



After recording return to:

Todd C. Kaczmarczyk

204 W 14th Street

The Dalles, OR 97058

**2014-007187**

Klamath County, Oregon

07/08/2014 03:26:15 PM

Fee: \$127.00

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

Todd C. Kaczmarczyk

204 W 14th Street

The Dalles, OR 97058

Escrow No. MT101082CT

Title No. 0101082

SWD r.020212

### STATUTORY WARRANTY DEED

**Robert A. Cramer and Rhonda C. Geiss, Successor Trustees of the Cramer Family Trust, dated June 3, 1992,**

Grantor(s), hereby convey and warrant to

**Todd C. Kaczmarczyk,**

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:

Lots 7, 8 and 9 in Block 15 of FIRST ADDITION TO CHILOQUIN, 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 **\$12,000.00**.

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:

**2014-2015 Real Property Taxes a lien not yet due and payable.**

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.

\$57.00

Dated this 7 day of July 2014.

Robert A. Cramer and Rhonda C. Geiss, Successor  
Trustees of the  
Cramer Family Trust, dated June 3, 1992.

BY:

Robert A. Cramer, Successor Trustee

BY:

Rhonda C. Geiss, Successor Trustee

State of Oregon

County of Marion

This instrument was acknowledged before me on July 7, 2014 by Robert A. Cramer, Successor Trustee  
of the Cramer Family Trust, dated June 3, 1992.

Irina P. Flu  
(Notary Public for Oregon)

My commission expires 3-5-17



STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On \_\_\_\_\_, 2014 before me, \_\_\_\_\_ personally appeared Rhonda C. Geiss, Successor Trustee of the Cramer Family Trust, dated June 3, 1992 personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that executed the same in authorized capacity(ies), and that by signatures(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_

Dated this 2 day of July, 2014.

Robert A. Cramer and Rhonda C. Geiss, Successor  
Trustees of the  
Cramer Family Trust, dated June 3, 1992

BY: \_\_\_\_\_  
Robert A. Cramer, Successor Trustee

BY: Rhonda C Geiss  
Rhonda C. Geiss, Successor Trustee

State of Oregon  
County of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_, 2014 by Robert A. Cramer, Successor Trustee  
of the Cramer Family Trust, dated June 3, 1992.

\_\_\_\_\_  
(Notary Public for Oregon)

My commission expires \_\_\_\_\_

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

On \_\_\_\_\_, 2014 before me, \_\_\_\_\_ personally appeared Rhonda C.  
Geiss, Successor Trustee of the Cramer Family Trust, dated June 3, 1992 personally known to me (or proved to me on  
the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and  
acknowledged to me that executed the same in authorized capacity(ies), and that by signatures(s) on the instrument the  
person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_

*See Attached  
Notary*

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Stanislaus

On July 2, 2014 before me, Catherine M. Melgoza, Notary Public

personally appeared Rhonda C. Geiss

Here Insert Name and Title of the Officer

Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Signature of Notary Public

Place Notary Seal Above

## OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

### Description of Attached Document

Title or Type of Document: Statutory Warranty Deed

Document Date: July 2, 2014 Number of Pages: 1

Signer(s) Other Than Named Above: \_\_\_\_\_

### Capacity(ies) Claimed by Signer(s)

Signer's Name: Rhonda C. Geiss

- ☒ Individual  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here



**RECORDING COVER SHEET**

ORS 205.234

This cover sheet has been prepared by the person presenting the attached instrument for recording. Any error in this cover sheet DOES NOT affect the transaction(s) contained in the instrument itself.

Reference – Escrow No. MT101082CT  
Title Order No. 0101082

Please print or type information.

