

27805

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AFFIDAVIT OF DEATH

June L. Kelly, the surviving spouse of Robert H. Kelly, deceased, hereby declares as follows:

1. Robert H. Kelly died on November 10, 1976, in Santa Barbara County, California.

2. Robert H. Kelly was married at the date of his death.

3. Robert H. Kelly died without a Will, and the names, ages and relationships of the heirs at law of Robert H. Kelly are as follows:

Name	Age	Relationship
June L. Kelly	60 years	surviving spouse
Merlyn LeRoy Kelly	41 years	son
Frederick Hall Kelly	38 years	son
Katheryn Lorraine Kelly	34 years	daughter
Valerie Jeanne Kelly	32 years	daughter
Carl Edward Kelly	30 years	son

4. No children of deceased children survived the decedent.

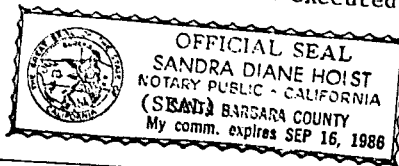
Executed this 23rd. day of February, 1983, at Santa Barbara, California.

June L. Kelly
June L. Kelly

STATE OF CALIFORNIA)
County of Santa Barbara)

On Feb. 23rd., 1983, before me, the undersigned, personally appeared June L. Kelly, known to me to be the person whose name is subscribed to the within instrument, and acknowledged that she executed the same.

Sandra Diane Holst
Notary Public
Sandra Diane Holst



After recording return to, and mail tax statements to:

June L. Kelly
101 Las Ondas
Santa Barbara, California 93105

(Space Reserved For Recorder's Use)

Acct. Nos.: 3811-1600-05600-000; Lot 9, BIK. 61
3811-1600-11800-000; Lot 14, BIK. 59

'83 SEP 2 PM 2 49

Code 36

CERTIFICATE OF DEATH											
STATE OF CALIFORNIA - DEPARTMENT OF HEALTH OFFICE OF THE STATE REGISTRAR OF VITAL STATISTICS											
STATE FILE NUMBER				4200		76-1860					
DECEDENT PERSONAL DATA	1. NAME OF DECEASED - FIRST NAME		2. MIDDLE NAME		3. LAST NAME		4. DATE OF DEATH - MONTH DAY YEAR		5. AGE - YEARS MONTHS DAYS		
	ROBERT		HALL		KELLY		November 10, 1976		4145 A.		
	6. SEX	7. COLOR OR RACE	8. BIRTHPLACE	9. DATE OF BIRTH		10. AGE - YEARS MONTHS DAYS		11. PLACE OF BIRTH		12. PLACE OF DEATH	
	Male	White	Idaho	May 14, 1917		59		Idaho		Idaho	
PLACE OF DEATH	13. NAME OF HOSPITAL OR OTHER INSTITUTION				14. STREET ADDRESS - STREET AND NUMBER OR LOCATION				15. CITY OR TOWN		
	Santa Barbara Cottage Hospital				320 West Pueblo Street				Santa Barbara		
	16. CITY OR TOWN				17. COUNTY				18. STATE		
	Santa Barbara				Santa Barbara				California		
PHYSICIAN'S OR CLERK'S CERTIFICATION	19. PLACE OF DEATH		20. SOCIAL SECURITY NUMBER		21. MARITAL STATUS		22. NAME OF PHYSICIAN		23. DATE		
	U.S.A.		571-07-7874		Married		Olive C. Hall - Idaho		11/11/76		
	24. LAST OCCUPATION		25. NAME OF LAST EMPLOYING COMPANY OR FIRM		26. ADDRESS		27. DATE		28. SIGNATURE		
	T & R Technician		Western Union		215 Penetas Lane		Nov 12, 1976		C 1175-0		
FUNDUS DIRECTOR AND LOCAL REGISTRAR	29. NAME OF FUNERAL HOME		30. DATE		31. NAME OF CEMETERY OR CREMATORY		32. LOCAL REGISTRAR		33. DATE		
	Walch-Ryce Associates		11-11-76		Santa Barbara Cemetery		John A. Hanchard		Nov. 12, 1976		
	34. PART I - DEATH WAS CAUSED BY		35. PART II - OTHER SIGNIFICANT CONDITIONS		36. PLACE OF INJURY		37. DATE OF INJURY		38. PLACE OF INJURY		
	Pulmonary Fibrosis		No		39. PLACE OF INJURY		40. DATE OF INJURY		41. PLACE OF INJURY		
CAUSE OF DEATH	42. SPECIFY ACUTE SOURCE OR SOURCE		43. PLACE OF INJURY		44. DATE OF INJURY		45. PLACE OF INJURY		46. DATE OF INJURY		
	37a. PLACE OF INJURY		37b. PLACE OF INJURY		37c. PLACE OF INJURY		37d. PLACE OF INJURY		37e. PLACE OF INJURY		
	37f. PLACE OF INJURY		37g. PLACE OF INJURY		37h. PLACE OF INJURY		37i. PLACE OF INJURY		37j. PLACE OF INJURY		
	37k. PLACE OF INJURY		37l. PLACE OF INJURY		37m. PLACE OF INJURY		37n. PLACE OF INJURY		37o. PLACE OF INJURY		
INJURY INFORMATION	37a. PLACE OF INJURY		37b. PLACE OF INJURY		37c. PLACE OF INJURY		37d. PLACE OF INJURY		37e. PLACE OF INJURY		
	37f. PLACE OF INJURY		37g. PLACE OF INJURY		37h. PLACE OF INJURY		37i. PLACE OF INJURY		37j. PLACE OF INJURY		
	37k. PLACE OF INJURY		37l. PLACE OF INJURY		37m. PLACE OF INJURY		37n. PLACE OF INJURY		37o. PLACE OF INJURY		
	37p. PLACE OF INJURY		37q. PLACE OF INJURY		37r. PLACE OF INJURY		37s. PLACE OF INJURY		37t. PLACE OF INJURY		
STATE REGISTRAR	37a. PLACE OF INJURY		37b. PLACE OF INJURY		37c. PLACE OF INJURY		37d. PLACE OF INJURY		37e. PLACE OF INJURY		
	37f. PLACE OF INJURY		37g. PLACE OF INJURY		37h. PLACE OF INJURY		37i. PLACE OF INJURY		37j. PLACE OF INJURY		
	37k. PLACE OF INJURY		37l. PLACE OF INJURY		37m. PLACE OF INJURY		37n. PLACE OF INJURY		37o. PLACE OF INJURY		
	37p. PLACE OF INJURY		37q. PLACE OF INJURY		37r. PLACE OF INJURY		37s. PLACE OF INJURY		37t. PLACE OF INJURY		

I HEREBY CERTIFY THAT IF IMPRESSED WITH THE SEAL OF
THE SANTA BARBARA COUNTY RECORDER, THIS IS A TRUE COPY
OF THE PERMANENT RECORD FILED AND/OR RECORDED IN THIS
OFFICE.

HOWARD C. MENZEL CO. CLERK-RECORDER

BY Helen V. Menzel DEPUTY

DATE FEB 18 1981

STATE OF OREGON: COUNTY OF KLAMATH ::s

I hereby certify that the within instrument was received and filed for
record on the 2nd day of September A.D., 1983 at 2:49 o'clock P M,
and duly recorded in Vol M83, of Deeds on page 15026.

EVELYN BIEHN COUNTY CLERK

by Bernadette A. Deloach Deputy

Fee \$ 8.00