

**2021-001331**

**Klamath County, Oregon**

01/28/2021 03:24:01 PM

Fee: \$142.00

**Grantor's Name and Address**

**Salvadore Gordon Marsh and Maria Pavalich**

**78529 Alliance Way**

**Palm Desert, CA 92211**

**Grantee's Name and Address**

**After recording return to:**

**Raymond G Collins Trustee for The Collins Trust**

**1423 North Avon St**

**Burbank, CA 91505**

**Until a change is requested all tax statements**

**shall be sent to the following address:**

**Raymond G Collins Trustee for the Collins Trust**

**As above**

**File No. 431405AM**

**QUITCLAIM DEED**

**Salvadore Gordon Marsh and Maria Pavalich, sole surviving Heirs of Josephine L. Snyder, deceased, Grantor(s), hereby releases and quitclaims to**

**Raymond G Collins, Trustee of the Collins Trust dated November 21, 2005,**

**Grantee(s), all right, title and interest in and to the following described real property situated in the County of Klamath, State of Oregon, described as follows, to wit:**

**The S1/2 SW1/4 NW1/4 of Section 12, Township 34 South, Range 7 East of the Willamette Meridian, Klamath County, Oregon.**

**The true and actual consideration paid for this transfer, stated in terms of dollars, is Fullfillment of Contract recorded September 8, 1978 in Instrument M78, page 19945, Microfilm Records of Klamath County, Oregon.**

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.

In Witness Whereof, the grantor has executed this instrument this 21<sup>st</sup> day of January 2021; if a corporate grantor, 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.

x S G Marsh ~~aka~~ By: Dana Marsh, his Attorney in fact.  
Salvadore Gordon Marsh

x Maria Pavalich  
Maria Pavalich

State of \_\_\_\_\_ } ss  
County of \_\_\_\_\_ }

On this \_\_\_\_\_ day of \_\_\_\_\_, before me \_\_\_\_\_, a Notary Public in and for said state, personally appeared \_\_\_\_\_, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

Notary Public for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

**\*\* PLEASE SEE ATTACHED \*\***  
**CALIFORNIA NOTARY CERTIFICATE**

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

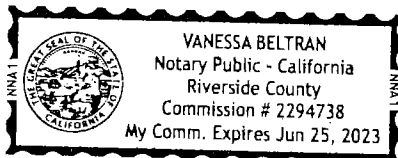
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
 County of Riverside )  
 On January 21, 2021 before me, Vanessa Beltran, Notary Public  
 Date Here Insert Name and Title of the Officer  
 personally appeared Irma B. Marsh and Maria Pavalich  
 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]  
 Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: Quit Claim Deed File No: 431405AM  
 Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_  
 Signer(s) Other Than Named Above: \_\_\_\_\_

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

Signer's Name: \_\_\_\_\_  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_  
 Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_  
 Signer Is Representing: \_\_\_\_\_

# UNIFORM STATUTORY POWER OF ATTORNEY

(FINANCIAL AND LEGAL POWER OF ATTORNEY)

**NOTICE TO PERSON OR ORGANIZATION TO WHOM THIS POWER OF ATTORNEY IS PRESENTED**  
**THIS FORM IS AN OFFICIAL FORM AUTHORIZED AND PROTECTED BY LAW**  
**FAILURE TO ACCEPT THIS FORM CAN RESULT IN PENALTIES AND DAMAGES**  
**YOU MAY RELY ON THIS FORM WITHOUT FURTHER PROOF OF AUTHORITY**

Probate Code Sec. 4408(b) provides:

"If an action is brought under this section, the court SHALL award attorney's fees to the agent if the court finds that the [you] third person acted unreasonably in refusing to accept the agent's authority under the statutory form power of attorney." (emphasis added)

Probate Code Sec. 4408(d) provides:

"...a third person's [your] refusal to accept an agent's authority under a statutory form power of attorney under this part is unreasonable if the only reason for the refusal is that the power of attorney is not on a form prescribed by the third person to whom the power of attorney is presented." (emphasis added)

## INSTRUCTIONS TO PERSON OR ORGANIZATION TO WHOM THIS POWER OF ATTORNEY IS PRESENTED

1. Verify Identification of Agent (Driver's License, etc.)
2. Check to make sure this form has been signed, dated, and notarized.
3. Follow agent's instructions regarding any matters related to the powers initialed below and follow any special instructions listed below.

