IDAVIN OF HEIRSHIP, INHERITANCE AND OWNERSHIP

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In the Matter of the Estate of 3K ANNA MARIA KIEFER

Deceased, INAXX&LEXXEDXX)

Small Estate Klamath County Circuit Court #8900492CV STATE OF OREGON

County of Klamath

The undersigned, LIESAL KIEFER

SS.

all over the age of 18 years, being first duly sworn, depose and say:

That the following are all the heirs at law of ANNA MARIA KIEFER 1. , Deceased and have their residence and domicile:

ADDRESS:

Hirschsprng, #3

NAME:

LIESAL KIEFER

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88

D5427 Roemer Strasse #33, Box 1429, BAD EMS, WEST GERMANY

Vol. <u>m89</u> Page 11131 Dr. jur. Peter Bock NOTAR Schlorene

Schloßstraße 34 5060 Bergisch Gladbach 1

Tel. 02204/53216

JOHANNA ORTMANN

5000 KOELN 91, WEST GERMANY That the decedent has no deceased children or children of such children that are not affiants hereto.

That Anna Maria Kiefer died on ; that November 18, 1988 death, the domicile (legal residence) at the time of her of the decedent was Chiloquin, Oregon, Klamath County, Oregon, and had resided at such address for years and that within three years prior to death, the decedent was not a resident of another state.

owned, in fee simple That at the time of her death, she 3. title,

SEE PRELIMINARY TITLE REPORT #21303-K dated April 17, 1989, for legal description TOGETHER WITH 1978 Concord Mobile Home, Oregon License #X148140, and Serial #2980144732.

4. That there are no debts or encumbrances remaining unpaid which are or may become a lien on said property, all claims against the estate have been paid, and federal estate taxes have been paid and all inheritance taxes have been paid as evidenced by Oregon State Department of Revenue Release # If any, a copy of decedent's will is attached.

nat this Affidavit is made for the purpose of inducing LAWYER'S. SATEDN Title Insurance Company of Oregon to issue its policy or policies of title insurance on the above described property. In In consideration of the issuance of said policy or policies, the LAWYER'S undersigned agrees to hold MOUNTAIN TITLE COMPANY, INC., and/or XXXIII / TITLE Insurance Company of Oregon free and clear of all liability and responsibility for any loss, damage or expense that may arise or it may suffer by reason of the issuance of such policy or policies without requiring probate of the estate of the decedent.

DATED: May 16, 1989

Ha OVER JOHENNA ORTMANN

-County

llerk.By

STATE OF OFEGON, County of Klimath, ss. Personally appeared the above named Liesel Kiefer 5/16 1989 . and acknowledged pressing instrument to be their voluntary act and deed. Before merijei 10 STATE OF OREGON : COUNTY OF .. KLAMATH'ss. I hereby certify that the fithin instrument Notary Public for Oregon was recreved and filed for record on the My Commission Expires: 21/16/9/ A.D.,19 at of M., and duly recorded in Vo. on p o'clock

			÷.,
	Nummer 822		111
		der Urkundenrolle für 1989	
1	I hereby certify		
	acknowledged in my	that the above is the true signature	
	born 25.08.1909 of	f tage of Mrs. Johanna Rosing of Presence of Mrs. Johanna Rosing of	
	- identification	that the above is the true signature, respectively Presence of Mrs. Johanna Rosina Ortmann, f 5000 Köln 91, Am Hirschsprung 3,	
P. P.	by Pas	sport Nr. F 7431873.	
19.0	Bergisch Cine		
A LA	gisch Gladbach 1,	, the 13th day of June 1989	
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