PR 11 AM8:14	COPTINIENT 1999 STEVENS-NESS IAM POBLISHING CO., PONTIDAND, ON 97204
N K II HMO-I-4	Vol MO2 Page 21267
Tout Cit	STATE OF OREGON,
7362 Reuber (+	
First Party's Name and Address	
Ser Just Course Dr. Sw	; ;
(aterood WA 98498	1
Second Party's Name and Address After recording, return to (Name, Address, Zip):	SPACE RESERVED (FOR)
Gary D Septical	RECORDER'S USE
(atomos 1)A WAS	State of Oregon, County of Klamath Recorded 04/11/2002 8/14 a. m.
ntil requested otherwise, send all tax enalements to (Name, Address, Zip):	Vol M02, Pg 21267-7/
(Say 1) Josephers	Linda Smith, County Clerk Fee \$ 4/69 # of Pgs 5 puty.
(akanood WA 98498:	, , , , , , , , , , , , , , , , , , ,
723-228-3006	
	AFFIANT'S DEED
THIS INDENTURE dated	arch 2002, by and between
pe affiant named in the duly filed affidavit concerning	g the small estate of
amant named in the duty med amazin concerning	deceased, hereinafter called the first party,
	557,
rereinafter called the second party; WITNESSETH: For value received and the consideration hereinafter	er stated, the first party has granted, bargained, sold and conveyed, and by
hese presents does grant, bargain, sell and convey unto the	he second party and second party's heirs, successors and assigns all the
state, right and interest of the estate of the deceased, whether ty situated in the County of	her acquired by operation of the law or otherwise, in that certain real prop- , State of Oregon, described as follows, to-wit:
	P' A N. 11 '
hot 31 in hact	335 - Silver Ridge Estates,
	ing to the official Plat Hereof
, on file in the office	e of the country clock of
Hamath County, Orego.	
35108-09700-0d2so	
2100.09 700 - 04200	४.६३५५६
	- () /
	NT, CONTINUE DESCRIPTION ON REVERSE) econd party, and second party's heirs, successors-in-interest and assigns
rever	
The true and actual consideration paid for this trans	sfer, stated in terms of dollars, is \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
thich) consideration. (The sentence between the symbols , if not	t applicable, should be deleted. See ORS 93.030.)
IN WITNESS WHEREOF, the first party has executed in the second se	uted this instrument; if first party is a corporation, it has caused its name
be signed and its seal, if any, affixed by an officer or off	her person duly authorized to do so by order of its board of directors.
LIC INCTUIMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRI	IRED IN
HIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRI HIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS ANI LATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE P	ID REG-
CQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE A RIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVEI	APPRO- ID USES
ND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR F PACTICES AS DEFINED IN ORS 30.930.	FOREST Affiant
STATE OF OREGON, County This instrument was ack	of LANE)ss. knowledged before me on March 29 2002,
by Gary DJa	05cpn5cn
This instrument was ack	knowledged before me on,
as	
Of Street, Str	
OFFICIAL SEAL CHELSY A MC NEIL	Notary Public for Oregon My commission expires 12.19.04
NOTARY PUBLIC - OREGON COMMISSION NO. A341313	Notary Public Toy Oregon
MY COMMISSION EXPIRES DECEMBER 19, 2004	My commission expiresfff

FEB 14 2012

NEATH OF COLUMN

IN THE PROBATE COURT OF KLAMATTH COUNTY, OREGON

THE PROBATE COURT OF KLAMATA COUNTY, OREGON	
Deceased. Case No	
TE OF OREGON)	
) ss. I swear that the following statements are true:	
The affiant. My name and address are: Start Discreption To Company of the Course Dr. Start Dr. Start Course Dr. Start Course Dr. Start Course Dr. Start Dr.	_
I am an heir of the decedent, and the decedent left no will. I am a devisee of the decedent under the decedent's will. I am named the personal representative under the decedent's will.	
Name: Age: 52 Soc. Sec. No.544 -56 - 8516 Home or mailing address: 7362 Reuben Ct. Place of death Sunfals Soc. Sec. No.544 -56 - 8516 Place of death Sunfals Soc. Sec. No.544 -56 - 8516 A certified copy of the death certificate is attached.	-
	Case No. Q2Q0290V AFFIDAVIT OF CLAIMING SUCCESSOR (SMALL ESTATE AFFIDAVIT) TE OF OREGON It you want to be seen that the following statements are true: The affiant. My name and address are: I have authority to file this affidavit because: [check at least one that applies] I am an heir of the decedent, and the decedent left no will. I am an devisee of the decedent under the decedent's will. I am an a creditor and have not been paid the full amount owed to me within 60 days of the decedent's death. Creditors must check the box that applies: The decedent died intestate and without heirs. I have attached written authorization from the Division of State Lands is not required because the decedent died testate or left heirs. The decedent. Name: Very State

