# WHEN RECORDED MAIL ALL DOCUMENTS INCLUDING TAXES TO

2022-002307 Klamath County, Oregon

02/23/2022 02:09:01 PM

Fee: \$97.00

Mile High REI Group LLC 500 Westover Dr #12291 Sanford, NC 27330

#### **WARRANTY DEED**

THE GRANTOR(S), Richard McArthur Williams and Darla Hull Williams, as Trustees under the Declaration of Trust dated July 5, 1995, for and in consideration of: Ten Dollars grants, bargains, sells, conveys and warranties to the GRANTEE(S):

Mile High REI Group LLC, a Colorado Limited Liability Company with a mailing address of 500 Westover Dr #12291, Sanford, NC 27330 the following described real estate situated in the County of Klamath, State of Oregon:

Parcel ID R361842 **Recorder: Legal Description**SPRAGUE RIVER VALLEY ACRES BLK-19 LOT-36

SUBJECT TO: Current taxes, assessments, liens, encumbrances, covenants, conditions, restrictions, rights of way and easements of record the grantor hereby covenants with the Grantee(s) that Grantor is lawfully seized in fee simple of the above granted premises and has good right to sell and convey the same; and the Grantor, his heirs, executors and administrators shall warrant and defend the title unto the Grantee, his heirs and assigns against all lawful claims whatsoever.

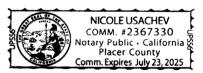
### Page 2 - Pertaining to the sale of R361842

Dated: $\frac{2-2-2}{2}$	Dated:
Signature: Signature: Williams Richard Williams	Signature:
217 Trolleybell Ct	-
Roseville, CA 95747	-
Acknowledgment	of Individual
STATE OF	
COUNTY OF	
The foregoing instrument was acknowledged bef Richard Williams and Darla Hull, who is personal (type of ident	fore me this (date), by ly known to me or who has produced tification.
Notary Public	
Printed Name:	
My Commission Expires:	_
Commission #	

### **ACKNOWLEDGMENT**

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.

v din ding	
State of California County of Placer	_)
On O21021 2022 before me,	Nicole Usachev, Notary Public (insert name and title of the officer)
subscribed to the within instrument and acknown is the result of the res	wledged to me that the she/they executed the same in
WITNESS my hand and official seal.	NICOLE USACHEV  COMM. #2367330 & Notary Public - California & Placer County
Signature And	(Seal)



