

20151

RECORDING REQUESTED BY AND
RETURN TO:

BARRY D. PARKINSON
P.O. Box 869
Petaluma, CA 94953

Vol. m90 Page 18501

90 SEP 14 PM 12 39

WARRANTY DEED

ELIZABETH GULICK, individually and as the widow of K.C. GULICK, DECEASED, as named in the Certificate of Death attached, as Grantor, does convey and warrant to JAMES A. SMEJKAL, Grantee, the following described property, free of encumbrances, placed, permitting or arising by, through or under Grantor, excepting, however, easements and restrictions and outstanding taxes, municipal liens, water rents and public charges, and any and all liens and encumbrances, created or suffered by Grantee, or any other matters of record, as follows:

E 1/2 W 1/2 excepting therefrom the NE 1/4 NW 1/4 of Section 17, Township 25 South, Range 8 East of the Willamette Meridian, Klamath County, Oregon, now platted as Tract Number 1227, Tall Pines Estates, according to the official plat thereof on file in the Office of the County Clerk, of Klamath County, Oregon. Together with an easement for right of way purposes on the westerly 30 feet of the above described E 1/2 W 1/2.

The true consideration for this transfer is cancellation of real estate sales contract dated September 1, 1975, in the original amount of \$114,000.00.

This Deed terminates and supercedes a certain contract of sale entered into September 1, 1975, by and between KENNETH C. GULICK and ELIZABETH GULICK, Husband and Wife and DONALD W. MILLER and EVELYN M. MILLER, Husband and Wife which real estate contract was recorded September 9, 1975, Volume M. 75, page 10 688, Microfilm Records of Klamath County, Oregon, and the vendee's interest in said real estate contract was assigned by Assignment dated July 21, 1980, recorded July 31, 1980, Volume M-80, page 14 245, Microfilm Records of Klamath County, Oregon to JAMES J. SMEJKAL.

DATED: 8-28-1990

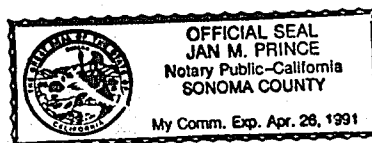
Elizabeth Gulick
ELIZABETH GULICK

18502

STATE OF)
COUNTY OF)

ON 8-28-90, before me, the undersigned, a Notary Public in and for said County and State, personally appeared ELIZABETH GULICK and known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that she executed the same.