**1. AFTER RECORDING RETURN TO –**

Required by ORS 205.180(4) & 205.238:

Name: **Rhonda Geiss**

Address: **2461 Greger Street**

City, ST Zip: **Oakdale, CA 95361**

**2. TITLE(S) OF THE TRANSACTION(S) –** Required by ORS 205.234(1)(a)

Note: "Transaction" 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. Enter descriptive title for the lien instrument:

**Document Title(s): Affidavit of Claiming Successor of Small Estate of Testate Estate**

**3. DIRECT PARTY / GRANTOR Names and Addresses –** Required by ORS 205.234(1)(b)  
for Mortgages/Liens list Borrower/Debtor

Borrower Name & Address: **Daniel Eugene Cramer, deceased**

**4. INDIRECT PARTY / GRANTEE Names and Addresses –** Required by ORS 205.234(1)(b)  
for Mortgages/Liens list Beneficiary/Lender/Creditor

**Rhonda Geiss, 2461 Greger Street, Oakdale, CA 95361**

**5. For an instrument conveying or contracting to convey fee title, the information required by ORS 93.260:**  
**UNTIL A CHANGE IS REQUESTED, ALL TAX STATEMENTS SHALL BE SENT TO**

Name: **NO Change**

Address:

City, ST Zip:

**Consideration: \$ N/A**

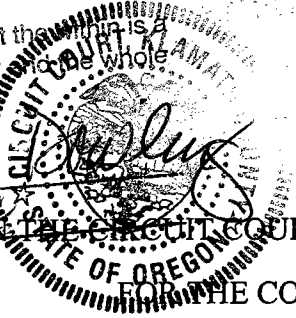
County of KLAMATH)  
STATE OF OREGON)

I hereby CERTIFY that this is a  
true and correct copy of the whole  
of the original.  
Clerk of Court

By

Date

6/30/19



FILED  
STATE OF OREGON  
KLAMATH CIRCUIT COURT  
2005 MAY 17 PH 2: 03  
CLERK OF COURT

In the Matter of the  
Estate of

DANIEL EUGENE CRAMER,

Deceased.

No. 05 02019 CV

AFFIDAVIT OF CLAIMING  
SUCCESSOR OF SMALL ESTATE  
OF TESTATE ESTATE

STATE OF OREGON

County of Klamath

ss:

I, Carol S. Cramer, 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 regard to the decedent:

- (a) Name: Daniel Eugene Cramer
- (b) Age: 65
- (c) Domicile: Klamath County, Oregon
- (d) Post Office Address: 25706 Drews Rd., Sprague River, OR
- (e) Social Security No.: 544-42-9096

2.

The decedent died on November 10, 2004, at Merle West Medical Center ER, Klamath Falls,  
Oregon; a certified copy of the decedent's death certificate is attached as Exhibit 1.

AFFIDAVIT OF CLAIMING SUCCESSOR OF SMALL ESTATE OF TESTATE ESTATE, Page 1

**DONALD R. CRANE**

Attorney at Law

37070 Highway 62, Chiloquin, OR 97624

Tel: (541) 783-7725 / Fax: (541) 783-2245

doncrane@direcway.com

3.

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

(a) Real property and value thereof:

(1) Lots 7,8 & 9, Block 15 of First Addition to Chiloquin, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.  
Estimated Value: \$35,000  
Tax Account: 3407-034DC-01600-000 Key No: 202998

(2) Lot 29, Block 78 of Eighth Addition to Nimrod River Park, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. Estimated Value: \$15,000

(3) Lot 30, Block 78 of Eighth Addition to Nimrod River Park, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. Estimated Value: \$15,000

(4) Lot 26 of Nimrod River Park, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Together with a portion of Lot 27 of Nimrod River Park according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon, described as follows:

Beginning at the Southeast corner of Lot 26; thence South 01°04' E to the North Bank of the Sprague River; thence in a Westerly direction along the North Bank of the Sprague River to the West line of Section 9, T 36 S, R 11 E.W.M.; thence North along the West line of Section 9 to the Southwest corner of Lot 26; thence Easterly along the South line of Lot 26 to the point of beginning. Estimated Value: \$20,000

(b) Personal property and fair market value thereof: NA

4.

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

5.