### NOTICE:

THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN THE UNIFORM STATUTORY FORM POWER OF ATTORNEY ACT (CALIFORNIA PROBATE CODE SECTIONS 4400-4465). THE POWERS LISTED IN THIS DOCUMENT DO NOT INCLUDE ALL POWERS THAT ARE AVAILABLE UNDER THE PROBATE CODE. ADDITIONAL POWERS AVAILABLE UNDER THE PROBATE CODE MAY BE ADDED BY SPECIFICALLY LISTING THEM UNDER THE SPECIAL INSTRUCTIONS SECTION OF THIS DOCUMENT. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

I, (the following named principal):

Name of Principal	Address
Salvadore Gordon Marsh	78529 Alliance Way, Palm Desert, CA 92211

do hereby designate and appoint the following person(s) as my agent(s) (attorney(s)-in-fact) to act for me in any lawful way with respect to the following initialed subjects.

Name	Relationship	Address	Telephone(s)
1. Irma B. Marsh	Spouse	78529 Alliance Way, Palm Desert, CA 92211	760-360-5758
Glenda Dale Marsh	Daughter	2208 Murieta Way, Sacramento, CA 95822	916-476-9538
2. Pamela Kay Whitton	Daughter	176 Gloucester Rd., Mt. Maunganui NZ	011-64-75-75-8126
Lance Palmer Marsh	Son	3902 Meadowbrook Circle, Pittsburg, CA 94565	925-350-2550

The agent(s) designated as number one to act first and the others to serve in the order and priority indicated if the prior designated agent(s) fail to qualify or cease to act.

**SEE LIST OF POWERS ON NEXT PAGE**

## REGULAR POWERS

TO GRANT ALL OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF (N) AND IGNORE THE LINES IN FRONT OF THE OTHER POWERS. TO GRANT ONE OR MORE, BUT FEWER THAN ALL, OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF EACH POWER YOU ARE GRANTING. TO WITHHOLD A POWER, DO NOT INITIAL THE LINE IN FRONT OF IT. YOU MAY BUT NEED NOT CROSS OUT EACH POWER WITHHELD.

INITIAL

POWERS

- ☐ (A) Real property transactions.
- ☐ (B) Tangible personal property transactions.
- ☐ (C) Stock and bond transactions.
- ☐ (D) Commodity and option transactions.
- ☐ (E) Banking and other financial institution transactions.
- ☐ (F) Business operating transactions.
- ☐ (G) Insurance and annuity transactions.
- ☐ (H) Estate, trust, and other beneficiary transactions.
- ☐ (I) Claims and litigation.
- ☐ (J) Personal and family maintenance.
- ☐ (K) Benefits from social security, Medicare, Medicaid, or other governmental programs, or civil or military service.
- ☐ (L) Retirement plan transactions.
- ☐ (M) Tax matters.

☒ (N) ALL OF THE POWERS LISTED ABOVE.

YOU NEED NOT INITIAL ANY OTHER LINES IF YOU INITIAL LINE (N)

## SPECIAL POWERS

THE FOLLOWING POWERS ARE IN ADDITION TO ALL OF THE POWERS LISTED IN LINES (A) THROUGH (M) ABOVE:

I hereby grant to my agent full power and authority to act for me, in any way which I myself could act if I were personally present and able to act, with respect to all other matters and affairs not listed in lines (A) to (N) above, but this authority does not include authority to make health care decisions.

I hereby grant to my agent all other powers, rights, privileges, and abilities to act, engage in any conduct, agree to any matter, fact, affair, event, or thing, and create any power, document, right, privilege, or thing that I myself could do or have done in any manner and to the full extent that I could have done them had I acted myself directly, including to: 1) Create, modify, revoke, fund, amend, terminate, and revise any and all manner of trusts and wills (whether created by the principal or not); 2) Make or revoke a gift of the principals property in trust or otherwise; 3) Exercise a right to make a disclaimer on behalf of the principal; 4) Create or change survivorship interests of all kinds; 5) Designate or change the beneficiaries to receive any property, benefit, insurance, annuity, contract right, retirement plan, or account on the principals death or otherwise; 6) Create, modify, amend, dissolve, manage, and operate in any manner all types of LLCs, corporations, and other companies, organizations, or entities of any kind; and 7) Do and act in regard to all manner of other estate, disability, creditor protection, benefit planning, and other methods, entities, techniques, and procedures.