3.	The decedent's estate. The following property is in the o	decedent's estate:
	Real Property [attach a legal description]	Fair Market Value [maximum total value \$90,000]
	Personal Property [PERS accounts, bank accounts, jewelry, o	etc.] <u>Fair Market Value</u> [maximum total value \$50,000]
	none.	
	["Fair market value" means the value of the property on the parties), not reduced to reflect debts owed against the protransfers automatically to others following death (such as j	perty. Do not include property that
4.	Affidavit should be filed in KlamathCounty. This small e Klamath County because [check at least one that applies]:	state affidavit should be filed in
	The decedent died in County. At death, the decedent lived in or had a home in The decedent had property located in KlamathCount filed.	County. ty at death or when this affidavit is
	Thirty or more days have passed since the decedent died.	
5.	No probate estate exists. No application or petition for ti representative has been granted in Oregon. [This means to probate estate for the decedent.]	ne appointment of a personal hat no Oregon court has opened a
6.	Is there a will? [Check the one that applies] The decedent died testate (did leave a will).	al will-filed with Newda Parbate Attached
	☐ The decedent died intestate (did not leave a will).	
7.	The heirs. The heirs of the decedent, and their addresses,	, are:
	Name of each heir Relationship to decedent Last Car Diosephson Tout Siste S Car Diosephson J. Nephen Z	1-known address 553 Lake Laure Dr. Sie
	Chado T Cita ne phero MI Notalie Menashan. Diece Sta	Cake word with 98498 2050 T 18 101 370 Box 100 INA ILL 24 Line Culdwell ID
Page :	- Michelle Coasion Nice うち 2-Small Estate Affidavit	12 S. Montana #27 (alduell I

8.	The devisees. [This part only applies if the decedent left a will. If the decedent did not leave a will, write in "none."] The devisees named in the decedent's will, and their last-known addresses, are:
	Name of each devisee Eary Description Jk 553 (at a Course D1 Catalogod Little 98198)
9.	Notice to heirs and devisees. I promise to give to each heir and each devisee, if any, (1) a copy of this affidavit showing the date of filing and (2) a copy of the will, if the decedent died testate. I will do this by delivering or mailing the papers to the heirs and devisees at the last-known addresses. I will do this within 30 days after this affidavit is filed with the court.
10.	Who gets what? The following people are entitled to the following property:
	Name of heir or devisee Property to be received
	cogy D trapper JR "cutive restate"
	[If a will exists, the will governs who gets what. If no will exists, the laws of intestacy apply (see the instructions). If one person is to receive the entire estate, state "entire estate" or "100% of residue" under "Property to be received." If, for example, three people share the estate equally, state "one-third of residue" under "Property to be received."]
11.	<u>Creditors</u> . Reasonable efforts have been made to ascertain the creditors of the estate. The following expenses of or claims against the estate remain unpaid (including reimbursement owed to someone who paid claims or expenses):
4	Creditor's name Last-known address Type of claim & estimate or amount
,	nane
	[If the estate has no creditors, write in "none."]
12.	Disputed claims . I, as affiant, dispute the following claims against the estate:
	Creditor's name Last-known address Type of claim & estimate or amount
	none
	[If the estate has no creditors making claims the affiant disputes, write in "none."]

- **13**. Notice to creditors. I promise to give each creditor listed in parts 11 and 12 above a copy of this affidavit showing the date of filing. I will do this by delivering or mailing the papers to the creditor at the last-known address. I will do this within 30 days after this affidavit is filed with the court.
- 14. Notice to Estate Administration. Within 30 days after this affidavit is filed with the court. I promise to mail a copy of the affidavit showing the date of filing to:

Adult and Family Services Division **Estate Administration Section** PO Box 14021 Salem, OR 97309-9913

- 15 Claims may be barred. Some claims against the estate may be barred unless specific things happen.
 - a. Claims against the estate not listed in this affidavit or in amounts larger than those listed in this affidavit may be barred unless.
 - A claim is presented to the affiant within four months of the filing of the affidavit 1) at the address stated in part 1 of this affidavit; or
 - 2) A personal representative of the estate is appointed within the time allowed under ORS 114.555
 - If this affidavit lists one or more claims which the affiant disputes, any such claim may b. be barred unless:
 - A petition for summary determination is filed within four months of the filing of 1) this affidavit: or
 - A personal representative of the estate is appointed within the time allowed under ORS 114.555.

I have read this affidavit. The statements it contains are true and correct to the best of my knowledge.

Affiant

Telephone Number: (253) 587-200 (

Signed and sworn to before me on

CHELSY A BONZER NOTARY PUBLIC - OREGO COMMISSION NO. 341318

Page 4 - Small Estate Affidavit

Notary Public for Offegon/ Lane Clerk of the Court

County of KLAMATH) STATE OF OREGON)

true and correct copy and the whole of the original

of the original. Clerk of Court

Rev. 1/30/01

AVE UP 1