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SATISFACTION OF MORTGAGEVol. M82 Page 13703

PACIFIC POWER & LIGHT COMPANY, a Maine corporation, does hereby certify and declare that certain Insulation Cost Repayment Agreement and Mortgage, dated July 24, 1979, made and executed by Gary L. Rose ("Homeowners" therein), to Pacific Power & Light Company ("Pacific" therein), and recorded on December 17, 1979, in the records of the Klamath County, Oregon Clerk at Vol. M79, Pages 28887-28888, has been fully paid or otherwise discharged.

DATED this 11th day of October, 1982.

PACIFIC POWER & LIGHT COMPANY

By Jack T. Stiles
Vice President

STATE OF OREGON)
) ss.
County of Multnomah)

The foregoing instrument was acknowledged before me this 11th day of October, 1982, by Jack T. Stiles a Vice President of Pacific Power & Light Company, a Maine corporation, on behalf of the corporation.

BETTY JANE SEYMOUR
NOTARY PUBLIC - OREGON
My Commission Expires.....

Betty Jane Seymour
Notary Public for Oregon
My Commission Expires: November 20, 1983

After recording, please return to Pacific Power & Light Company, 920 S.W. 6th Ave., Portland, Oregon 97204, ATTN: Property Mgt. Dept.

State of OREGON: COUNTY OF KLAMATH: ss.

I hereby certify that the within instrument was received and filed for record on the 11th day of Oct A.D., 19 82 at 12:58 o'clock P M., and duly recorded in Vol M82 of Mtge on page 13703.

Fee \$4.00

EVELYN BIEHN
COUNTY CLERK

By John McArthur deputy

82 OCT 14 PM 12 58

MINNESOTA U.S.A. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) Married SPOUSE (IF MARRIED, WIDOWED) Nellie A. WAS DECEDENT EVER IN U.S. ARMED FORCES (SPECIFY YES OR NO) Yes

SOCIAL SECURITY NUMBER 568-32-6765 USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) Dry Wall Construction KIND OF BUSINESS OR INDUSTRY Housing

RESIDENCE-STATE Oregon COUNTY Klamath CITY, TOWN, OR LOCATION Bonanza STREET AND NUMBER OR R.F.D. Rt 1 Box 50A 97623 INSIDE CITY LIMITS (SPECIFY YES OR NO) No

FATHER-NAME FIRST MIDDLE LAST Gottfred Schmidt MOTHER-MAIDEN NAME FIRST MIDDLE LAST Alma Heuer INFORMANT-NAME AND RELATIONSHIP TO DECEASED Mrs. Nellie A. Schmidt-Wife

BURIAL CREMATION, REMOVAL, MAUS, (SPECIFY) Burial CEMETERY OR CREMATORY-NAME Klamath Memorial Park LOCATION-CITY OR TOWN STATE Klamath Falls, Oregon

FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH SIGNATURE Neville Reid O'Hair's Funeral Chapel, 515 Pine St. Klamath Falls, Oregon 97601

CERTIFICATION MEDICAL EXAMINER I CERTIFY THAT I MADE INQUIRY INTO THE DEATH OF THE DECEASED PERSON DESCRIBED ABOVE, AND IN MY OPINION DEATH RESULTED ON OR ABOUT:

DEATH OCCURRED (HOUR) 4:30 P. MONTH February DAY 26 YEAR 1982 FROM: NATURAL CAUSES ☒ ACCIDENT ☐ SUICIDE ☐ HOMICIDE ☐ UNDETERMINED ☐ PENDING ☐

CERTIFIER SIGNATURE Michael R. Cummings NAME (TYPE OR PRINT) Michael R. Cummings DEGREE OR TITLE M.D.

DATE RECEIVED BY REGISTRAR (MO., DAY, YR.) MAR 1 1982 REGISTRAR SIGNATURE Charles Francis

PART I IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), AND (C))

(A) Ventricular Fibrillation INTERVAL BETWEEN ONSET AND DEATH minutes

(B) Massive Myocardial Infarction INTERVAL BETWEEN ONSET AND DEATH minutes

(C) Atherosclerotic Cardiovascular disease INTERVAL BETWEEN ONSET AND DEATH years

PART II OTHER SIGNIFICANT CONDITIONS - CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (A)

DATE OF INJURY (MONTH, DAY, YEAR) 25A HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 23) 23B AUTOPT (SPECIFY YES OR NO) 24 No

INJ. AT WORK (SPECIFY YES OR NO) 25A PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY) 25B LOCATION (STREET OR R.F.D. NO., CITY OR TOWN, COUNTY, STATE) 25C

RESERVED FOR REGISTRAR'S USE

ORIGINAL VITAL STATISTICS COPY

HS-107 REV. 1-80

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.

MARIAN ACKERMAN, Registrar Vital Statistics

By Charles Francis, Deputy Registrar

Date MAR 2 1982

VOID IF ALTERED

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

State of OREGON: COUNTY OF KLAMATH: ss.
I hereby certify that the within instrument was received and filed for record on the 14 day of Oct A.D., 1982 at 12:58 o'clock P M., and duly recorded in Vol M82 of Deeds on page 13704.
Fee \$ 4.00

EVELYN BIEHN
COUNTY CLERK

By Joyce McQuinn deputy