

40893

Vol. m92 Page 2855

In the Circuit Court of the State of Oregon
for the County of Klamath

Mike Meeker

Plaintiff

vs.

Larry Olson

Defendant

No. 9103822CV

SATISFACTION OF JUDGMENT
For Attorney Fees for
William L. Sisemore

For valuable consideration, receipt of which is hereby acknowledged, full satisfaction of that certain judgment rendered in the above entitled court and cause on December 31, 19 91, in favor of the undersigned is hereby declared, and the clerk of said court is authorized to enter this satisfaction of record forthwith. In construing this instrument and where the context so requires, the singular includes the plural.

DATED Feb 6, 1992.

William L. Sisemore
attorney for JUDGMENT CREDITOR
540 main
ADDRESS
Klamath Falls OR 97601 882-7229
CITY STATE ZIP PHONE

STATE OF OREGON,

) ss.

County of Klamath

This instrument was acknowledged
before me on FEB 6, 1992

by WILLIAM L. SISEMORE

Notary Public for Oregon

(SEAL)

My commission expires: 2593

STATE OF OREGON,

) ss.

County of _____

This instrument was acknowledged
before me on _____, 19____,
by _____

Notary Public for Oregon

(SEAL)

My commission expires:

STATE OF OREGON,
County of Klamath

ss.

Filed for record at request of:

Mountain Title Co.
on this 11th day of Feb. A.D. 19 92
at 2:04 o'clock P M. and duly recorded
in Vol. M92 of Deeds Page 2855
Evelyn Biehn County Clerk
By Douglas Mulhender Deputy.

Fee,

\$10.00

92 FEB 11 PM 2 04

068529
LD. TAG NO.

440
Local File Number

OREGON DEPARTMENT OF HUMAN RESOURCES
HEALTH DIVISION
Vital Records Unit
CERTIFICATE OF DEATH

State File Number

2 SEX
F
3. DATE OF DEATH (Month, Day, Year)
October 6, 1989

1. DECEDENT'S NAME
First Middle Last
Dolores J. CARTER
4. SOCIAL SECURITY NUMBER
524-30-6536
5a. AGE - Last Birthday (Years)
59
5b. Under 1 Year
5c. Under 1 Day
5d. Under 1 Hour
5e. Under 1 Minute
6. BIRTHPLACE (City and State or Foreign Country)
Omaha, Nebraska
7. DATE OF BIRTH (Month, Day, Year)
June 2, 1930

DECEDENT

8. WAS DECEDENT EVER IN U.S. ARMED FORCES?
☐ Yes ☒ No
9. PLACE OF DEATH (Check only one)
☒ Nursing Home ☐ Decedent's Home ☐ Other (Specify)
10. FACILITY NAME (If not institution, give street and number)
West Care Home
11. COUNTY OF DEATH
Klamath
12. SPOUSE (If Married, Widowed, Divorced (Specify))
Married Vincent C.
13. RESIDENCE - STATE
Oregon
13b. COUNTY
Klamath
13c. CITY, TOWN, OR LOCATION
Klamath Falls
13d. STREET AND NUMBER
613 Roosevelt Street
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes - If yes, specify Cuban, Mexican, Puerto Rican, etc.)
☒ No
15. RACE (American Indian, Black, White, etc. (Specify))
White
16. DECEDENT'S EDUCATION (Specify only highest grade completed)
Elementary/Secondary (0-12) College (14 or 5+)
12
17. FATHER - NAME first middle last
Keith - Rice, Sr.
18. MOTHER - NAME first middle maiden
Lela - Hornbuckle
19. INFORMANT - NAME and relationship to decedent
Vincent C. Carter, husband
20. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)
Mt. Laki Cemetery
21. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH
Bernadine Reed
22. LICENSE NUMBER (Of Licensee)
3329
23. NAME, ADDRESS AND ZIP OF FACILITY
O'Hair's Funeral Chapel, Inc.
515 Pine St., Klamath Falls, OR 97601
24. REGISTRAR'S SIGNATURE
Nancy Kennedy
25. WAS GIFT MADE?
☐ YES ☒ NO ☐ N/A

PARENTS

DISPOSITION

7

8

9

REGISTRAR

10

11

CERTIFIER

12

13

14

CONDITIONS IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

CAUSE OF DEATH

15

16

17

RESERVED FOR REGISTRAR'S USE

ORIGINAL - VITAL STATISTICS COPY

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AT THE OFFICE OF THE KLAMATH COUNTY REGISTRAR.

AFTER RECORDING RETURN TO:

VINCENT C. CARTER

613 Roosevelt, Klamath Falls, Or 97601

DATE ISSUED

OCT 10 1989

Donna A. Verling

DONNA A. VERLING

COUNTY REGISTRAR

KLAMATH COUNTY, OREGON

45-2 REV. 1-89

STATE OF OREGON: COUNTY OF KLAMATH: 68.

Filed for record at request of

of

Feb.

A.D. 19 92

at

2:04 o'clock

P.M., and duly recorded in Vol. M92

on Page 2856

Deeds

Evelyn Biehn County Clerk

By

Pauline Mulendore

FEE \$10.00