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

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AFFIDAVIT OF CLAIMING SUCCESSOR OF SMALL ESTATE OF TESTATE ESTATE, Page 2

**DONALD R. CRANE**

*Attorney at Law*

37070 Highway 62, Chiloquin, OR 97624

Tel: (541) 783-7725 / Fax: (541) 783-2245

*doncrane@direcway.com*

6.

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

Name	Address
Carol S. Cramer Wife	P.O. Box 359 Keno, OR 97627
Rhonda C. Geiss Daughter	10510 Gibbs Drive Oakdale, CA 95361
Robert A. Cramer Son	P.O. Box 359 Keno, OR 97627
John R. Cramer Son	P.O. Box 910 Silverton, OR 97381

A copy of the will, and this affidavit showing the date of filing, will be delivered or mailed to the heir at the last-known address.

7.

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

Name	Address
Carol S. Cramer Trustee of the Cramer Family Trust dated June 3, 1992	P.O. Box 359 Keno, OR 97627

A copy of the will, and a copy of 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 devisee is entitled is:

	Name	Address
100%	Carol S. Cramer Trustee of the Cramer Family Trust dated June 3, 1992	P.O. Box 359 Keno, OR 97627

AFFIDAVIT OF CLAIMING SUCCESSOR OF SMALL ESTATE OF TESTATE ESTATE, Page 3

**DONALD R. CRANE**  
*Attorney at Law*  
37070 Highway 62, Chiloquin, OR 97624  
Tel: (541) 783-7725 / Fax: (541) 783-2245  
[doncrane@direcway.com](mailto:doncrane@direcway.com)



However, attached hereto as Exhibits 3 and 4, the trustee and decedent's spouse have filed disclaimers with this affidavit, the effect of which will be to transfer title to the real property described in paragraph 3 to the children of decedent, Rhonda C. Geiss, Robert A. Cramer, and John R. Cramer, as tenants in common.

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: NONE

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

11.

A copy of this affidavit showing the date of filing has been mailed or delivered to:

Senior & Disabled Services Division  
Estate Administration Unit  
P.O. Box 14021-5024  
Salem, OR 97309

by depositing the copy of the affidavit in the United States Postal Service in a sealed envelope, with postage prepaid.

12.

Claims against the estate not listed herein, or in amounts larger than those listed herein, may be barred unless (a) a claim is presented to the affiant within four months of the filing of this affidavit at the address set forth in this paragraph or (b) a personal representative of the estate is appointed within the time allowed under ORS 114.555.

AFFIDAVIT OF CLAIMING SUCCESSOR OF SMALL ESTATE OF TESTATE ESTATE, Page 4

**DONALD R. CRANE**  
*Attorney at Law*  
37070 Highway 62, Chiloquin, OR 97624  
Tel: (541) 783-7725 / Fax: (541) 783-2245  
[doncrane@direcway.com](mailto:doncrane@direcway.com)

13.

If there is listed one or more claims that the affiant disputes, any such claim may be barred unless (a) a petition for summary determination is filed within four months of the filing of this affidavit; or (b) a personal representative of the estate is appointed within the time allowed under ORS 114.555.

14.

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

Carol S. Cramer  
Trustee of the Cramer Family Trust

P.O. Box 359  
Keno, OR 97627

15.

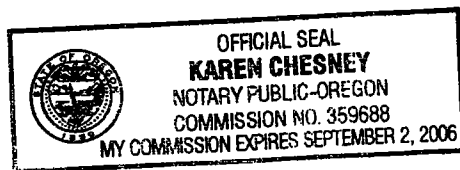
Any noun or verb used in this affidavit shall be construed as either singular or plural as the context requires.

16.

Exhibit 1, 2, 3 and 4 attached hereto are each hereby made a part hereof as though fully set forth at the place where reference to the exhibit is made.

Carol S. Cramer  
CAROL S. CRAMER

Subscribed and sworn to before me this 16 day of May, 2005.



