

02 AUG 5 AM 8:47

Vol M02 Page 43995BARBARA SCOTT
81160 LOST CREEK ROAD
DEXTER, OR 97431

First Party's Name and Address

BARBARA SCOTT & LOUISE BOWEN
5975 UHRMANN ROAD
KLAMATH FALLS, OR 97601

Second Party's Name and Address

After recording, return to (Name, Address, Zip):

Thomas A. Huntsberger, P.C.
c/o B&J/Barristers' Aide, Inc.
Court Box #5

Until requested otherwise, send all tax statements to (Name, Address, Zip):

BARBARA SCOTT & LOUISE BOWEN
c/o PAULA WEATHERS
5975 UHRMANN ROAD
KLAMATH FALLS, OR 97601SPACE RESERVED
FOR
RECORDER'S USEState of Oregon, County of Klamath
Recorded 08/05/2002 8:47 a.m.
Vol M02, Pg 43995-44008
Linda Smith, County Clerk
Fee \$ 86⁰⁰ # of Pgs 14

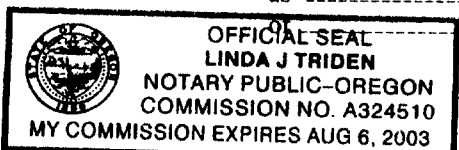
AFFIANT'S DEED

THIS INDENTURE dated AUGUST 1, 2002, by and between
BARBARA SCOTTthe affiant named in the duly filed affidavit concerning the small estate of JAMES L. PINION, Klamath County
Small Estate No: 0202470CV, deceased, hereinafter called the first party,
and BARBARA SCOTT and LOUISE BOWEN, as tenants in common, each as to an undivided one-half interest,
hereinafter called the second party; WITNESSETH:For value received and the consideration hereinafter stated, the first party has granted, bargained, sold and conveyed, and by
these presents does grant, bargain, sell and convey unto the second party and second party's heirs, successors and assigns all the
estate, right and interest of the estate of the deceased, whether acquired by operation of the law or otherwise, in that certain real prop-
erty situated in the County of Klamath, State of Oregon, described as follows, to-wit:See Exhibit "A" attached hereto and
incorporated herein.Subject to the right of Paula Weathers to reside in the house on the property
so long as she maintains the house as her principal residence.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

TO HAVE AND TO HOLD the same unto the second party, and second party's heirs, successors-in-interest and assigns
forever.The true and actual consideration paid for this transfer, stated in terms of dollars, is other than money. However, the
actual consideration consists of or includes other property or value given or promised which is ☐ part of the ☒ the whole (indicate
which) consideration. (The sentence between the symbols [®], if not applicable, should be deleted. See ORS 93.030.)IN WITNESS WHEREOF, the first party has executed this instrument; if first party is a corporation, it has caused its name
to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN
THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REG-
ULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON
ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPRO-
PRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES
AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST
PRACTICES AS DEFINED IN ORS 30.930.Barbara J. Scott
BARBARA SCOTT, Claiming Successor of the
the Small Estate of James L. Pinion

Affiant

STATE OF OREGON, County of Lane ss.This instrument was acknowledged before me on August 1, 2002,
by BARBARA SCOTTThis instrument was acknowledged before me on _____,
by _____,
as _____Linda J. Triden
Notary Public for Oregon
My commission expires 8-6-03

43996

Parcel 1:

That portion of the SW 1/4 NE 1/4 of Section 7, Township 38 South, Range 9 East, Willamette Meridian, Klamath County, Oregon, described as follows:

Beginning at a point on the forty line which bears South 89° 43' East a distance of 440.8 feet from the iron pin which is at the Northwest corner of the SW 1/4 of the NE 1/4 of Section 7, Township 38 South, Range 9 East, Willamette Meridian, and running thence:

Along the forty line South 89° 43' East a distance of 124.2 feet to a point; thence South 0° 52' East a distance of 367.8 feet to a point which is on the Northerly right-of-way line of the 60 foot County Road; thence North 74° 34' West along said Northerly right of way line a distance of 129.3 feet to a point; thence North 0° 52' West a distance of 334.0 feet to the point of beginning.