OFFICE OF RECORDER

## COUNTY OF ALAMEDA

OAKLAND, CALIFORNIA

				WHITEOUTS OR ALT	FRATIONS			
	STATE FILE JUMBER	USE BLA	v\$ 11 (REV.	7 93)	3 LAST IFA		REGIS' RATION FAIN	BER
	1 NAME OF DECEDENT - FIRST	(GIVEN)	2 MiDDLE		Will			
	Darla		Faith	- 016 04 10 00 C		TE OF DEATH MIN	/DD/CCYY	EI. HOUR
	4 DATE OF BIRTH MM/DD/C		S MONTHS   DAYS H	DURS MINUTES		1/06/1996		0500
	05/28/1941	55			12 MARITAL		3. EDLCATION -	EARS COMPLET
-		SOCIAL SECURITY NO.	11 MILITARY SE	HV-CE	Marr	1	16	
SONAL ;	CH	284-38-4248	19 TO	NONE	16. USUAL EMPI			
ATA	14 RACE	15 HISPANIC	SPECIFY				1 11:	
	White		s	X_ NO	Long Be	ach Schoo	9. YEARS IN OCCU	2471091
	17. OCCUPATION		IB + NO OF BUSINESS			1,	g. YEZRS IN CO.C.	
	Teacher		Education		44	<u> </u>		
	20 RESIDENCE STREET AND N	UMBER OR LOCATION						
USUAL	2557 Glen Isle	Ave.				4. YRS IN COUNT	165 57475 6	R FOREIGN COU
SIDENCE	21. CITY		COUNTY	23 ZIP CC		6	CA	
	Pleasanton		Alameda	945				-
	26 NAME RELATIONSHIP			MALING ADDRESS IS	TREET AND NUMBE	Diogramme	E NOMER CITY OF	4588
ORMANT	Richard M. Wil			57 Glen Is				
·	28 NAME OF SURVIVING SPOUS	E F1457	29 MICOLE	:	30 LAST (MAIDEN			
	Richard		McArthur		William	15		34 8:RTH
POUSE	31 NAME OF FATHER FIRST		32 M.DDs.E		33. LAST			ОН
ARENT	James		С		Hull			38. BIRTH
ORMATION	35. NAME OF MOTHER - FIRST		3E M DOLE		27. LAST IMAIDENI			OH
	Ethel		Luella		Braun			_ on
	39 CATE MM/DD/CCYY	40. PLACE OF FINAL	biseosition					CA 94
POSITION(S)	11/09/1996	RES of Ric	chard M. Willia	ams, 2557 (	Glen Isle	Ave., Pl	easanton,	
FUNERAL	41. TYPE OF D SPOSIT ONIS)	14.1	42 SIGNATURE OF	dy Kie	مسدوده			03
INECTOR	CR/RES		> Gan	cey will	T = A		1	MM/DD/CCYY
AND								
	44. NAME OF FUNERAL DIRECT	C <del>R</del>	45 LICENSE NO		LA CAL TOUR	(0)	1 .	
LOCAL	Graham-Hitch		FD429	AG SIGNATURE OF	12X	119.10	11/	08/1996
LOCAL	Graham-Hitch		: 1	46 SIGNATURE OF	FACILITY OTHER T	HAN HOSPITALE 1	11/	08/1996
LOCAL EGISTRAR	Graham-Hitch		FD429	A6 SIGNATURE OF	FACILITY OTHER T	S OTHER	11/ 04. commy Alameda	08/1996
EGISTRAR PLACE OF	Graham-Hitch I	Mortuary	FD429	C.FY OF E	CONV.	S OTHER	04. collective Alameda	08/1996
EOCAL EGISTRAR PLACE	Graham-Hitch 1  101 PLACE OF DEATH  Own residence  105 STHEET ADDRESS—STREE	MOTTUATY	FD429	C.FY OF E	CONV.	s. Отнея	Alameda O6. crr Pleasar	08/1996 i
EGISTRAR PLACE OF	Graham-Hitch	Mortuary  ET AND NUMBER OF LO	FD429	A6 SIGNATURE OF	CONV.	TIME INTERNAL	Alameda O6. cir  Pleasar	08/1996
EGISTRAR PLACE OF	Graham-Hitch 1  101 PLACE OF DEATH  Own residence  105 STHEET ADDRESS—STREE	Mortuary  ET AND NUMBER OF LO	FD429	A6 SIGNATURE OF	CONV.	S. OTHER	Alameda 106. cirv Pleasar 108. beatrage	nton