Karen Chesney  
Notary Public for Oregon  
My commission expires: 9/2/06

AFFIDAVIT OF CLAIMING SUCCESSOR OF SMALL ESTATE OF TESTATE ESTATE, Page 5

**DONALD R. CRANE**  
Attorney at Law  
37070 Highway 62, Chiloquin, OR 97624  
Tel: (541) 783-7725 / Fax: (541) 783-2245  
doncrane@direcway.com

# CERTIFICATE OF VITAL RECORD

## OREGON DEPARTMENT OF HUMAN SERVICES CENTER FOR HEALTH STATISTICS

418994  
I.D. TAG NO.

Local File Number

### CERTIFICATE OF DEATH

136-

State File Number

DECEDENT

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_  
6. \_\_\_\_\_

PARENTS

DISPOSITION

7. \_\_\_\_\_  
8. \_\_\_\_\_  
9. \_\_\_\_\_

REGISTRAR

10. \_\_\_\_\_  
11. \_\_\_\_\_

CERTIFIER

12. \_\_\_\_\_  
13. \_\_\_\_\_  
14. \_\_\_\_\_

DESIGNATE  
CONDITIONS,  
IF ANY,  
WHICH GAVE  
RISE TO  
IMMEDIATE  
CAUSE,  
STATING THE  
UNDERLYING  
CAUSE LAST

CAUSE OF  
DEATH

15. \_\_\_\_\_  
16. \_\_\_\_\_

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

1. DECEDENT'S NAME First: Daniel Middle: Eugene Last: CRAMER			2. SEX M	3. DATE OF DEATH (Month, Day, Year) November 10, 2004
4. SOCIAL SECURITY NUMBER 544-42-9096	5a. AGE-Last Birthday (Years) 65	5b. Under 1 Year Mos. Days	5c. Under 1 Day Hours Mins.	6. BIRTHPLACE (City and State or Foreign Country) Terrace, B.C., Canada
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		9a. PLACE OF DEATH (Check one only) <input type="checkbox"/> HOSPITAL <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input checked="" type="checkbox"/> DOA <input type="checkbox"/> OTHER <input type="checkbox"/> Nursing Home <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other (Specify)		
9b. FACILITY NAME (If not an institution, give street and number.) Merle West Medical Center, ER		9c. CITY, TOWN, OR LOCATION OF DEATH Klamath Falls		9d. COUNTY OF DEATH Klamath
10a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.) Installer		10b. KIND OF BUSINESS/INDUSTRY A T & T		11. MARITAL STATUS - Married, Never Married, Widowed, Divorced. (Specify) Married
12. SPOUSE (If Married, Widowed) Carol Sylvia Tuomala Cramer				
13a. RESIDENCE - STATE Oregon	13b. COUNTY Klamath	13c. CITY, TOWN OR LOCATION Sprague River		13d. STREET AND NUMBER 25706 Drews Road
13e. INSIDE CITY LIMITS? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	13f. ZIP CODE 97639	14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		15. RACE American Indian, Black, White, etc. (Specify) White
16. DECEDENT'S EDUCATION (Specify only highest grade completed.) 12				
17. FATHER'S NAME First Middle Last Lloyd - Cramer		18. MOTHER'S NAME First Middle Maiden Esther Lois Doney		19. INFORMANT'S NAME and relationship to deceased Carol S. Cramer, wife
20a. METHOD OF DISPOSITION <input type="checkbox"/> Burial <input checked="" type="checkbox"/> Cremation <input type="checkbox"/> Mausoleum <input type="checkbox"/> Removal from State <input type="checkbox"/> Donation <input type="checkbox"/> Other (Specify)		20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place.) Pyramid Cremations		20c. LOCATION (City or Town, State) Klamath Falls, OR 97603
21a. SIGNATURE OF OREGON FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH <i>Shelley J. Davenport</i>		21b. OREGON LICENSE NO. (Of Licensee) CO-3104		22. NAME, ADDRESS AND ZIP CODE OF FACILITY Davenport's Chapel of the Good Shepherd, 6420 So. 6th St., Klamath Falls, OR 97603-7194
23. DATE FILED (Month, Day, Year) NOV 17 2004		24. REGISTRAR'S SIGNATURE <i>Christa Papp</i>		