Parcel 2:

That portion of the SW 1/4 NE 1/4 of Section 7, Township 38 South, Range 9 East, Willamette Meridian, Klamath County, Oregon, described as follows:

Beginning at a point on the 40 line which lies South 89° 43' East a distance of 565 feet from the iron pin which marks the Northwest corner of the SW 1/4 of NE 1/4 of Section 7, Township 38 South of Range 9 East of the Willamette Meridian, in Klamath County, Oregon, and running thence:

South 0° 52' East a distance of 367.8 feet to a point on the Northerly right of way line of the County Road; thence South 49° 54' East along the Northerly right of way line of the County Road a distance of 256.8 feet to a point; thence North 0° 52' West a distance of 533 feet to a point on the 40 line; thence North 89° 43' West along the 40 line a distance of 194.0 feet, more or less, to the point of beginning.

COPY

43997

FILED
STATE OF OREGON
KLAMATH CIRCUIT COURT

2002 JUL 10 PM 2:50

CLERK OF COURT

BY DS

County of KLAMATH)
STATE OF OREGON)
I hereby certify that the within is a
true and correct copy and the whole
of the original.
Clerk of Court

By Barbara Thomas
Date 7-10-02



IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF KLAMATH
PROBATE DEPARTMENT

In The Matter of the Small Estate
of:

JAMES L. PINION,

Deceased.

Small Estate

No: 0202470CV

AFFIDAVIT OF CLAIMING
SUCCESSOR OF
TESTATE ESTATE

STATE OF OREGON)
County of Lane) ss.

I, Babara Scott, being first duly sworn say:

I am a claiming successor, as defined in ORS 114.505(1), to a portion of the
decedent's estate. I am hereinafter referred to as "affiant." This Affidavit is hereinafter referred
to as "Affidavit." This Affidavit is made pursuant to ORS 114.505-114.560.

1.

The following information is given with respect to the decedent:

/

THOMAS A.
HUNTSBERGER, P.C.
870 W. Centennial Blvd.
Springfield, Oregon
97477-5298
(541) 746-6574

a. Name : James L. Pinion
 b. Age : 94
 c. Domicile : Lane County, Oregon
 d. Post-office address : 81160 Lost Creek Road
 Dexter, Oregon 97431
 e. Social Security number : 542-01-3800

2.

Decedent died on May 30, 2002, at his residence in Lane County, Oregon; a certified copy of the decedent's death certificate is attached as Exhibit 1.

3.

The decedent's property subject to administration in Oregon consists of the following:

a. Real property and value thereof:

<u>Description:</u>	<u>Fair Market Value:</u>
House and Real Property located at 5975 Uhrmann Road, Klamath Falls, Oregon 97601; more particularly described on Exhibit 3 attached hereto	\$86,000

b. Personal property and fair market value thereof:

None

4.

No application or petition for the appointment of a personal representative has been granted in Oregon.

5.

Decedent died testate and the decedent's will is attached as Exhibit 2.

6.

The decedent's heir(s) and the heirs' last address known to the affiant are:

<u>Name</u>	<u>Address</u>
Barbara Scott (Daughter)	81160 Lost Creek Road, Dexter, Oregon 97431
Louise Bowen (Daughter)	318 Florentine Yreka, CA 96097

A copy of the Will and this Affidavit showing the date of filing will be delivered or mailed to the heir(s) at the last-known address.

7.

The decedent's devisee and the devisee's last address known to the affiant are:

<u>Name</u>	<u>Address</u>
Barbara Scott (Daughter)	81160 Lost Creek Road, Dexter, OR 97431
Louise Bowen (Daughter)	318 Florentine Yreka, CA 96097
Paula Jean Weathers (Granddaughter)	5975 Uhrmann Road Kalmath Falls, OR 97601

A copy of the Will and this Affidavit showing the date of filing will be delivered or mailed to the devisee at the last-known address.

8.

The interest in the decedent's property described in this Affidavit to which each heir or devisee is entitled is:

<u>Name</u>	<u>Interest</u>
Barbara Scott	One-Half net estate (50%)
Louise Bowen	One-Half net estate (50%)

Paula Jean Weathers

Right to reside in residence
at 5975 Uhrmann Road,
Klamath Falls, Oregon so
Long as maintained as principal
residence

9.

