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STATE OF OREGON County of Klamath

This certifies that the foregoing is a correct and complete transcript of a record of death on file with the Klamath County Department of Health Services.

(SEAL)

MARIAN ACKERMAN, Registrar Vital Statistics Deputy Registrar

VOID IF ALTERED

NOT VALID WITHOUT RAISED SEAL OF THE KLAMATH CO. DEPT. OF HEALTH SERVICES

STATE OF OREGON; COUNTY OF KLAMATH; s	SS.
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I hereby certify that the wife	•		
I hereby certify that the within June A.D., 19 80 at of Deeds	instrument was received and filed	for record on the 4th	_day of
ofDeeds	on Page 10116	I duly recorded in Vol <u>M80</u>	
FEE	WM. D. MIL	NE, County glerk	

Deputy