LOCAL REGISTRAR PLACE OF	Graham-Hitch I	MOTTUATY  ET AND NUMBER OR LO  E AVE.  JENTER ONLY ONE CA	FD429  1.32 NF POSETAL, SPE	AND DI	CONV.	TIME INTERVAL	Alameda 106. cirv Pleasar 108. beatrage	08/1996 i
EDCAL REGISTRAR PLACE OF	Graham-Hitch I	MOTTUATY  ET AND NUMBER OR LO  E AVE.  JENTER ONLY ONE CA	FD429	AND DI	CONV.	TIME INTERNAL	Alameda 106. cirv Pleasar 108. beatrage	O8/1996  ILLON PORTED TO COS  IN AL NUMBER
EGISTRAR PLACE OF	Graham-Hitch I	MOTTUATY  ET AND NUMBER OR LO  E AVE.  JENTER ONLY ONE CA	FD429  1.32 NF POSETAL, SPE	AND DI	CONV.	TIME INTERVAL	Alameda  OG. CIT  Pleasar  108 DEATH SE	ILLON FORTED TO COM INGAL NUMBER  ERFCAMED
EGISTRAR PLACE OF	Graham-Hitch I	MOTTUATY  ET AND NUMBER OR LO  E AVE.  JENTER ONLY ONE CA	FD429  1.32 NF POSETAL, SPE	AND DI	CONV.	TIME INTERVAL	Alameda O6. cri Pleasar L. 108 Death FE ET YES ACCER	08/1996  INTON POATED TO COM INTO HERCOMED ERFOGMED X
EGISTRAR PLACE OF	Graham-Hitch  101 PLACE OF DEATH  Own residence  105 STHEET *DOMESS-STRE  2557 Glen Isl  107 DEATH MAS CAUSED BY:  MMMEDIATE (A) Meta	MOTTUATY  ET AND NUMBER OR LO  E AVE.  JENTER ONLY ONE CA	FD429  1.32 NF POSETAL, SPE	AND DI	CONV.	TIME INTERVAL	Alameda OG. CITY Pleasar L. 100 DEATHER TO DESTRUCTOR 109 BOPSY P. L. 109 BOPSY P.	DEFICIENCE TO COS
LOCAL EGISTRAR PLACE OF CAUSE OF	Graham-Hitch  101 PLACE OF DEATH  Own residence  105 STHEET *DOMESS-STRE  2557 Glen Isl  107 DEATH MAS CAUSED BY:  MMMEDIATE (A) Meta	MOTTUATY  ET AND NUMBER OR LO  E AVE.  JENTER ONLY ONE CA	FD429  1.32 NF POSETAL, SPE	AND DI	CONV.	TIME INTERVAL	Alameda O6. CITY Pleasar L 108 DEATH FE NESS 1109 DEOTS III 110 AUTOSY 110 AUTOSY	08/1996  INTON POATED TO COM INTO HERCOMED ERFOGMED X
LOCAL EGISTRAR  PLACE OF DEATH	Graham-Hitch I	MOTTUATY  ET AND NUMBER OR LO  E AVE.  JENTER ONLY ONE CA	FD429  1.32 NF POSETAL, SPE	AND DI	CONV.	TIME INTERVAL	Alameda  O6. CITY  Pleasar  L. 108 Deart Se  TO9 BOPS M.  109 BOPS M.  100 AUTOS	DETERMINING CA
LOCAL EGISTRAR PLACE OF CAUSE OF	Graham-Hitch I  101 PLACE OF DEATH  OWN residence  105. STHEET ADDRESS—STRE  2557 Glen Isl  107 DEATH MAS CAUSED BY:  MAMEDIATE (A) Meta  DUE TO (B)  DJE TO (C)	Mortuary  ET AND NUMBER OR LO  E AVE.  LENTER ONLY ONE CA  Static carc	FD429  J2. # HOSP TALL SHE  DOCATION  AUSE PER LINE FOR A. B. C.  PINOTIA OF breas	AS SIGNATURE OF WAR CAPE ICO	CONV. RE	TIME INTERVAL	Alameda O6. CITY Pleasar L 108 DEATH FE NESS 1109 DEOTS III 110 AUTOSY 110 AUTOSY	O8/1996  INTON PONTED TO COM INTON ERFORMED X PERFORMED X
LOCAL EGISTRAR PLACE OF CAUSE OF	Graham-Hitch I  101 PLACE OF DEATH  OWN residence  105. STHEET ADDRESS—STRE  2557 Glen Isl  107 DEATH MAS CAUSED BY:  MAMEDIATE (A) Meta  DUE TO (B)  DJE TO (C)	Mortuary  ET AND NUMBER OR LO  E AVE.  LENTER ONLY ONE CA  Static carc	FD429  1.32 NF POSETAL, SPE	AS SIGNATURE OF WAR CAPE ICO	CONV. RE	TIME INTERVAL	Alameda  O6. CITY  Pleasar  L. 108 Deart Se  TO9 BOPS M.  109 BOPS M.  100 AUTOS	DETERMINING CA
