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# RECORDING COVER SHEET FOR CONVEYANCES, PER ORS 205.234

Vol MOO Page 19774

THIS COVER SHEET HAS BEEN PREPARED BY THE PERSON PRESENTING THE ATTACHED INSTRUMENT FOR RECORDING. ANY ERRORS IN THIS COVER SHEET DO NOT AFFECT THE TRANSACTION(S) CONTAINED IN THE INSTRUMENT ITSELF.

*This Space For County Recording Use Only  
as of 1-1-97*

**AFTER RECORDING RETURN TO**  
name and address of the person authorized to receive the instrument after recording, as required by ORS 205.180(4) and ORS 205.238.

Aspen Title & Escrow, Inc.

1. **NAME(S) OF THE TRANSACTION(S)**, described in the attached instrument and required by ORS 205.234(a).

*Note: Transaction as defined by ORS 205.010 "means any action required or permitted by law to be recorded including, but not limited to, any transfer, encumbrance or release affecting title to or an interest in real property."*

Decree of Final Distribution  
Probate No. 199547

2. **GRANTOR**, as described in ORS 205.160.

Estate of Victor J. Saporito

3. **GRANTEE**, as described in ORS 205.160.

Samuel Saporito  
Celestine Saporito

4. **TRUE AND ACTUAL CONSIDERATION PAID** for instruments conveying or contracting to convey fee title to any real estate and all memoranda of such instruments, reference ORS 93.030.

5. **UNTIL A CHANGE IS REQUESTED, ALL TAX STATEMENTS SHALL BE SENT TO THE FOLLOWING ADDRESS** for instruments conveying or contracting to convey fee title to any real estate, reference ORS 93.260.

5/6A

Celestine Sepor Saporito

CERTIFICATE OF DEATH  
STATE OF CALIFORNIA

STATE FILE NUMBER			LOCAL REGISTRATION DISTRICT AND CERTIFICATE		
1A. NAME OF DECEDENT—FIRST		1B. MIDDLE	1C. LAST		2A. DATE OF DEATH (MONTH, DAY, YEAR)
Celestine		nmi	Sepor		12-1-1979
3. SEX	4. RACE	5. ETHNICITY	6. DATE OF BIRTH		7. AGE
Female	Cauc.		5-11-1908		71 YEARS
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER		10. BIRTH NAME AND BIRTHPLACE OF MOTHER	
New Jersey		Frank Tortoriello Italy		Victoria Unk. It.	
11. CITIZEN OF WHAT COUNTRY		12. SOCIAL SECURITY NUMBER		13. MARITAL STATUS	
U.S.A.		549-23-7144		Married	
15. PRIMARY OCCUPATION		16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)	
Housewife		50		Self	
18. KIND OF INDUSTRY OF BUSINESS		19. CITY OR TOWN			
Homemaker		Forestville			
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)			19B.		
1063 Sunset					
19D. COUNTY		19E. STATE		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP	
Sonoma		California		Samuel Sepor (husband)	
21A. PLACE OF DEATH		21B. COUNTY		216 7 Flags Circle West	
Kaiser Foundation		Marin		Sonoma, California	
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)		21D. CITY OR TOWN			
99 Montecillo Road		San Rafael			
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)					
IMMEDIATE CAUSE					
(A) <i>cerebral arteriosclerosis</i>					
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE (STATE IN THE UPPER LEFT HAND CORNER OF THIS SPACE)					
(B) _____					
(C) _____					
23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH					
24. WAS DEATH REFERRED TO CORONER? <i>N</i>					
25. WAS BIOPSY PERFORMED? <i>NO</i>					
26. WAS AUTOPSY PERFORMED? <i>NO</i>					
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION <i>NO</i>					
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED			28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		28C. DATE SIGNED
I ATTENDED DECEDENT SINCE I LAST SAW DECEDENT ALIVE (ENTER MO. DAY, YR.)			<i>J. Taylor M.D.</i>		12/3/79
28E. TYPE PHYSICIAN'S NAME AND ADDRESS			28D. PHYSICIAN'S LICENSE NUMBER		
11/21/75, 11/30/79			A 220		
Dr. Joseph A. Taylor, 99 Montecillo Rd., San Rafael					
29. SPECIFY ACCIDENT, SUICIDE, ETC.			30. PLACE OF INJURY		31. INJURY AT WORK
32A. DATE OF INJURY—MONTH, DAY, YEAR			32B. HOURS OF DAY		
33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)			34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)		
35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED, AS REQUIRED BY LAW I HAVE HELD AN (INQUEST-INVIGATION)			35B. CORONER—SIGNATURE AND DEGREE OR TITLE		35C. DATE
37. DATE—MONTH, DAY, YEAR			38. NAME AND ADDRESS OF CEMETERY OR CREMATORY		39. EMBALMER'S LICENSE NUMBER AND SIGNATURE
12-4-1979			Mt. Tamalpais Cemetery, San Rafael		Not Embalmed
40. FUNERAL DIRECTOR FOR PERSON ACTING AS SUCH:			41. LOCAL REGISTRATION SIGNATURE		42. DATE ACCEPTED BY LOCAL REGISTRATION
Keaton's Mortuary			<i>Richard D. Heath</i>		12-3-79
A.	B.	C.	D.	E.	F.