## SPECIAL INSTRUCTIONS

ON THE FOLLOWING LINES YOU MAY GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO YOUR AGENT.

The agents shall serve in the order and priority designated. The next numbered agent(s) shall serve in the order designated if the prior agent(s) die, becomes incapacitated, or otherwise are unable or unwilling to fulfill their duties. A certification under penalty of perjury signed by the next successor agent(s) shall be sufficient evidence of such and may be relied upon by all third parties.

Any agents listed under the same number shall be co-agents and shall serve together pursuant to the signature authority listed below.   
 \*\* As to any agents marked with a double asterisk (\*\*), this Power of Attorney shall only become effective upon the incapacity or disability of the principal and shall remain effective until the disability or incapacity ends. In determining the incapacity or disability of a person, written statements from two licensed physicians who have examined the person, shall be deemed sufficient. Any third party may rely on and is hereby directed to accept a written statement or certificate signed under penalty of perjury by the agent or successor agent stating that this condition has been satisfied.

UNLESS YOU DIRECT OTHERWISE ABOVE, THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE UNTIL IT IS REVOKED.

This power of attorney will continue to be effective even though I become incapacitated.

STRIKE THE PRECEDING SENTENCE IF YOU DO NOT WANT THIS POWER OF ATTORNEY TO CONTINUE IF YOU BECOME INCAPACITATED

## EXERCISE OF POWER OF ATTORNEY WHERE MORE THAN ONE AGENT DESIGNATED AS CO-AGENTS

If I have designated more than one agent, designated as co-agents, the agents are to act as follows:

☒ Separately

☐ Jointly

IF YOU APPOINTED MORE THAN ONE AGENT AND YOU WANT EACH AGENT TO BE ABLE TO ACT ALONE WITHOUT THE OTHER AGENT JOINING, CHECK THE BOX IN FRONT OF "SEPARATELY". IF YOU DO NOT CHECK A BOX, OR IF YOU CHECK "JOINTLY", THEN ALL OF YOUR ACTIVE AGENTS MUST ACT OR SIGN TOGETHER.

I agree that any third party who receives a copy of this document may act under it. A third party may seek identification. Revocation of the power of attorney is not effective as to a third party until the third party has actual knowledge of the revocation. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney.

DATE AND SIGNATURE OF PRINCIPAL  
UNIFORM STATUTORY POWER OF ATTORNEY  
(You Must Date and Sign This Power of Attorney)

At City:  
Riverside

State:  
California

Principal's Signature:

*Irma B. Marsh AIF Salvador Gordon Marsh*

Date:

April 27, 2016

Irma B. Marsh as AIF for Salvador Gordon Marsh

BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, THE AGENT ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.

CERTIFICATE OF ATTORNEY

I am a lawyer authorized to practice law and the principal was my client at the time when this power of attorney was executed. I have advised my client concerning his or her rights in connection with this power of attorney and the applicable law and the consequences of signing or not signing this power of attorney, and my client, after being so advised, has executed this power of attorney.

Attorney Signature:

Date Signed:

April 27, 2016

Name of Attorney:

Ryan Michael Darling

Address:

3697 Arlington Ave., Riverside, Calif. 92506

ACKNOWLEDGMENT

UNIFORM STATUTORY POWER OF ATTORNEY

CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached and not the truthfulness, accuracy, or validity of that document.

State of California,  
County of: Riverside

155

On April 27, 2016

before me

Ryan Michael Darling

a Notary Public in and for said State, personally appeared:

Irma B. Marsh as AIF for Salvador Gordon Marsh

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:

NOTARY PUBLIC

SEAL:



85530

08-08-94 11:04 RCVD

K-46585

Vol. 94 Page 24293

DON BIEHN  
WACHTEL, BIEHN & MALM  
2240 McCulloch Boulevard  
Lake Havasu City, AZ 86403  
Attorney for Petitioner  
(602) 855-5115  
State Bar I.D. #002625

TIME FILED  
SEP 10 1990  
LINDA SEAPY  
CLERK SUPERIOR COURT  
DEPUTY

IN THE SUPERIOR COURT OF THE STATE OF ARIZONA  
IN AND FOR THE COUNTY OF MOHAVE

In the Matter of the Estate of )

JOSEPHINE L. SNYDER )

Deceased )

Probate No. 1371

LETTERS OF PERSONAL  
REPRESENTATIVE

SALVATORE GORDON MARSH is hereby appointed as  
Personal Representative of this estate without restriction.

