

17629 *red* → MTC 11876

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AFFIDAVIT OF ARTURO A. DELBOSQUE

STATE OF OREGON)
County of Klamath) ss.

I, ARTURO DELBOSQUE, being first duly sworn,
depose and say:

That I am the same person identified with
VIOLET DELBOSQUE, husband and wife, as joint tenants on Deed from
George Pasztor and Elizabeth Pasztor, husband and wife, to VIOLET
and ARTURO DELBOSQUE, husband and wife, joint tenants. Conveyed
to me, and my wife, Lot 15, Block 64, KLAMATH FALLS FOREST ESTATES
HIGHWAY 66 Unit, PLAT NO. 3, according to the official plat thereof,
on file in the office of the County Clerk of Klamath County, Oregon,
recorded Volume M-80, Page 1580, January 25, 1980.

That VIOLET DELBOSQUE is now deceased and a copy
of her death certificate is recorded herewith under the name of
VIOLET ELIZABETH NATIONS, is the same person as VIOLET DELBOSQUE,
as referred to in the aforesaid Deed.

That I make this Affidavit to clear the title
to said property which I am selling and conveying to GLENN D. RAMIREZ.

Arturo Del Bosque
ALTURO DELBOSQUE

SUBSCRIBED AND SWORN TO before me this 26th
day of November, 1982.

Cynthia L. Ramirez
Notary Public for Oregon

My Commission Expires 3-24-85

AFFIDAVIT
1 of 1

GLENN D. RAMIREZ
514 WALNUT STREET
KLAMATH FALLS, OR 97601
(503) 884-9275
OSB #52091
CSB #25942

STATE OF CALIFORNIA
DEPARTMENT OF HEALTH SERVICES

OFFICE OF
THE STATE REGISTRAR
OF VITAL STATISTICS

This is to certify that
this is a true copy of the
document filed in this office, if validated on
the reverse.

RECEIVED & MOVED DIRECTOR
DEPARTMENT OF HEALTH SERVICES
SANITARY REGISTRATION OF VITAL STATISTICS

John L. Stille

With L. Stille, Chief
VITAL STATISTICS BRANCH

SEPTEMBER 29, 1982

STATE FILE NUMBER		CERTIFICATE OF DEATH STATE OF CALIFORNIA		0190 039769	
1. NAME OF DECEDENT - FIRST 10, MIDDLE		11. LAST		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
VIOLET		ELIZABETH		NATIONS	
2. SEX		4. RACE		5. ETHNICITY	
Female		White		9	
6. DATE OF BIRTH		7. AGE		8. DATE OF DEATH	
November 19, 1920		60		August 29, 1981	
9. PLACE OF BIRTH		10. DATE AND PLACE OF BIRTH		11. DATE OF DEATH	
Colorado		Harold Howdeshell - Missouri		Missouri	
12. ADDRESS OF DECEASED		13. MARITAL STATUS		14. NAME OF SURVIVING SPOUSE	
U.S.A.		521-26-7863		Divorced	
15. OCCUPATION		16. NUMBER OF YEARS		17. EMPLOYER (IF SELF-EMPLOYED, IN STATE)	
House wife		40		Self Employed	
18. ADDRESS OF DECEASED		19. CITY OR TOWN		20. NAME AND ADDRESS OF INFORMANT	
21812 Roscoe Blvd. #3		Los Angeles		Donald Nations - Son	
21. CITY OR TOWN		22. COUNTY		23. CITY OR TOWN	
Los Angeles		California		Canoga Park	
24. PLACE OF DEATH		25. STREET ADDRESS		26. CITY OR TOWN	
Encino Hospital		21812 Roscoe Blvd. #3		Canoga Park, California 91303	
27. STREET ADDRESS		28. CITY OR TOWN		29. COUNTY	
16237 Ventura Blvd.		Encino		California	
30. CAUSE OF DEATH		31. IMMEDIATE CAUSE		32. UNDERLYING CAUSE	
Metastatic Carcinoma of Vagina - 2 yrs		No		No	
33. PHYSICIAN'S CERTIFICATION		34. DATE OF DEATH		35. DATE OF DEATH	
12-5-90		8-29-81		8-29-81	
36. PHYSICIAN'S SIGNATURE		37. PHYSICIAN'S ADDRESS		38. PHYSICIAN'S CITY	
GARY M. DOSIK, M.D.		16311 VENTURA BLVD.		ENCINO, CA. 91316	
39. INJURY INFORMATION		40. PLACE OF INJURY		41. INJURY AT WORK	
32. INJURY INFORMATION		33. PLACE OF INJURY		34. INJURY AT WORK	
35. INJURY INFORMATION		36. PLACE OF INJURY		37. INJURY AT WORK	
38. INJURY INFORMATION		39. PLACE OF INJURY		40. INJURY AT WORK	
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