LOCAL EGISTRAR PLACE OF CAUSE OF	Graham-Hitch II  101 PLACE OF DEATH  OWN residence  105. STREET FORMESS—STREE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE (A) Meta  DUE TO (B)  DJE TO (C)  DJE TO (D)  112 OTHER SOMERCANT COM	MORTUATY  EF AND MUMBER OR LE  E AVE.  JENTER ONLY ONE CA  STATIC CATC	FD429  J2 # MOSP TALL SME  IP ER.C  COCATION  AUSE ORD LIME FOR A. B. C.  CITIOTICA OF BUT NOT FELATED	AS SIGNATURE OF	CONV. RE	THE PATE AND CEATH	Alameda  O6. CITY  Pleasar  L. 108 Deart Se  TO9 BOPS M.  109 BOPS M.  100 AUTOS	DETERMINING CA
LOCAL EGISTRAR PLACE OF CAUSE OF	Graham-Hitch II  101 PLACE OF DEATH  OWN residence  105. STREET FORMESS—STREE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE (A) Meta  DUE TO (B)  DJE TO (C)  DJE TO (D)  112 OTHER SOMERCANT COM	MORTUATY  EF AND MUMBER OR LE  B AVE.  BENTER ONLY ONE CA  STATIC CATC	FD429  J2. # HOSP TALL SHE  DOCATION  AUSE PER LINE FOR A. B. C.  PINOTIA OF breas	AS SIGNATURE OF	CONV. RE	THE PATE AND CEATH	Alameda  O6. CITY  Pleasar  L. 108 Deart Se  TO9 BOPS M.  109 BOPS M.  100 AUTOS	DETERMINING CA
LOCAL EGISTRAR PLACE OF CAUSE OF	Graham-Hitch I  101 PLACE OF DEATH  OWN RESIDENCE  105. STREET ADDRESS—STRE  2557 Glen Isl  107 DEATH MAS CAUSED BY:  IMMEDIATE (A) Meta  DUE TO (B)  DJE TO (C)  DJE TO (D)  112 OTESP S GNIFICANT COM	MOTUATY  ET AND MUMBER OR LE  E AVE.  LENTER ONLY ONE CA  STATIC CATC  IDITIONS CONTRIBUTING	FD429  J2. # HOSP TALL SHE  DOCATION  AUSE PER LINE FOR A. B. C.  PITIOTIA OF BIT NOT FELATED  TO DEATH BIT NOT FELATED  TOO DEATH BIT NOT FELATED  TOO DEATH BIT NOT OR 112*	AND DI	CONV. RE	TIME INTERNAL AND CEATH	Alameda O6. CIT Pleasar L 108 DEATH FE L 109 DEATH	DETERMINING CA
LOCAL EGISTRAR  PLACE OF DEATH  CAUSE OF DEATH	Graham-Hitch IIII PLACE OF DEATH OWN RESIDENCE 105. STREET ADDRESS—STRE 2557 Glen Isl 107 DEATH MAS CAUSED BY: IMMEDIATE (A) Meta DUE TO (B) DJE TO (C) DJE TO (D) 112. OTHER S GAIFICANT COM- 113. WAS OPERATION PERFO	MOTUATY  ET AND NUMBER OR LE  E AVE.  LENTER ONLY ONE CA  STATIC CATC  STATIC CATC  IDITIONS CONTRIBUTING  INHED FOR ANY CONDITION  BEST OF MY KNOWLEDGE HE HOUN, CATE AND	FD429  J2. # HOSP TALL SHE  DOCATION  AUSE PER LINE FOR A. B. C.  PITIOTIA OF BIT NOT FELATED  TO DEATH BIT NOT FELATED  TOO DEATH BIT NOT FELATED  TOO DEATH BIT NOT OR 112*	AS SIGNATURE OF	CONV. RE	TIME INTERNAL SETWIEN CHARLES AND DEATH. 6 yrs	Alameda  O6. CIT  Pleasar  L 108 Death File  TO BOPSY FILE  110 AUTOSY  111 USFO M  YES	O8/1996  ILLON PORTED TO COM IN INTERPORTED