11/10



*Aspen Title Escrow No. 01051268*  
 Affidavit of Hiership

Whereas, Victor J. Saporito died January 29, 1972 leaving his only heirs, his parents, Samuel Saporito and Celestine Saporito, also known as Celestine Sepor, also known as Celestine Tortoriello, evidenced by Probate No. 199547, State of California, County of San Francisco, copy attached.

Whereas, Celestine Sepor died December 1, 1979, evidenced by state of California Death Certificate, copy attached.

Now therefore, I, Samuel Saporito, state that I am the sole heir of the estate of Victor J. Saporito.

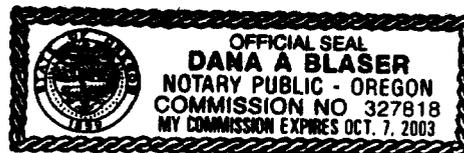
Dated this 24 day of May, 2000.

*Samuel Saporito*  
 Samuel Saporito

STATE OF OREGON, County of Coos

On May 24, 2000, personally appeared Samuel Saporito who acknowledged the foregoing instrument to be his voluntary act and deed.

*Dana A Blaser*  
 Notary Public for Oregon  
 My Commission Expires: 10-07-03



3711-11eB-4000

19778

1 HANNA RUTH WILBER  
123 Second Street  
2 San Francisco 94105  
3 Tel.: 982-9617  
4 Attorney for Administrator

ENDORSED  
**FILED**  
AUG 24 1972  
MARTIN MONGAN, Clerk  
By Anne Crotty  
DEPUTY CLERK

5  
6  
7

8 IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA  
9 IN AND FOR THE CITY AND COUNTY OF SAN FRANCISCO

10

11 Estate of	)	
12 VICTOR J. SAPORITO,	)	No. 199547
13 Deceased.	)	JUDGMENT OF FINAL DISTRIBUTION
	)	ON WAIVER OF ACCOUNTING

14

15 SAMUEL SAPORITO, as administrator of the estate of the  
16 above-named decedent, having filed his Waiver of Accounting and  
17 Petition for Final Distribution and the report and petition coming  
18 on regularly for hearing this 21<sup>st</sup> day of August, 1972, the Court  
19 finds:

20 Notice of hearing of the petition has been regularly  
21 given as prescribed by law.

22 All the allegations of the petition are true.

23 Decedent died intestate on January 29, 1972, in the City  
24 and County of San Francisco, State of California, and was at the  
25 time of his death a resident thereof.

26 On March 31, 1972, petitioner was appointed administrator

HANNA RUTH WILBER  
ATTORNEY AT LAW  
123 SECOND STREET  
SAN FRANCISCO 94105  
982-9617

1 of the decedent's estate and qualified as such on that date, and  
2 since then has been and now is the administrator of the decedent's  
3 estate.

4 Notice to creditors has been given as required by law,  
5 the time for filing or presenting claims has expired, and the  
6 estate now is in a condition to be closed.

7 The only claim presented against the estate was rejected  
8 by the administrator; written notice of rejection was given in con-  
9 formity with law, and more than three months have elapsed from the  
10 date of service of the notice of rejection to the date hereof.

11 All debts of the decedent and of the estate and all ex-  
12 penses of administration have been paid.

13 A certificate of the inheritance tax referee appointed  
14 in the proceeding is on file, certifying that no inheritance tax  
15 is due the State of California from this estate, and the Court  
16 finds that no such tax is due.

17 No personal property taxes are due or payable by this  
18 estate. The personal property tax clearance is on file herein.

19 No federal estate tax return has been made or filed  
20 for this estate because the estate was not sufficient to require  
21 such a return, and no federal estate tax is due.

22 No California and federal income taxes are payable by  
23 the estate.

24 All assets of the estate are decedent's separate property.  
25 Distribution should be ordered as prayed for.

26 ---

1 IT IS ORDERED AND ADJUDGED that:

2 1. The administration of the estate is brought to a  
3 close;

4 2. All acts and transactions of the administrator re-  
5 lating to the matters set forth in the report and petition are  
6 confirmed and approved;

7 3. The administrator has waived his right to compen-  
8 sation for ordinary services rendered in the administration of  
9 this estate. The payment of the sum of \$430.00 to HANNA RUTH  
10 WILBER, his attorney, for statutory fees for services rendered  
11 in the administration of this estate is approved;

12 4. Notice to creditors has been given as required by  
13 law;

14 5. No California inheritance tax is due and payable  
15 by the estate;

16 6. Decedent died intestate, leaving surviving him as  
17 his only heirs at law his parents, SAMUEL SAPORITO and CELESTINE  
18 SAPORITO to whom the property in the hands of the administrator  
19 is to be distributed in equal shares, that is, an undivided one-  
20 half share to each;

21 7. The estate in the possession of the administrator  
22 remaining for distribution consists of the following property:

23 Real property situated in the County of Sonoma,  
24 State of California, more particularly described  
as follows:

25 Lot 332, as shown upon the map entitled  
26 "Plat of Subdivision of American Legion  
Recreational Park, Sonoma County, Cali-