WITNESS

September 10, 1990  
Linda Seapy  
Clerk of the Superior Court  
By: [Signature]  
Deputy Clerk

Wachtel, Biehn & Malm  
Attorneys at Law  
2240 McCulloch Blvd.  
Lake Havasu City  
Arizona 86403  
(602) 855-5115  
Fax (602) 855-5211

STATE OF ARIZONA  
COUNTY OF MOHAVE  
I, LINDA SEAPY, Clerk of the Superior Court  
of the State of Arizona in and for the County  
of Mohave do hereby certify the foregoing to  
be a full, true and correct copy of the Letters  
issued on the 10th day of September, 1990  
and that the Letters are still in full force  
and effect.

STATE OF ARIZONA  
COUNTY OF MOHAVE

I, LINDA SEAPY, Clerk of the Superior Court  
of the State of Arizona in and for the County  
of Mohave do hereby certify the foregoing to  
be a full, true and correct copy of the Letters  
issued on the 10th day of September, 1990  
and that the Letters are still in full force  
and effect.

Witness my hand and seal of said Court this  
10th day of September, 1990.  
[Signature]  
Clerk/Deputy Clerk

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Klamath County Title Co the 8th day  
of Aug A.D., 1994 at 11:04 o'clock A.M., and duly recorded in Vol. M94  
of Deeds on Page 24293

FEE \$10.00

Evelyn Biehn County Clerk  
By [Signature]

85530

08-08-94A11:04 RCVD

K 46585

Vol 94 Page 24293

1 DON BIEHN  
 2 WACHTEL, BIEHN & MALM  
 3 2240 McCulloch Boulevard  
 4 Lake Havasu City, AZ 86403  
 5 Attorney for Petitioner  
 6 (602) 855-5115  
 7 State Bar I.D. #002625

TIME FILED  
 SEP 10 1990  
 LINDA SEAPY  
 BY CLERK SUPERIOR COURT  
 DEPUTY

8  
 9 IN THE SUPERIOR COURT OF THE STATE OF ARIZONA  
 10 IN AND FOR THE COUNTY OF MOHAVE

11 In the Matter of the Estate of )

12 JOSEPHINE L. SNYDER )

13 Deceased )

Probate No. 1371

LETTERS OF PERSONAL  
 REPRESENTATIVE

14  
 15  
 16  
 17 SALVATORE GORDON MARSH is hereby appointed as  
 18 Personal Representative of this estate without restriction.

19  
 20  
 21 WITNESS September 10, 1990

22 Linda Seapy  
 Clerk of the Superior Court

23 By Ray M. Bull  
 Deputy Clerk



24  
 25  
 26 Wachtel, Biehn & Malm  
 Attorneys at Law  
 2240 McCulloch Blvd.  
 Lake Havasu City  
 Arizona 86403  
 (602) 855-5115  
 Fax (602) 855-5211

STATE OF ARIZONA  
 COUNTY OF MOHAVE ss:  
 I, LINDA SEAPY, Clerk of the Superior Court  
 of the State of Arizona in and for the County  
 of Mohave do hereby certify the foregoing to  
 be a full, true and correct copy of the letters  
 issued on the 10th day of September, 1990  
 and that the letters are still in full force  
 and effect.

Witness my hand and seal of said Court this  
 10th day of September, 1990  
Linda Seapy  
 Clerk/Deputy Clerk

STATE OF ARIZONA  
 COUNTY OF MOHAVE ss:

I, LINDA SEAPY, Clerk of the Superior Court  
 of the State of Arizona in and for the County  
 of Mohave do hereby certify the foregoing to  
 be a full, true and correct copy of the letters  
 issued on the 10th day of September, 1990  
 and that the letters are still in full force  
 and effect.

