**

FATHER: **LYLE TERNAHAN**
MOTHER: **ROSALYN BRAINERD**

METHOD OF DISPOSITION: **CREMATION**
PLACE OF DISPOSITION: **COLUMBIA GORGE CREMATION**

CITY, STATE: **HOOD RIVER, OREGON**
DISPOSITION DATE: **JANUARY 12, 2023**

FUNERAL FACILITY: **GARDNER FUNERAL HOME INC**

ADDRESS: **1270 NORTH MAIN AVENUE**
CITY, STATE, ZIP: **WHITE SALMON, WASHINGTON 98672**
FUNERAL DIRECTOR: **VICTORIA LARA**

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

CERTIFIER NAME: **ADAM N. KICK**
TITLE: **CORONER/ME**
CERTIFIER ADDRESS: **240 NW VANCOUVER AVENUE**
CITY, STATE, ZIP: **STEVENSON, WASHINGTON 986480790**
DATE SIGNED: **JANUARY 11, 2023**

CASE REFERRED TO ME/CORONER: **NO**
FILE NUMBER: **23-00073**
ATTENDING PHYSICIAN: **TONY GAY, PHYSICIAN**

LOCAL DEPUTY REGISTRAR: **LISA S. MITCHELL**
DATE RECEIVED: **JANUARY 12, 2023**

Affidavit for Correction

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

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

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 currently shows:	The true fact is:
8.	9.
10.	11.
12.	13.

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

14a. Signature: Printed name: Date:		14b. Signature of 2nd parent (if required): Printed name: Date:	
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INSTRUCTIONS – go to www.doh.wa.gov for more information

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

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

You cannot use a Driver's license, Social Security card, or hospital decorative birth certificate as proof documentation.

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.
- Proof documentation must be five or more years old or established within five years of birth.
- This affidavit cannot be used to add a parent to a birth certificate (use Acknowledgment of Parentage form DOH 422-159).

Child under 18

- If legal guardian(s), include certified court order proving guardianship.
- Up to age one or up to one year following the filing of an Acknowledgment of Parentage form, last name can be changed once to either parents' name on certificate (can be any combination of the first, middle or last names); thereafter, 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 proof documentation is required.
- To correct the sex of the child, one proof documentation from a medical provider is required.

Adult (18 years or older)

- Only the adult can change his or her birth certificate.
- If the first or middle name is missing, three pieces of proof documentation are required.
- If the first, middle and/or last name is misspelled, or month and/or day of birth is incorrect, two pieces of proof documentation are required.
- To correct parent's birth date, place of birth, or name, one proof documentation 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.

Death Certificates

- Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family member may change the non-medical information with proof documentation. Family members are spouse or registered domestic partner, parent, sibling, or adult child or stepchild. Marital status requires a certified 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 proof documentation.
- To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.

CERTIFIED

JAN 12 2023

Amy Person, M.D.
Klickitat County Health Department

Amy Person