RESERVED FOR REGISTRAR'S USE

TO BE COMPLETED BY CERTIFYING PHYSICIAN		TO BE COMPLETED ONLY BY MEDICAL EXAMINER	
27. TIME OF DEATH 2000 P M	28. WAS MEDICAL EXAMINER NOTIFIED? (The Medical Examiner MUST be notified of all injury and poisoning deaths.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	31a. TIME OF DEATH M	31b. DATE PRONOUNCED DEAD (Month, Day, Year, Hour) M
29. To the best of my knowledge, death occurred at the time, date, place, and due to the cause(s) and manner stated. (Signature) <i>Michelle Perry</i>		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)	
30. DATE SIGNED (Month, Day, Year) November 12, 2004		33. DATE SIGNED (Month, Day, Year) COUNTY	
34. NAME, TITLE, ADDRESS AND ZIP CODE OF CERTIFIER/MEDICAL EXAMINER (Type or Print) Joanna B. Narkiewicz-Jodko, MD, 2200 Bryant Williams Drive, Suite #3, K.F., OR 97601			
35. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			

36. IMMEDIATE CAUSE ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c). Do not enter place of time (e.g., Chrysler Restaurant Arrest)				Interval between onset and death Years
(a) Atherosclerotic Coronary Artery Disease DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death Days
{ (b) Acute Septal Myocardial Infarction DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death
(c) OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not resulting in the underlying cause given in PART I. Old Anterior MI, S/P LAD Stent				
40. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Accident <input type="checkbox"/> Undetermined Manner <input type="checkbox"/> Suicide <input type="checkbox"/> Legal Intervention <input type="checkbox"/> Homicide	41a. DATE OF INJURY (Month, Day, Year)	41b. TIME OF INJURY M	41c. INJURY AT WORK? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	41d. DESCRIBE HOW INJURY OCCURRED
41e. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)			41f. LOCATION (Street and Number or Rural Route Number, City or Town, State)	

RESERVED FOR REGISTRAR'S USE

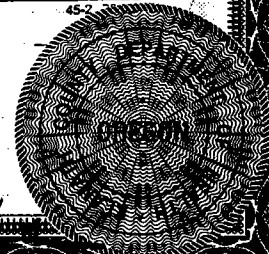
ORIGINAL VITAL STATISTICS COPY

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

DATE ISSUED: NOV 17 2004

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

*Michelle Perry*  
MICHELLE PERRY  
COUNTY REGISTRAR  
KLAMATH COUNTY, OREGON



FILED  
STATE OF OREGON  
KLAMATH CIRCUIT COURT  
2005 MAY 17 PM 2:13  
CLERK OF COURT  
BY JS

# WILL OF DANIEL E. CRAMER

## ARTICLE 1 DECLARATIONS

I, DANIEL E. CRAMER, declare the following:

Testamentary Intent: This document is my Will, and I revoke all other Wills and codicils that I have previously made.

### Family Declarations:

Residence: State of California, County of Lake  
Marital Status: Married to CAROL S. CRAMER  
Minor children living: None  
Adult children living: RHONDA C. GEISS, ROBERT A. CRAMER  
and JOHN R. CRAMER  
Deceased children: None

## ARTICLE 2 PROPERTY DISPOSITION

Residue - Pour-Over to Living Trust: I give all of my estate to the Trustee of the CRAMER FAMILY TRUST, dated June 3, 1992, termed the "pour-over beneficiary," to be held and administered by the Trustee according to the terms of that trust. If the pour-over beneficiary is not in existence at the time of my death, then I hereby incorporate herein by reference the terms of said trust on the date of its execution, and I give the residue of my estate to the Trustee named in said trust, in trust, to be held, administered, and distributed as therein provided.

Payment of Death Taxes: If at the time of my death the Living Trust no longer exists or, if it does still exist but is insufficient to pay death taxes, I direct my Executor to pay such taxes. To the extent other assets are available, the Executor is directed not to use any assets or benefits excludable from federal estate tax to pay taxes, debts, or other charges enforceable against my estate.