Reasonable efforts have been made to ascertain each creditor of the estate. The expenses of and claims against the estate remaining unpaid or on account of which the affiant or any other person is entitled to reimbursement from the estate, including any known or estimated amount thereof, and the name and address of each creditor, as known to the affiant are:

Name and Address of Creditor

Amount

Thomas A. Huntsberger, P.C.
870 W. Centennial Blvd.
Springfield, OR 97477

\$500 - estimated attorney
Fees and costs for estate
administration

A copy of the Affidavit showing the date of filing will be delivered to each of creditor who has not been paid in full or mailed to the creditor at the last-known address.

10.

The name and address of each person known to the affiant to assert a claim against the estate which the affiant disputes and the last-known or estimated amount thereof:

None

A copy of the Affidavit showing the date of filing will be delivered to each of the above or mailed to each person at his or her last-known address.

11.

A copy of this Affidavit showing the date of filing will be mailed or delivered to the Department of Human Services, Estate Administration Section, Salem, Oregon.

12.

Claims against the estate not listed herein, or in amounts larger than those listed herein, may be barred unless:

THOMAS A.
HUNTSBERGER, P.C.
870 W. Centennial Blvd.
Springfield, Oregon
97477-5298
(541) 746-6574

a) A claim is presented to the affiant within four months of the filing of the Affidavit at the address stated in the Affidavit for presentment of claims; or

b) A personal representative of the estate is appointed within the time allowed under ORS 114.555.

13.

If this Affidavit lists one or more claims which the affiant disputes, any such disputed claim may be barred unless:

a) A petition for summary determination is filed within four months of the filing of the Affidavit; or

b) A personal representative of the estate is appointed within the time allowed under ORS 114.555.

14.

Any noun or verb used in this Affidavit shall be construed as either singular or plural as the context requires.

15.

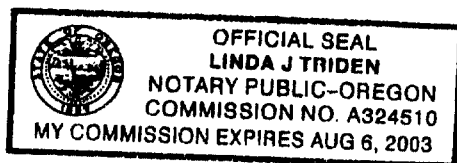
The address for the purposes of presenting a claim to the affiant is:

c/o Thomas A. Huntsberger, P.C.
Attorney at Law
870 W. Centennial Blvd.
Springfield, OR 97477

Barbara J. Scott
Barbara Scott, Claiming Successor

2002. SUBSCRIBED AND SWORN before me this 9th day of July,

Linda J. Triden
Notary Public for Oregon
My commission expires: 8-6-03



CERTIFICATION OF VITAL RECORD

OREGON DEPARTMENT OF HUMAN SERVICES
HEALTH DIVISION
CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH

44002

H-32319
I.D. TAG NO.

1327
Local File Number

136

State File Number

DECEDENT

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PARENTS

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1. DECEDENT'S NAME: James Louis PINION
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): May 30, 2002
4. SOCIAL SECURITY NUMBER: 542-01-3800
5a. AGE - Last Birthday (Years): 94
5b. Under 1 Year: Mo: Days: Hours: Mins:
6. BIRTHPLACE (City and State or Foreign Country): Sparta, OK
7. DATE OF BIRTH (Month, Day, Year): December 31, 1907
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No
9. PLACE OF DEATH (Check only one): ☒ Hospital ☐ Inpatient ☐ Outpatient ☐ DCA ☐ Other
10a. FACILITY NAME (If not institution, give street and number): 8160 Lost Creek Road
10b. CITY, TOWN, OR LOCATION OF DEATH: Dexter
10c. COUNTY OF DEATH: Lane
11. MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify): Widowed
12. SPOUSE (If Married, Widowed): Bessie Anna Pinion
13. RESIDENCE - STATE: Oregon
13a. INSIDE CITY LIMIT 37: Lane
13b. ZIP CODE: 97431
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes - If yes, specify Cuban, Mexican, Puerto Rican, etc.) ☒ No ☐ Yes
15. RACE American (Indicate Black, White, etc. (Specify): White
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (9-12) College (1-4 or 5-)
17. FATHER - NAME first middle last: Miles Berry Pinion
18. MOTHER - NAME first middle maiden: Mary - Bailey
19. INFORMANT - NAME and relationship to decedent: Lawrence W. Scott Son-in-law
20a. METHOD OF DISPOSITION: ☐ Mausoleum ☒ Burial ☐ Cremation ☐ Removal from State
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Klamath Memorial Park
21a. SIGNATURE OF OREGON MEDICAL BOARD LICENSEE OR PHYSICIAN ACTING AS SUCH: [Signature]
21b. OREGON LICENSE NO. (Of Licensee): 3536
22. NAME, ADDRESS AND ZIP OF FACILITY: Buell Funeral Chapel 320 N. 6th St., Springfield, OR 97477
23. DATE FILED (Month, Day, Year): JUN 4 2002
24. REGISTRAR'S SIGNATURE: Victoria Kay Nease