EQUATION OF THE PROPERTY OF TH	Graham-Hitch II  101 PLACE OF DEATH  OWN residence  105. STREET *DORESS-STRE  2557 Glen Isl  107 DEATH MAS CAUSED BY:  IMMEDIATE (A) Meta  DUE TO (B)  DUE TO (C)  112. OTHER SOMPICANT COM  113. WAS OPERATION PERFO	MOTUATY  ET AND MUMBLE OR LE  e AVe.  JENTER ONLY ONE CA  STATIC CATC  STATIC CATC  MUMBLE FOR ANY CONDITION  BEST OF MY KNOWLED  HE HOUSE, CAUSES STATE.	FD429  J2. # FOSPYAL, SPE  DOCATION  AUSE PER LINE FOR A. B. C.  SITIOTIA OF BIT NOT FELATED  HON IN "EM 107 OR 112"  GE 1.5 DOCATORE AND 1	AND DI  TO CAUSE O'ET IN  IF YES, LIST TIPE OF CENTUR LIP	CONV. RE	TIME INTERNAL SETIMEN ORGANIC STATE.	Alameda O6. CIT Pleasar L 108 DEATH FE 1109 DEATH FE 1110 AUTOS' 1111 USSO M 115 AUTOS' 115 AUTOS' 116 AUTOS' 117 C	DETERMINING CATE MM / DD /
EGISTRAR  PLACE OF DEATH  CAUSE OF DEATH	Graham-Hitch III  101 PLACE OF DEATH  OWN RESIDENCE  105. STREET #DORESS—STRE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE CAUSE  DUE TO (B)  DJE TO (C)  112 OTI-ER SOMFICANT COM  113. WAS OPERATION PERFO  114. CERTIFY THAT TO THE DEATH OCCUPRED AT TO PLACE STATED FROM III  DOCCUPRED ATTERDED SINCE	MOTTUATY  ET AND MUMBER OR LE  E AVE.  JENTER ONLY ONE CA  STATIC CATC  DITTONS CONTRIBUTING  UNITED FOR ANY CONDITION  BEST OF ANY CONDITION  HE HOUR, CATE AND  CAULES STATED.  DECEDENT LAST SEEN A  MM JOB/CCYV	FD429  J2. # FOST TALL SHE  DOCATION  AUSE RED LINE FOR A. B. C.  STROMA OF BUT NOT FELATED  HON IN "EM 107 OR 112"  GE 1.5 SECRETURE AND I	TO CAUSE G. ELI IN  TO CAU	CONV. RE	TIME INTERNATION OF THE INTERNAT	Alameda OG. CITY Pleasar 100 DEATHER 110 AUTO-ST	DETERMINING CATE MM / DD/  1./08/199  D.
CAUSE OF DEATH	Graham-Hitch I  101 PLACE OF DEATH OWN residence 105. STREET *DDRESS-STRE 2557 Glen Isl 107 DEATH MAS CAUSED BY:  IMMEDIATE (A) Meta DUE TO (B)  DUE TO (C)  112. OTHER SQMFICANT COM  113. WAS OPERATION PERFO  114. CERTIFY THAT TO THE DEATH OCCURRED AT TO PLACE STATED FROM THE DECEDENT ATTENDED SINCE: MM/DD.CCY  10/17/1996	MORTUATY  ET AND MUMBLE OR LE  e AVe.  LENTER ONLY ONE CA  STATIC CATC  STATIC CATC  STATIC CATC  BEST OF MY KNOWLED  HE HOUN, CATE AND  E CAUSES STATE.  DECEDENT LAST SEEN  M M J. DP JCC VY  11/03/1996	FD429  J2. # FOST TALL SHE  DEATH OF BUT NOT RELATED  IND DEATH BUT NOT RELATED  IND IN 16M 107 OR 1121  GE 1.5 SCAN UPE AND 1  ALINE 118. THE ATTENDING  5575 West	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE C.  TIPLE OF CENTUR EN  PHYSICIAN S YAME,  Las Posita	CONV. RE	TIME INTERNATION OF THE INTERNAT	Alameda OG. CITY Pleasar 100 DEATHS 100 DEAT	DETERMINING CO.  ATE MM / DD / 1./08/199  D.  A 9458