Witness my hand and seal of said Court this  
 10th day of September, 1990  
Ray M. Bull  
 Clerk/Deputy Clerk

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Klamath County Title Co the 8th day  
 of Aug, A.D., 19 94 at 11:04 o'clock A.M., and duly recorded in Vol. M94  
 of Deeds on Page 24293

FEE \$10.00

Evelyn Biehn - County Clerk  
 By Ray M. Bull





1 DON BIEHN  
2 WACHTEL, BIEHN & MALM  
2240 McCulloch Boulevard  
3 Lake Havasu City, AZ 86403  
Attorney for Petitioner  
4 (602) 855-5115  
State Bar I.D. #002625

FILED  
11:00 A  
SEP 10 1990  
LINDA S. SHAW  
CLERK SUPERIOR COURT  
DEPUTY

7 IN THE SUPERIOR COURT OF THE STATE OF ARIZONA  
8 IN AND FOR THE COUNTY OF MOHAVE

9 In the Matter of the Estate of )  
10 JOSEPHINE L. SNYDER )

Probate No. **7371**

) APPLICATION FOR INFORMAL  
) PROBATE OF WILL AND  
12 ) APPOINTMENT OF PERSONAL  
) REPRESENTATIVE

14 1. This Application is made by SALVATORE GORDON  
15 MARSH, who is entitled to file this Application under  
16 A.R.S. §14-3301 because he is named as Personal Representative  
17 in decedent's will.

18 2. Decedent died on August 28, 1990 At the time  
19 of death decedent was domiciled in Mohave County, State of  
20 Arizona.

21 3. A copy of decedent's Will, dated November 28,  
22 1988, along with the affidavit of DON BIEHN pursuant to A.R.S.  
23 §14-3415 is filed with this Application.

24 4. Decedent left surviving the following persons  
25 who are the surviving children, heirs and devisees of  
26 decedent:

MARIA JOSEPHA PAVALICH aka  
MARY JO PAVLIK, Daughter, Adult  
Post Office Box 208  
Abbot Village, Maine 04406

LINDA CONSTANCE MASON, Daughter, Adult  
5548 Graylog  
Palos Verdes, California 9027.

SALVATORE GORDON MARSH, Son, Adult  
3992 Beechwood Drive  
Concord, California 94519

5. Venue for this proceeding is in this county because decedent was a domiciliary of this county at the time of death.

6. No Personal Representative for decedent's estate has been appointed in this state or elsewhere.

7. Applicant has not received a demand for notice and is not aware of any demand for notice by any interested person of any proceedings concerning decedent in this state or elsewhere.

8. Applicant believes that the Will, dated November 28, 1988, was validly executed and is decedent's last Will and, after the exercise of reasonable diligence, Applicant is unaware of any instrument revoking the Will.

9. The time for informal probate and appointment has not expired under A.R.S. §14-3108 because less than three years have passed since decedent's death.

10. Applicant states that SALVATORE GORDON MARSH, 3992 Beechwood Drive, Concord, California 94519 has priority for appointment as Personal Representative under the Will

1 pursuant to the provisions of A.R.S. §14-3203 because he is  
2 named in decedent's Will as Personal Representative.

3 11. Bond is not required of the Personal  
4 Representative under A.R.S. §14-3603 because it has been  
5 waived in the Will. Applicant's best estimate of the value of  
6 property owned by decedent and subject to the probate  
7 jurisdiction of the Court is as follows:

8 Personal property	\$100,000.00
9 Real property (less encumbrances)	\$90,000.00
10 Estimated annual income of estate	Unknown
11 TOTAL	\$190,000.00

12 Applicant requests that decedent's last Will be  
13 admitted to informal probate and that SALVATORE GORDON MARSH  
14 be appointed as the Personal Representative to administer  
15 decedent's estate with such bond as may be required.

16 DATED: August 29, 1990

17 Salvatore Gordon Marsh  
18 SALVATORE GORDON MARSH  
19 Applicant  
20 3992 Beechwood Drive  
21 Concord, CA 94519

22 SALVATORE GORDON MARSH, being duly sworn, states as  
23 follows: That he is the Applicant in the foregoing  
24 Application; and that the statements in the application are  
25 accurate and complete to the best of his knowledge and belief.

26 Salvatore Gordon Marsh  
SALVATORE GORDON MARSH

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STATE OF Arizona )

COUNTY OF Mohave ) SS:

SUBSCRIBED AND SWORN to before me this 29 day  
of August, 1990, by SALVATORE GORDON MARSH.

My Commission Expires:

Sept 19, 1990

Chances Rutz  
Notary Public

WACHTEL, BIEHN & MALM  
2240 McCulloch Boulevard  
Lake Havasu City, AZ 86403  
Attorneys for Appl cant

By Don Brehm