TO BE COMPLETED BY CERTIFYING PHYSICIAN
27. TIME OF DEATH: 8:10 P M
28. WAS MEDICAL EXAMINER NOTIFIED? ☐ Yes ☒ No
29. To the best of my knowledge, death occurred at the time, date, place and due to the cause(s) and manner stated. (Sign measure)
30. DATE SIGNED (Month, Day, Year): 5/31/02
31a. TIME OF DEATH: M
31b. DATE PRONOUNCED DEAD (Month, Day, Year, Hour): M
32. On the basis of examination and/or investigation, in my opinion death occurred at the time, date, place and due to the cause(s) and manner stated. (Signature)
33. DATE SIGNED (Month, Day, Year): COUNTY:
34. NAME, TITLE, ADDRESS AND ZIP OF CERTIFYING MEDICAL EXAMINER (Type or Print): Brian G. Jones MD 2484 River Road Eugene, OR 97404
35. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print):
36. NAME DATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c). Do not enter mode of dying, e.g. Cardiac or Respiratory Arrest.
PART I (a) DUE TO, OR AS A CONSEQUENCE OF: Complications related to pneumonia. Interval between onset and death: Days
(b) DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death:
(c) DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death:
PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not resulting in the underlying cause given in PART I.
37. Did tobacco use contribute to the death? ☐ Yes ☒ No ☐ Probably ☐ Unknown
38. ALTOUSY ☐ Yes ☒ No
39. If YES were findings considered in determining cause of death? ☐ Yes ☒ No ☐ AM
40. MANNER OF DEATH: ☒ Natural ☐ Pending Investigation ☐ Accidental ☐ Undetermined Manner ☐ Suicide ☐ Legal Intervention ☐ Other
41a. DATE OF INJURY (Month, Day, Year): 41b. TIME OF INJURY: 41c. INJURY AT WORK? ☐ Yes ☒ No
41d. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify): 41e. LOCATION (Street and Number or Rural Route Number, City or Town, State):

CAUSE OF DEATH
INSTRUCTIONS
ON REVERSE SIDE
OF GREEN AND
PINK COPY

RESERVE FOR REGISTRAR'S USE

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

JUN 4 2002

DATE ISSUED:

THIS COPY NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER

ADA M. NOBLE
COUNTY REGISTRAR
LANE COUNTY, OREGON

Exhibit "1"
Page 1 of 1

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



LAST WILL AND TESTAMENT

OF

JAMES L. PINION

FILED
STATE OF OREGON
KLAMATH CIRCUIT COURT

2007 JUL 10 PM 2:51

CLERK OF COURT

BY DJO

RECITALS

I, JAMES L. PINION, resident of the State of Oregon, declare this is my Will. I hereby revoke all prior Wills and Codicils executed by me.

I. IDENTIFICATIONS AND DEFINITIONS

For informational purposes, I state that I am the unmarried widower of Bessie Anna Pinion.

I have two children: LOUISE BOWEN, born July 21, 1928, and BARBARA SCOTT, born February 8, 1931. I have no other children.

All references in this Will to a person who "survives me" shall be construed to mean that the person so referred to must survive me by at least thirty (30) days from the date of my death. If the person so referred to predeceases me or dies within thirty (30) days of the date of my death, all of the provisions in this Will for the benefit of such person shall lapse and this Will shall be construed as if such person predeceased me.

I make this Will to dispose of any real and personal property over which I have testamentary power at the time of my death. This Will is not made as a result of any contract to make

James L. Pinion

a Will or not to revoke a Will. If any provision of this Will should fail, all other provisions are to remain effective.

II. DEBTS AND TAXES

I direct my personal representative to pay from my estate all my just debts, the expenses of my last illness, funeral and final interment and the expense of administration of my estate.

I direct my personal representative to pay from my estate all inheritance, transfer and succession taxes which become payable by reason of death and authorize my personal representative to contest or compromise any claims for such taxes. I further direct that all such taxes shall be paid without apportionment thereof and without withholding or collecting any part thereof from any beneficiary under my Will or under any life insurance of mine which may be subject to such tax or from the surviving owner of any property owned jointly with me, it being my intention that all such taxes shall be paid from my estate as an expense of administration.

