



After recording return to:

Aaron L. Emmons

3310 Bristol Avenue

Klamath Falls, OR 97603

THIS SPAC

2013-007861

Klamath County, Oregon



00139043201300078610030032

07/11/2013 03:40:08 PM

Fee: \$47.00

Until a change is requested all tax statements shall be sent to the following address:

Aaron L. Emmons

3310 Bristol Avenue

Klamath Falls, OR 97603

Escrow No. MT98027-CT

Title No. 0098027

SWD r.020212

STATUTORY WARRANTY DEED

Patricia Windsor, Trustee of The Windsor and Badorek Revocable Living Trust,

Grantor(s), hereby convey and warrant to

Aaron L. Emmons and Rebecca A. Emmons, as tenants by the entirety,

Grantee(s), the following described real property in the County of **KLAMATH** and State of Oregon free of encumbrances except as specifically set forth herein:

Lot 46, CASITAS, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

The true and actual consideration for this conveyance is **\$119,000.00**.

The above-described property is free of encumbrances except all those items of record, if any, as of the date of this deed and those shown below, if any:

2013-2014 Real Property Taxes a lien not yet due and payable.

4/2/2013

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

Dated this 11 day of July, 2013.

Patricia Windsor, Trustee of The Windsor and Badorek
Revocable Living Trust

BY: Patricia Windsor
Patricia Windsor, Trustee

State of Oregon
County of KLAMATH

This instrument was acknowledged before me on July 11, 2013 by Patricia Windsor, Trustee of The Windsor and Badorek Revocable Living Trust.

Lisa Legget-Weatherby
(Notary Public for Oregon)
My commission expires 11/20/2013



CERTIFICATION OF VITAL RECORD

606857
I.D. TAG NO.

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

136-2011-013733
STATE FILE NUMBER

TO BE COMPLETED BY FUNERAL FACILITY	Legal Name		First Donald	Middle Kent	Last Badorek	Suffix	Death Date June 05, 2011	
	Sex Male	Age 60 years	Social Security Number 541-58-5672		County of Death Klamath			
	Birthdate January 01, 1951		Birthplace Klamath Falls, Oregon			Was Decedent Ever in U.S. Armed Forces? No		
	Residence: 3310 Bristol Avenue				City/Town Klamath Falls			
	Residence County Klamath		State or Foreign Country Oregon		Zip Code +4 97603	Inside City Limits? Yes		
	Marital Status at Time of Death Married		Spouse's Name Prior to First Marriage Patricia Windsor					
	Father's Name Arthur Carl Badorek				Mother's Name Prior to First Marriage Connie Fields			
	Informant's Name Patricia Windsor		Telephone Number Not Available	Relationship to Decedent Spouse	Mailing Address 3310 Bristol Avenue, Klamath Falls, OR 97603			
	Place of Death Hospital-Inpatient		Facility Name Sky Lakes Medical Center					
	Location of Death 2865 Daggett Avenue		City/Town or Location of Death Klamath Falls		State Oregon	Zip Code + 4 97601		
Method of Disposition Cremation		Place of Disposition Eternal Hills Crematory		Location (City/Town and State) Klamath Falls, Oregon				
Name and Complete Address of Funeral Facility Eternal Hills Funeral Home 4711 Highway 39, Klamath Falls, Oregon 97603								
Date of Disposition TBD		Funeral Director's Signature <i>Eleanor L. Olson</i>			Electronically Signed	OR License Number CO-3860		
Registrar's Signature <i>/S/ Maribynn Sutherland</i>		Date Received June 09, 2011		Local File Number 928				
Amendment Death Date formerly Jun-01-2011; amended by medical certifier's affidavit Jun-21-2011 Z#89329; J.A. Woodward, State Registrar, mgrf.								

TO BE COMPLETED BY MEDICAL CERTIFIER	Was case referred to Medical Examiner? No		Autopsy? No		Were autopsy findings available to complete the cause of death?		Time of Death 10:40 AM
	CAUSE OF DEATH						Approximate Interval: Onset to Death
	IMMEDIATE CAUSE ↓ Respiratory Failure						2 weeks
	a. Due to (or as a consequence of) ↓						
	b. Due to (or as a consequence of) ↓						
	c. Due to (or as a consequence of) ↓						
	d. Due to (or as a consequence of) ↓						
	Other significant conditions contributing to death ATN; CHF; Cellulitis (L) arm; Atrial Fib.; Obesity; Hypoventilation; DM;						
	Manner of Death Natural		If Female		Did tobacco use contribute to death? Yes		
	Date of Injury	Time of Injury	Place of Injury		Injury at Work?		
Location of injury							
Describe how injury occurred					If transportation injury, specify.		
Name and Address of Certifier John Joseph Kleeman 1905 Main Street, Klamath Falls, Oregon 97601							
Name and Title of Attending Physician If Other than Certifier						Date Signed June 07, 2011	
Medical Certifier <i>/S/ John Joseph Kleeman</i>				Title of Certifier M.D.		License Number MD13879	
Amendment							



45-2CC (01/06)



I CERTIFY THAT THIS IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORD FACTS ON FILE IN THE VITAL RECORDS UNIT OF THE OREGON CENTER FOR HEALTH STATISTICS.

DATE ISSUED:

June 22, 2011

JENNIFER A. WOODWARD
JENNIFER A. WOODWARD, Ph.D.
STATE REGISTRAR

THIS COPY IS NOT VALID WITHOUT INTAGLIO, STATE SEAL AND BORDER.