## ARTICLE 3 OFFICE OF EXECUTOR

Nominations: I nominate as Executor and as successor Executor of this Will those named below. Each successor Executor shall

serve in the order designated if the prior designated Executor fails to qualify or ceases to act. The term "Executor" shall include any personal representative of the estate.

First: CAROL S. CRAMER  
Second: RHONDA C. GEISS  
Third: ROBERT A. CRAMER  
Fourth: JOHN R. CRAMER

Bond - Waiver: I request that the court not require bond of any executor nominated in this Will.

Independent Administration - Permitted: The Executor may administer my estate under the California Independent Administration of Estates Act.

Sell Assets: The Executor shall have the power to sell, with or without notice, at either public or private sale, for cash or terms, any property of my estate as the Executor, in the Executor's reasonable discretion, considers necessary for the proper administration and distribution of my estate.

Lease Property: The Executor shall have the power to lease all or any property of my estate on such terms that the Executor considers proper.

- (1) "Descendants" shall mean lineal descendants in any degree of the ancestor designated and shall include persons adopted during minority.
- (2) "Death taxes" shall include Federal, foreign, state and local estate and inheritance taxes, including penalties and interest.
- (3) The masculine, feminine, or neuter gender and the singular or plural number shall each include the others whenever the context indicates.

Disinheritance - General: Except as otherwise provided in this Will, I have intentionally omitted to provide herein for any of my heirs, or persons claiming to be my heirs, living at the date of my death, whether or not known to me.

Survivorship Requirement: For all gifts under this Will, I require that the beneficiary survive me for thirty (30) days before entitlement to such gift.

Signature Clause: I subscribe my name to this Will in Lake County, California on June 3, 1992.

  
DANIEL E. CRAMER

Attestation Clause: DANIEL E. CRAMER, the testator, declared to us, the undersigned, that this instrument consisting of three (3) pages, including the page signed by us as witnesses, was his Will and requested us to act as witnesses to it. He thereupon signed this Will in our presence, all of us being present at the same time. We now, at his request, in his presence, and in the presence of each other, subscribe our names as witnesses.

Each of us is acquainted with the testator who, at the time of executing this document, was over 18 years of age.

It is our belief that he is of sound mind and memory and is under no constraint or undue influence whatsoever.

Each of us declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on June 3, 1992 in Lake County,, California.

Witness:

  
FRANCIS C. STOCKUM

Address

15372 Lakeshore Dr.  
Clearlake, CA 95422

  
MARIE CLAIRE STOCKUM

9050 Soda Bay Rd.  
Kelseyville, CA 95451

EXHIBIT 3 Page 1 of 2

1 North along the West line of Section 9 to the Southwest corner of Lot 26; thence  
2 Easterly along the South line of Lot 26 to the point of beginning.

3.

3 This disclaimer is irrevocable.

4  
5 Dated this 16 day of May, 2005.

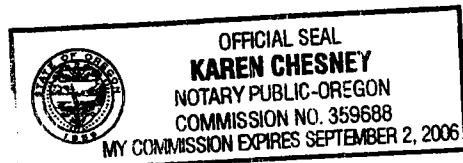
6 Carol S Cramer  
7 Carol S. Cramer, Trustee of the Cramer Family  
8 Trust, dated June 3, 1992

9 STATE OF OREGON )  
10 County of Klamath ) ss:

11 Carol S. Cramer, being duly sworn, depose and say: I am the sole Trustee of the Cramer  
12 Family Trust dated June 3, 1992, disclaimant in the above-entitled disclaimer, and the foregoing  
13 disclaimer to cover residuary interest is true as I verily believe.

