	07-15-93A10:00 RCVD	PYRIGHT 1949 STEVENS NESS LAW PL	Page 17036
مرد بالمرد المرد الم المرد المرد الم	ESSOR-TESTATE ESTATE.	Vol.m93	ray
Not 1408 A AFRIDAVIT OF CLAIMING SUCC		KLAMATH	Oregon
1995 In the Probate Depa			
1093	artment of the County of	Estate No. 93.0.4	465 41
2 In the Probate Depa		Estate No. 1003 Ili	CHI 1: 21
		AT TIME	AC POCOPO-
hall Estate of:		AFFIDAVIT OF CLAIM	
TIME F. SMILLIS	Deceased.)		
) ss.	of the
CALIFORNIA	ofMARIN, being first of 'claiming successor' to the following Oregon Revised Statutes, Sections I Oregon Smith	Janose and su	ay that: I am an neir of the
TATE OF ORECON, County	· being first o	luly sworn, depose	aid decedent's estates
	h to the following	g described period	- 0283
I,	h	14.010 AA	c. Sec. No
above nameu des	Oregon	A de	
amaaris	Helen Frances Strengtheres Novat	o, Callionnia	in County, California
(1) Name of Decedent	46 Lauren Atom	88 . Novato, 1	arin courry
Domicile/Post Office Autoe	Helen Frances Smith 46 Lauren Avenue, Novat April 25 5 death certificate is attached hereto	, 19	
(a) Decedent died	April 25 s death certificate is attached hereto all of decedent's property, includir rsonal property, is: rsonal property, is:		of the real property and the
(2) Decedent's	s dealn cerunt	ig the fair market value	Sair Market Value
a certainen af	all of decedent's property, includir rsonal property, is: service and a sum of \$29,700.00; ma ginal sum of \$29,700.00; Ma	Description	on: \$17,320.00
(3) A description of fair market value of the per	all of decedent's property, rsonal property, is: ginal sum of \$29,700.00; ma Randall A. Hirschbock & Ba Vol. M88, page 9072, mortga	Property W. Lind	Land, accured by Trust Deed
fair market value	of \$29,700.00,	-hara Hirschbock,	The County, Oregon,
LOOTY NOLES	- 1011 A. 111	100 1000	· County.
Barbara D. Lindland,	Vol. M88, page 90/2, mores-	AT TAMONT	ACRES, Klamalu 3/87,
recorded 6/13/88 In	Randall Vol. M88, page 9072, moltas Secured by Security Agreen ile homes, described as fol ile homes, described as fol ind 1967 Lynwood, VIN MC029	Block J, and the pa	rties dated Triegon
real DIC	pperty described Agreen	ient Dec (1) 1962 Re	x, VIII located on said
encumbering Lunther	secured by described as fol	T Oregon License	
Oregon; anu	ile homes, win MC029	1, 74-0	heen granted in Oregon;
encumber 10 Ticense X-179428, a	perty described as Lot 14, secured by Security Agreen ile homes, described as fol nd 1967 Lynwood, VIN MC029	f a nersonal representati	ve nas uccas a
	-intment O		
(4) No applicatio	n or position	had to this attidavil,	
	1 will is as	facheu to	
il	t died testate; decedent's will is at	tached to affiant are:	Address
(5) The deceden	n or petition for the appointment it died testate; decedent's will is at	s known to alliant are:	Last Known Address
(5) The deceden	t died testate; decedent's will is a the test and the last address of each a Relation of the last address of each a relation of the last address of the relation of the test address of test addre	s known to affiant are:	Last Known Address 46 Lauren
 (5) The decedent (6) Decedent's I Nume 	the died restato, a theirs and the last address of each a Relation	s known to affiant are: ionship ring Spouse	Lest Known Address 46 Lauren Novato CA 94947 1112 S. E. Acacia Lane 1112 S. E. Acacia
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Villion D. C. ini	dent's property described in this affidavit to which each heir o	or devisee is entitled
William R. Smith	all	
(9) Reasonable efforts ha	we been made to ascertaining creditors of the estate. Any del	
maining unpaid or on account, a	the memory and address of the creditors as known to the	ots of the decedent i affiant are:
None	Address	Known or Estimated Amo
		•••••••••••••••••••••••••••••••••••••••
copy of the unfully it sin	owing the date of filing will be delivered to each creditor wh the last known address	o has not hear
full or mailed to the creditor at a	the last known address.	- nus not been paid
(10) The name and addre	ess of each person known to the affiant to assert a claim ag	
1. State of the	known or estimated amount thereof:	ainst the estate whi
Name	Address	Known or Estimated Amo
		•••••••••••••••••••••••••••••
	wing the date of filing will be delivered to each of the above o	
(11) A copy hereof showin Division, Estate Administration S	ng the date of filing will be mailed or delivered to the Adul Section and to the Department of Revenue, Salem, Oregon.	t and Family Servic
(12) (11)	state not listed herein or in amounts larger than those listed	herein may be barre
(12) Ulaims against the e	internet of manifolding larger than those listed	
(a) A claim is presented t in this affidavit for p	to the alfiant within four months of the filing of this affidaving resentment of claims: or	t at the address state
(a) A claim is presented t in this affidavit for p	to the alfiant within four months of the filing of this affidaving resentment of claims: or	t at the address state
 (a) A claim is presented t in this affidavit for presenta (b) A personal representa 	to the affiant within four months of the filing of this affidaving resentment of claims; or ntive of the estate is appointed within the time allowed under	t at the address state ORS 114.555;
 (a) A claim is presented t in this affidavit for presenta (b) A personal representa (13) If there is listed one unless: 	to the affiant within four months of the filing of this affidaving resentment of claims; or ntive of the estate is appointed within the time allowed under or more claims which the affiant disputes [See (10)], such c	t at the address state ORS 114.555; laim(s) may be barre
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-AFFIDAVIT OF CLAIMING SUCCESSOR-TESTATE ESTATE.