III. DISPOSITIONS

(1) I give my house and real property located at 5975 Uhrman Road, Klamath Falls, Oregon in equal shares to my two daughters, LOUISE BOWEN and BARBARA SCOTT, subject however, to the right of my granddaughter, PAULA JEAN WEATHERS, to reside in the house so long as Paula maintains it as her principal residence. As a condition of her residence, Paula shall be

James E. Pinion

required to pay all expenses of maintaining the house and property, including utilities, repairs, and real property taxes.

(2) I give the residue of my estate in equal shares to my two daughters, LOUISE BOWEN and BARBARA SCOTT.

(3) If either of my daughters fails to survive me, I give such predeceased daughter's share of my estate to her issue who survive me, by right of representation. If there are no surviving issue, said predeceased daughter's share of my estate shall go to my surviving daughter.

IV. PERSONAL REPRESENTATIVE

I appoint LAWRENCE SCOTT, currently residing in Dexter, Oregon, as personal representative of my estate, to serve without bond. If for any reason he cannot act, I appoint ROBIN SCOTT, as personal representative, to serve without bond.

I direct my personal representative to preserve, settle and distribute my estate in accordance with all lawful authority now or hereafter in effect including, but not limited to, the authority to prosecute any claim for wrongful death which is necessary for the protection of my estate.

If any beneficiary under this Will is a minor, my personal representative shall have the power, at his sole discretion, to distribute such beneficiaries' share pursuant to the Uniform Gift to Minors Act of the State of Oregon, or a

James S. Pinior

substantially similar act of another state.

I subscribe my name to this Will this 23rd day of March, 1994.

James L. Pinion

JAMES L. PINION

SS No. 542-01-3800

On the 23rd day of March, 1994, JAMES L. PINION declared to those of us whose names appear below that this Will consisting of four pages, including this page signed by us as witnesses was his Will. He then signed this Will in our presence. At his request and in his presence we each of us now subscribe our names as witnesses.

Lata J. Fidi

residing at

5120 Center Way

Eugene, OR 97405

Christie Moody

residing at

985 W. 10th

Junction City, OR 97448

James L. Pinion

44007

FILED
STATE OF OREGON
KLAMATH CIRCUIT COURT

2002 JUL 10 PM 2:51

CLERK OF COURT

BY DSB

AFFIDAVIT OF ATTESTING
WITNESSES TO WILL OF
JAMES L. PINION

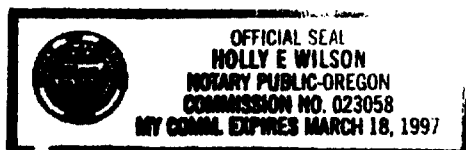
STATE OF OREGON)
) ss:
County of Lane)

I, LINDA J. TRIDEN and I, CHRISTINE MOODY
each duly sworn, say: I am one of the attesting witnesses to the
Will of JAMES L. PINION, dated March 23, 1994, the
original of which is hereto attached.

Said Will was signed by JAMES L. PINION on said date
in the presence of each of us and at the request of JAMES L. PINION
and in his presence and in the presence of the other undersigned
witness, I subscribed my name to the Will as an attesting witness.

To the best of my knowledge and belief, JAMES L. PINION
was over the age of 18 years, of sound and disposing mind and
memory, not acting under duress or undue influence and was not
induced by misrepresentation or fraud to execute said Will.

Linda J. Triden
Christine Moody
Signed or attested to before me this 23rd day of
March, 1994.
Holly E. Wilson



Notary Public for Oregon
My commission expires: 3-18-97

EXHIBIT " 2 "

Page 5 of 5

EXHIBIT "3"

Parcel 1:

That portion of the SW 1/4 NE 1/4 of Section 7, Township 38 South, Range 9 East, Willamette Meridian, Klamath County, Oregon, described as follows:

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South 0° 52' East a distance of 367.8 feet to a point on the Northerly right of way line of the County Road; thence South 49° 54' East along the Northerly right of way line of the County Road a distance of 256.8 feet to a point; thence North 0° 52' West a distance of 533 feet to a point on the 40 line; thence North 89° 43' West along the 40 line a distance of 194.0 feet, more or less, to the point of beginning.