

27648

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M9C 24328

AFFIDAVIT

STATE OF OREGON)
)
 County of Klamath)

ss.

I, Thelma Stelzenmueller, the (Spouse) (Son)
 (Daughter) of Otto Stelzenmueller, state that he died on or about
April 11, 1990 leaving as spouse and
 issue the following:

Thelma Stelzenmueller (Spouse)

John Stelzenmueller (Issue)

James Stelzenmueller (Issue)

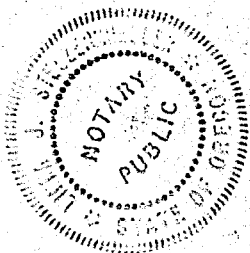
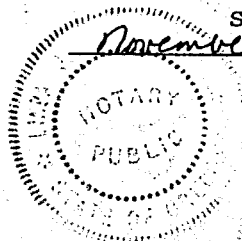
Terry Sommer (Issue)

That I make this Affidavit from my own personal knowledge
 for purposes of clearing the title to a parcel of real property
 situated in Klamath County, Oregon, described as:

Lot 10, Block 304, DARROW ADDITION

DATED the 28 day of November, 1990.

SUBSCRIBED and SWORN to before me this 28th day of
November, 1990.



Linda G. Hef
 Notary Public for Oregon
 My Commission expires: 4-14-90

Relay: Billy A. Wood
411 Pacific Terrace
City 97601

91 APR 1 PM 4 19

STATE OF CALIFORNIA 5835

DEPARTMENT OF HEALTH SERVICES

90-063272

CERTIFICATE OF DEATH STATE OF CALIFORNIA USE BLACK INK ONLY

3 90 50 000838

STATE FILE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF DECEDENT—FIRST (GIVEN) OTTO		2A. DATE OF DEATH—MO, DAY, YR APRIL 12, 1990	
1B. MIDDLE -		2B. HOUR 1230	
1C. LAST (FAMILY) STELZENMUELLER		3. SEX MALE	
4. RACE CAUCASIAN		5. SPANISH/HISPANIC—SPECIFY ☐ YES ☒ NO	
6. DATE OF BIRTH—MO, DAY, YR Dec. 31, 1911		7. AGE IN YEARS 78	
8. STATE OF BIRTH Germany		9. CITIZEN OF WHAT COUNTRY U.S.A.	
10A. FULL NAME OF FATHER Hans Stelzenmueller		10B. STATE OF BIRTH Germany	
11A. FULL MAIDEN NAME OF MOTHER Otilia Eidler		11B. STATE OF BIRTH Germany	
12. MILITARY SERVICE? 42 To 43 NONE		13. SOCIAL SECURITY NO. 543-01-6450	
14. MARITAL STATUS Married		15. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME) Thelma C. Montgomery	
16A. USUAL OCCUPATION Construction worker		16B. USUAL KIND OF BUSINESS OR INDUSTRY Construction	
16C. USUAL EMPLOYER City of Portland		16D. YEARS IN OCCUPATION 50	
17. EDUCATION—YEARS COMPLETED 14		18A. RESIDENCE—STREET AND NUMBER OR LOCATION 16745 South East Division, Space #37	
18B. CITY Portland		18C. ZIP CODE 97236	
19A. PLACE OF DEATH DOCTORS MEDICAL CENTER		19B. IF HOSPITAL, SPECIFY ONE: IP, ER/OP, DOA IP	
19C. CITY STANISLAUS		20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT Thelma C. Stelzenmueller (wife) 16745 South East Division, Sp. 37 Portland, Oregon 97236	
21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C) (A) CARDIOGENIC SHOCK		22. WAS DEATH REPORTED TO CORONER? REFERRAL NUMBER ☐ YES ☒ NO	
23. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21 DIABETES MELLITUS - CHRONIC EMPHYSEMA		24. WAS AUTOPSY PERFORMED? ☐ YES ☒ NO	
25. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 23? IF YES, LIST TYPE OF OPERATION AND DATE. NO		26. WAS IT USED IN DETERMINING CAUSE OF DEATH? ☐ YES ☒ NO	
27A. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS DAVID L. DAVIS, M.D., 1541 FLORIDA AVE STE 200 MODESTO		27B. PHYSICIAN'S LICENSE NUMBER A-22975	
27C. DATE SIGNED April 13, 1990		28A. SIGNATURE AND TITLE OF CORONER OR DEPUTY CORONER [Signature]	
28B. DATE SIGNED April 13, 1990		29. MANNER OF DEATH—specify one: natural, accident, suicide, homicide, pending investigation or could not be determined DR	
30A. PLACE OF INJURY 2		30B. INJURY AT WORK ☐ YES ☒ NO	
30C. DATE OF INJURY MONTH, DAY, YEAR APR 13 1990		30D. HOUR 1	
31. LOCATION (STREET AND NUMBER OR LOCATION AND CITY) 16745 South East Division, Sp. 37 Portland, Oregon 97236		32. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY) Not embalmed	
33A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) Salas Brothers Chapel, Modesto		33B. LICENSE NO. 782	
33C. SIGNATURE OF LOCAL REGISTRAR [Signature]		33D. REGISTRATION DATE APR 13 1990	
33E. CENSUS TRACT 97601		33F. CENSUS TRACT 97601	

VS-11 (REV. 3-89)

MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

This is to certify that this document is a true copy of the official record filed with the Office of State Registrar.

Kenneth W. Kizer, MD, MPH, Director and State Registrar of Vital Statistics by: *David W. Mitchell*

DAVID MITCHELL, CHIEF
OFFICE OF STATE REGISTRAR

DATE ISSUED

FEB 27 1991

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

*Relleen
Billy A. Wood
411 Paces
Felloe
415839
City 97601*

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Mountain Title Co. the 1st day of April A.D., 19 91 at 4:19 o'clock P.M., and duly recorded in Vol. M91 of Deeds on Page 5834.

FEE \$13.00

Evelyn Biehn County Clerk
By *Debbie Mueland*