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		CERTI	FICATE OF DE	ATH _			THE ATE AGAIN
<u> </u>	STATE FILE NUMBER		ATE OF CALIFORNIA		LOCAL REGISTRATIO	DEATH (MONTH, DAY	YEAR) 1 28. HOUR
- d_10 -	1A. NAME OF DECEDENT-FIAST	18. MIDOLE	I IC. LAST	e e statting			
110		Frances	Smith	· · · · · · · · · · · · · · · · · · ·	April 2	1988	0539
я <u>У</u> ё-	Helene	S. SPANISH/H	SPANIC 6. DATE OF BIRTH		7. AGE	MONTHS DAYS	HOURS MINUTES
OFFICE		n D	December 3	1. 1927	60 YEARS		
OFF	Female Caucasia	9. NAME AND BIRTHPLACE	OF FATHER	<u> </u>		E AND BIRTHPLACE	1
	STATE OR FOREIGN COUNTRY				Myrtle 1	linchell-	Oregon
= <u>c</u> \7	California		y - California	13. MARITAL STAT	11 14. NAME OF	SURVIVING SPOU	SE OF WIFE, ENTER
	11A. CITIZEN OF 11B. IF DECE WHAT COUNTRY MILITARY GIVE	DATES OF SERVICE	•			R Smith	an a
	U. S. A. 19 N/J		544 24 0283	Married	18. KIND OF IN	R. Smith	13
9 9 8 8 b	15. PRIMARY OCCUPATION	16. NUMBER OF YEARS	17. EMPLOYER OF SELF-EMPLO	ITED, SU SIAILI			and the second second
H TH CHA	Becearcher	25 Vrs.	Self-Employed	<u>in de la dela del m</u>	Losmet1	<u>c Industry</u>	
" HY HIE	194. USUAL RESIDENCE-STREET AL	DRESS (STREET AND NUMBER	R OR LOCATION 1 198.				
t tanks					No	vato	
DOCUMENT E D. HIAT OUNTY HE ONL	46 Lauren Avenue	<u></u>	I IDE. STATE			F INFORMANT-	
A A Za	19D. COUNTY		California	Willi	am R. Smi	th (Husban	nd)
UTY OUT	Marin		1 UdifiUtilia				
A DORE COUL	21A. PLACE OF DEATH		- 1 711 - 1		auren Aven		집에 가지 않는 수
	Residence	en de la companya de	Marin	Nova	to. Califo	ornia, 9494	47
	21C. STREET ADDRESS (STREET	IND NUMBER OR LOCATION	21D. CITY OR TOWN	1010			Sector State State of
PY MA BY	46 Lauren Avenue	and the second second	Novato			24. WAS	DEATH REPORTED
CO	22 DEATH WAS CAUSED BY:	ENTER ONLY ONE	CAUSE PER LINE FOR A. B.			PPROXI- Voc	
U Ш	IMMEDIATE CAUSE	ardiac Arrest			mins.	MATE 100	N-28918
ENT ENT	CONDITIONS, IF ANY.	OR AS A CONSEQUENCE OF				ITERVAL 25. WAS	BCAZA MERCANER