EGISTRAR  PLACE OF DEATH  CAUSE OF DEATH	Graham-Hitch I  101 PLACE OF DEATH  OWN RESIDENCE 105. STREET #DORESS—STRE 2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE (A) Meta  DUE TO (B)  DJE TO (C)  112 OTI-ER S GRIFICANT CON  113. WAS OPERATION PERFO  114. CERTIES THAT TO THE DEATH OCCUPRED AT TO PLACE STATED FROM IT  DOCCEDENT ATTENDED SINCE WM / DD / CCY V  10/17/1996	MOTTUATY  ET AND MUMBER OR LE  E AVE.  JENTER ONLY ONE CA  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  MILE FOR ANY CONDITION  BEST OF MY KNOWLED  HE HOUR, CATE AND  HE CAUCES STATE  MILE	FD429  J2. # FOSP TALL SHE  DOCATION  AUSE FEE LINE FOR A. B. C.  STROMA OF BYEAR  TO DEA!** BUT NOT RELATED  TION IN "EM 107 OR 112"  THE THE ATTENDING  STOTE WEST  STOTE WE	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE C.  TIPLE OF CENTUR EN  PHYSICIAN S YAME,  Las Posita	CONV. RE	TIME INTERNATION OF THE INTERNAT	Alameda OG. CITY Pleasar 100 DEATHER 110 AUTO-ST	DETERMINING CO.  ATE MM / DD / 1./08/199  D.  A 9458
EGISTRAR  PLACE OF DEATH  CAUSE OF DEATH	Graham-Hitch II  101 PLACE OF DEATH  OWN residence  105. STREET #DDRESS-STRE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE CAUSE  DUE TO (B)  DUE TO (C)  112 OTE-SP SCHIFICANT CON  113. WAS OPERATION PERFO  114. CERTIFY THAT TO THE DEATH OCCUPRED AT THE PROM THE DECEMBENT ATTENDED SINCE:  WM / DD / CC Y  10 / 17 / 1996  I CERTIFY THAT IN MY AT THE HOUR, DATE AT THE CAUSES STATED.	MOTTUATY  ET AND MUMBER OR LE  E AVE.  JENTER ONLY ONE CA  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  MILE FOR ANY CONDITION  BEST OF MY KNOWLED  HE HOUR, CATE AND  HE CAUCES STATE  MILE	FD429  J2. # FOST TALL SHE  DOCATION  AUSE FED LINE FOR A. B. C.  STRIOTIA OF BIT NOT RELATED  HON IN TEM 107 OR 1127  GE 1.5 SECURITY OF AND THE ATTENDING  5575 West  MED 120 NUMB AT WORK	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE OF  THINLE OF CENTER EN  PHINSIGIAN S VANE,  LAS POSITA  121 INJUNY CATE	CONV. RE	TIME INTERNAL DEFINE PARE AND DEATH.  6 yrs  116 License Made and Death.  G41112  ZIP Chau 270, Plea	Alameda OG. CITY Pleasar 100 DEATHS 100 DEAT	DETERMINING CO.  ATE MM / DD / 1./08/199  D.  A 9458
CAUSE OF DEATH	Graham-Hitch I  101 PLACE OF DEATH  OWN residence  105. STREET FORESS-STREE  2557 Glen Isl  107 DEATH HAS CAUSED BY:  IMMEDIATE (A) Meta  DUE TO (B)  DJE TO (C)  112 OTHER SCHIFTCANT CON  113. WAS OPERATION PERFO  114. CERTIFY THAT TO THE DEATH OCCURRED AT THE PLACE STATED FROM THE CONTROL STROM THE  CONTROL TO THE THAT IN MY AT THE MOUR LATE AN	MOTTUATY  ET AND MUMBER OR LE  E AVE.  JENTER ONLY ONE CA  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  MILE FOR ANY CONDITION  BEST OF MY KNOWLED  HE HOUR, CATE AND  HE CAUCES STATE  MILE	ED429  J2. # HOSP TALL SHE  DOCATION  AUSE PER LINE FOR A. B. C.  