14 Carol S Cramer  
15 Carol S. Cramer, Trustee of the Cramer Family  
16 Trust, dated June 3, 1992

17 SUBSCRIBED AND SWORN TO before me on May 16, 2005



26 Karen Chesney  
27 Notary Public for Oregon  
28 My commission expires: 9/2/06

26 TRUSTEE'S DISCLAIMER OF RESIDUARY INTEREST, Page 2

27 DONALD R. CRANE  
28 Attorney at Law  
37070 Highway 62, Chiloquin, OR 97624  
Tel: (541) 783-7725 / Fax: (541) 783-2245  
doncrane@direcway.com



1  
2  
3  
4 IN THE CIRCUIT COURT OF THE STATE OF OREGON  
5 FOR THE COUNTY OF KLAMATH

6 In the Matter of the  
7 Estate of

No. 050 2019 CV

8 DANIEL EUGENE CRAMER,

DISCLAIMER BY SURVIVING SPOUSE

Deceased.

9 I, Carol S. Cramer, surviving spouse of the decedent, pursuant to ORS 105.623-105.649,  
10 hereby disclaim my interest in the following estate property:

11 (a) Real property:

12 (1) Lots 7,8 & 9, Block 15 of First Addition to Chiloquin, according to the official  
13 plat thereof on file in the office of the County Clerk of Klamath County, Oregon.  
Tax Account: 3407-034DC-01600-000 Key No: 202998

14 (2) Lots 12 and 13, Block 28 of Fourth Addition to Nimrod River Park, according to  
15 the official plat thereof on file in the office of the County Clerk of Klamath County,  
Oregon.

16 (3) Lot 29, Block 78 of Eighth Addition to Nimrod River Park, according to the  
17 official plat thereof on file in the office of the County Clerk of Klamath County,  
Oregon.

18 (4) Lot 30, Block 78 of Eighth Addition to Nimrod River Park, according to the  
19 official plat thereof on file in the office of the County Clerk of Klamath County,  
Oregon.

20 (5) Lot 26 of Nimrod River Park, according to the official plat thereof on file in the  
21 office of the County Clerk of Klamath County, Oregon.  
22 Together with a portion of Lot 27 of Nimrod River Park according to the official plat  
23 thereof on file in the office of the County Clerk of Klamath County, Oregon, described  
24 as follows: Beginning at the Southeast corner of Lot 26; thence South 01°04' E to the  
North Bank of the Sprague River; thence in a Westerly direction along the North Bank  
25 of the Sprague River to the West line of Section 9, T 36 S, R 11 E.W.M.; thence  
North along the West line of Section 9 to the Southwest corner of Lot 26; thence  
Easterly along the South line of Lot 26 to the point of beginning.

26 DISCLAIMER BY SURVIVING SPOUSE, Page 1

27 DONALD R. CRANE

Attorney at Law

37070 Highway 62, Chiloquin, OR 97624

Tel: (541) 783-7725 / Fax: (541) 783-2245

28 doncrane@direcway.com

2.

This disclaimer is precautionary. It is intended to be effective only to the extent that I otherwise have an interest in the disclaimed property pursuant to the documents establishing title to the property or the provisions of my deceased spouse's will.

3.

This disclaimer is irrevocable.

Dated this 16 day of May, 2005.



Carol S Cramer  
CAROL S. CRAMER

STATE OF OREGON )

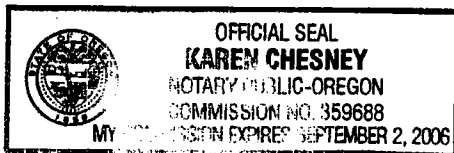
County of Klamath )

ss:

Carol S. Cramer, being duly sworn, depose and say: I am the disclaimant in the above-entitled disclaimer by surviving spouse and the foregoing disclaimer by surviving spouse is true as I verily believe.

Carol S Cramer  
CAROL S. CRAMER

SUBSCRIBED AND SWORN TO before me on May 16, 2005



Karen Chesney  
Notary Public for Oregon  
My commission expires: 9-2-06

DISCLAIMER BY SURVIVING SPOUSE, Page 2

DONALD R. CRANE  
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37070 Highway 62, Chiloquin, OR 97624  
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EXHIBIT 4 Page 2 of 2