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A T		espiratory Fai				AND 28. WAS	AUTOPSY PERFORMED
S RA					vrs.	No	
EP/		<u>hronic Obstruc</u>	tive Lung Disea	Se GOVEN 27. WAS	OPERATION PERFOR	MED FOR ANY CONDI	TION IN ITEMS 22 OR
. <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	23. OTHER SIGNIFICANT CONDITION	S-CONTRIBUTING TO DEAT	N BUT NOT RELATED TO CAUS	237 1174	OF OPERATION		
01 4	None			No	125C DATE	SIGNED 1280. PHYSH	CIAN'S LICENSE NUMBE
AT CE 00		OCCURRED AT THE	288 PHYSICIAN-SHATTER	AND PEGREE OF TIT			
	HOUR DATE AND PLACE STATED	FROM THE CAUSES	Michael J	Julhan	ND: 4/25/8	38 16-200	+9
γ ² ² ² γ	LATTENDED DECEDENT SINCE 1 1 U	ST SAW DECEDENT ALIVE	286. TYPE PHYSICIAN'S NA	ME AND ADDRESS		Cal	if.94143
L U~O	DOTTER MO. DA. TRJ	4/13/88	Michael S. Stu		'400 Parna	issus Ave.	San Franci
ERTI MAN ROON ALIF	2/23/88			1. INJURY AT WORK	32A. DATE OF INUL	JRY-MONTH, DAY, YE	AR 1328. HOUR
₩ Zœ₹ œ	29. SPECIFY ACCIDENT, SUICIDE, ETC	BU. PLACE OF INUL		in a sub-			
0 Ir. 0				BE HOW INJURY OC	CURRED (EVENTS	WHICH RESULTED IN IN	NJURY)
두 c恺그는 두	33. LOCATION ISTREET AND MIN	BER OR LOCATION AND CITY O	R TOWNI 34. DESCHI				
<u> </u>							35C. DATE SIGNE
. w ro∢ u	35A. I CERTURY THAT DEATH OC	CURRED AT THE HOUR. DAT	E AND PLACE STATED FROM	358. CORONER-S	GNATURE AND DEGR	EE OR INCE	
E LOC E	THE CAUSES STATED. AS REQUIR	ED BT LAW I HATE HED -					UMBER AND SIGNATURE
CER' H		TEAR 1 38. NAME AND ADORI	ESS OF CEMETERY OR CREMATORY	,	39. €	ABALMER'S LICENSEN	
≣ບທີ່ບ			and Dank Nova	+o Calif		Not Embalm	ed
Cremati	on April 26,19	38 Valley Mem	orial Park, NOVe	TRAR-SIGNATURE	· (1)	42. DATE ACCE	PTED BY LOCAL REGISTR
40A. NAME	OF FUNERAL DIRECTOR (OR PERSON ACT		ENU. AL LUCALEOIS	TRAR-SIGNATURE	art	P APR 2	6 1988
	on's Chapel of Mari		170000		7 7	C APR I	
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STATE REGISTRA					n de l e state		
REGISTRA						ter de la composition	g a tablét egy a carac