Jan M Prince
NOTARY PUBLIC



COUNTY OF SONOMA

SANTA ROSA, CALIFORNIA

18503

APR 19 1990

CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY

49-003159

STATE FILE NUMBER		1A. NAME OF DECEDENT—FIRST (GIVEN)		1B. MIDDLE		1C. LAST (FAMILY)		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
		KENROD		CLIFTON		GULICK		49-003159	
4. RACE		5. SPANISH/HISPANIC		6. DATE OF BIRTH—MONTH, DAY, YEAR		7. AGE IN YEARS		2A. DATE OF DEATH—MONTH, DAY, YEAR	
White		☐ YES ☒ NO		June 5, 1904		85		December 12, 1989	
6. STATE OF BIRTH		9. CITIZEN OF WHAT COUNTRY		10A. FULL NAME OF FATHER		10B. STATE OF BIRTH		11A. FULL MAIDEN NAME OF MOTHER	
Idaho		U.S.A.		James Gulick		Missouri		Nellie Miller	
12. MILITARY SERVICE?		13. SOCIAL SECURITY NUMBER		14. MARITAL STATUS		15. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME)		11B. STATE OF BIRTH	
19 TO 19 ☒ NONE		540-05-5287		MARRD		Elizabeth J. Marsden		Kansas	
16A. USUAL OCCUPATION		16B. USUAL KIND OF BUSINESS OR INDUSTRY		16C. USUAL EMPLOYER		16D. YEARS IN USUAL OCCUPATION		17. NUMBER OF HIGHEST GRADE COMPLETED (1-12 OR COLLEGE 13-17)	
Cattle Rancher		Agriculture		Self		30		14	
18A. RESIDENCE—STREET AND NUMBER OR LOCATION		18B. CITY		18C. ZIP CODE		18D. NUMBER OF YEARS IN THIS COUNTY		18E. STATE OR FOREIGN COUNTRY	
71 Raymond Heights		Petaluma		94952		5		California	
18F. COUNTY		18G. PLACE OF DEATH		18H. IF HOSPITAL, SPECIFY ONE: IP, ER/OP, DCA ER/OP		18I. COUNTY		20. NAME, RELATIONSHIP, MARITAL ADDRESS AND ZIP CODE OF INFORMANT	
Sonoma		Petaluma Valley Hospital		Sonoma		Sonoma		Elizabeth J. Gulick - Spouse	
19A. STREET ADDRESS—STREET AND NUMBER OR LOCATION		19B. CITY		21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C—TYPE OR PRINT)		22. WAS DEATH REPORTED TO CORONER?		23. WAS DEATH REPORTED TO MEDICAL EXAMINER?	
400 Mc Dowell Blvd. North		Petaluma		(A) Acute Myocardial Infarction		XX YES ☒ NO ☐		XX YES ☒ NO ☐	
				(B) Chronic Pleural-Pericarditis		24A. WAS AUTOPSY PERFORMED?		24B. IF YES, WAS IT USED IN DETERMINING CAUSE OF DEATH?	
				(C) Chronic Liver Disease Etiol. Unknown		XX YES ☒ NO ☐		XX YES ☒ NO ☐	
25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21		26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25?		27A. SIGNATURE AND DESIGN OR TITLE OF PHYSICIAN		27C. PHYSICIAN'S LICENSE NUMBER		27D. DATE SIGNED	
		TYPE		Roy Musick, M.D.		G 157230		12/12/89	
27A. DECEDENT ATTENDED SINCE MONTH, DAY, YEAR		27B. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS		27C. PHYSICIAN'S LICENSE NUMBER		27D. DATE SIGNED		27E. DATE SIGNED	
12-27-84		11-30-89		ROY MUSICK, M.D. 104 Lynch Creek - Petaluma, Ca. 94954					
1. CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		28A. SIGNATURE OF CORONER OR DEPUTY CORONER		28B. DATE SIGNED		29. MANNER OF DEATH—specify one: natural, accident, suicide, homicide, pending investigation or could not be determined		30A. PLACE OF INJURY	
								30B. INJURY AT WORK ☐ YES ☒ NO	
30C. DATE OF INJURY MONTH, DAY, YEAR		30D. HOUR		31. HOUR		32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY)		33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)	
34A. DISPOSITION		34B. PLACE OF FINAL DISPOSITION		34C. DATE OF DISPOSITION MONTH, DAY, YEAR		34D. SIGNATURE OF EMERALDER		34E. LICENSE NUMBER	
BU		Cypress Hill Memorial Park Petaluma, California 94952		Dec. 14, 1989				5345	
35A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		35B. LICENSE NO.		37. SIGNATURE OF LOCAL REGISTRAR		38. REGISTRATION DATE		39. CENSUS TRACT	
PARENT-SORENSEN MORTUARY		F-12		Roy R. Sorenson MD		Dec. 13, 1989			
A.		B.		C.		D.		E.	

030270

STATE OF CALIFORNIA
COUNTY OF SONOMA

DATE ISSUED DEC 22 1989

This is a true and exact reproduction of the document officially registered and placed on file in the Vital Records Section, Sonoma County Public Health Department.

Roy R. Sorenson MD

LOCAL REGISTRAR
SONOMA COUNTY, CALIFORNIA

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

STATE OF OREGON: COUNTY OF KLAMATH: SS.

Filed for record at request of Barry D. Parkinson the 14th day of Sept. A.D., 19 90 at 12:39 o'clock P M., and duly recorded in Vol. M90 of Deeds on Page 18501.

FEE \$33.00

Evelyn Biehn
By Roy R. Sorenson MD County Clerk