In the Superior Court of the State of California IN AND FOR THE

County of Marin

Estate	of			
Helene	Frances	Smith		Plaintiff
			••••••	Defendant

Case No. 36328

1, Howard Hanson, County Clerk of the County of Marin, and ex-officio Clerk of the Superior Court in and for the said County of Marin, State of California, do hereby certify that I have compared the foregoing with the original_____thereof: that I am the keeper of all said original_____keeping same on file in my office as the legal custodian, and keeper of the same under the laws of the State of California, and I further certify that the foregoing cop y attached hereto is full, true and correct cop y of the original ******

I do further certify that the same has not been altered, amended, or set aside, but is still of full force and effect. All of which I have caused to be exemplified according to the Act of Congress.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the said Court June 14th day of

this

Richard H. Breiner

County Clerk.

, Judge of the Superior Court of the State

17039

of California in and for the County of Marin, do hereby certify that said court is a court of Record having a Clerk and Seal, that Howard Hanson , who has signed the annexed attestation, is the duly elected and qualified County Clerk of the County of Marin, and was at the time of signing said attestation, ex-officio Clerk of said Court. That said signature is his genuine handwriting and that all his official acts as such Clerk are entitled to full faith and credit.

And I further certify that said attestation is in due form of law. A. D., 19<u>93</u> Witness my hand this <u>14th</u> day of.

Fame

Judge of the Superior Court in and for the County of Marin, State of California.

STATE OF CALIFORNIA. }ss. County of Marin

1, Howard Hanson, County Clerk of the County of Marin, and ex-officio Clerk of the Superior Court of the County of Marin, State of California, do hereby certify that the , whose name is subscribed to the Richard H. Breiner preceeding certificate, is Judge of said Court, duly elected and qualified, and that the signature of said Judge to said certificate is genuine.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the said Court, . A. D., 19.....

June

day of.

14th this

> County Clerk of the County of Marin, State of California, and ex-officio Clerk of the Superior Court thereof.

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FILED

MAR 2 5 1991

WILL OF HELEN&FRANCES SMITH

HOWARD HANSON

I, HELENG FRANCES SMITH, a resident of the County of Napa, State of California, Social Security Number 544-24-0283, declare that this is my Will, revoking all prior Wills and Codicils.

FIRST: I am presently married to WILLIAM R. SMITH, and all references in this Will to "my husband" are to him. I have no children of this marriage.

I was divorced from RODNEY DEAN JAMES in 1972 by the Superior Court of Marin County, California. I have no children by that dissolved marriage.

I was divorced from HAROLD C. FLY by the Superior Court of Alameda County, California, Irhave two children by that dissolved marriage whose names and dates of birth are: IONE MARJORIE JOHNSON, January 4, 1951; and KATHLEEN SANDOVAL, November 29, 1947. I have no other children.

SECOND: I intend by this Will to dispose of all real and personal property which I am entitled to dispose of by Will, including my separate property and my share of the community property of my husband and myself and my share of the quasi-community property of my husband and myself. I confirm to my husband his share of our community property.

THIRD: I give all of my estate as follows: To my husband if he survives me. If my husband does not survive me, then in equal shares to my children, IONE MARJORIE JOHNSON and KATHLEEN SANDOVAL, and my stepchildren, JEFFREY B. SMITH and GREGORY C. SMITH, or the survivors of them, and not their surviving issue. And if none of them survive me; then to my heirs as determined by the laws of the State of California, in effect at my death relating to the succession of the separate property, not acquired from a predeceasing spouse, of a California resident.

FOURTH: I nominate my husband, WILLIAM R. SMITH, Executor of this Will, to serve without bond; but if he be unwilling or unable to perform, I nominate my daughter, IONE M. JOHNSON of Rogue River, Oregon, and my stepson, JEFFREY SMITH of Danville, California, to serve in his stead, also without bond. The term "my Executor" as used in this Will shall include any personal representative of my estate.

FIFTH: I authorize my Executor, in addition to the authority conferred by law, to sell, at public or private sale, for cash or credit, with or without notice or security, lease, mortgage, and otherwise convey any property belonging to my estate, and to invest, reinvest or retain in kind investments of my estate, and, on any preliminary or final distribution of the property in my estate, to partition, allot, and distribute my estate in kind, including undivided interests in my estate or any part of it, or partly in cash and partly in kind, or entirely in cash, in my Executor's absolute discretion, and to perform all acts and to execute all documents deemed necessary, convenient or proper in regard to my estate, all without court order.

SIXTH: I direct that all estate, inheritance, or other death taxes, together with any interest and penalties thereon, becoming payable by reason of my death, with respect to any property or interest in property included as part of my gross estate for the purpose of any such taxes, whether or not such property passes under my Will, shall be paid by my Executor out of the residue of my estate, without adjustments among the residuary beneficiaries, and shall not be charged against or collected from any beneficiary of my probate estate, or from any transferee or beneficiary of any property outside my probate estate.

PAGE ONE OF MY WILL

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NK:

H. F.S.



STATE OF OREGON: COUNTY OF KLAMATH: ss.

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Filed for record at request of		Parks & Ra	tliff	the <u>15th</u>	day
of Jul	y A.D., 19_	<u>93 at 10:00</u>	o'clockA_M., and du	ly recorded in Vol. <u>M93</u>	,
	of	Deeds	on Page7		
			Evelyn Biehn		
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Return: Parks & Ratliff 228 N. 7th Klamath Falls, Or.97601

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