PITIONA OF BIT NOT FELATED  INN IN TEM 107 OR 1121  GE 1.5 ORAN UPE AND 1  ALINE 118. THE ATTENDING  5575 West  MED 120 NUMB AT WORK	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE OF  THINLE OF CENTER EN  PHINSIGIAN S VANE,  LAS POSITA  121 INJUNY CATE	CONV. RE	TIME INTERNAL DEFINE PARE AND DEATH.  6 yrs  116 License Made and Death.  G41112  ZIP Chau 270, Plea	Alameda OG. CITY Pleasar 100 DEATHS 100 DEAT	DETERMINING CO.  ATE MM / DD / 1./08/199  D.  A 9458
CAUSE OF DEATH  CAUSE OF DEATH  PHYSI. CIAN'S CERTIFICA TION	Graham-Hitch  101 PLACE OF DEATH  OWN residence  105. STREET #DORESS-STRE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE CAUSE  DUE TO (B)  DUE TO (C)  112 OTLER SCHIFFICANT CON  113. WAS OPERATION PERFO  114. CERTIEF THAT TO THE DECEMBENT ATTENDED SINCE WM / DU / CC YY  10/17/1996  1 CENTIEF THAT IN MY AT THE MOUR, DATE AN THE CAUSES STATED.  19 WAINEP OF DEATH  NATURAL SURCED.	MOTTUATY  ET AND MUMBLE OR LE  e AVe.  IENTER ONLY ONE CA  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  STATIC CATC  INTER ONLY ONE CA  STATIC CATC  STATIC CATC  STATIC CATC  INTER ONLY ONE CATC  INTER	FD429  J2. # FOST TALL SHE  DOCATION  AUSE PED LINE FOR A. B. C.  STRIOTIA OF BUT NOT FELATED  HON IN "EM 107 OR 112"  JALINE 15 DOCATIONE AND 1  JALINE 118. THE ATTENDING  5575 West  124 DESCRIBE HOW IT	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE OF  TIPLE OF CENTER EN  PHYSICIAN'S VANE,  Las Posita  121. INJUNY CATE	CONV. RE	TIME INTERNAL DEFINE PARE AND DEATH.  6 yrs  116 License Made and Death.  G41112  ZIP Chau 270, Plea	Alameda OG. CITY Pleasar 100 DEATHS 100 DEAT	DETERMINING CO.  ATE MM / DD / 1./08/199  D.  A 9458
CAUSE OF DEATH	Graham-Hitch I  101 PLACE OF DEATH  OWN residence  105. STREET FORESS-STREE  2557 Glen Isl  107 DEATH HAS CAUSED BY:  IMMEDIATE (A) Meta  DUE TO (B)  DUE TO (C)  112 OTHER SCHIFTCANT CON  113. WAS OPERATION PERFO  114. CERTIFY THAT TO THE DEATH OCCURRED AT THE PLACE STREED FROM THE PLACE STREED FROM THE COUNTER THAT IN MY AT THE HOUR, DATE AN THE CAUSES STATED.  19 WAININED LATE AN THE CAUSES STATED.  19 WAININED LATE AN THE HOUR DATE AN THE CAUSES STATED.	ET AND MUMBER OR LE  ® AVE.  IENTER ONLY ONE CA  STATIC CATC  STATIC FOR ANY CONDITION  BEST OF MY KNOWLED  GE CAUSES STATED  FOR ANY CONDITION  STATIC FROM  11/03/1996  OPINION DEATH OCCUP  BY COULD NOT CONDITION  COULD NOT COURT  COURT	FD429  J2. # FD5474 SPE  DCATION  AUSE PER LINE FOR A. B. C.  INDODA OF BELATED  IND TEM 107 OR 1121  IND TEM 107 OR 1121  ALINE  118. THE ATTENDING  5575 West  IND TEM 120 NUMBY AT WORK  IND TEM 120 NUMBY AT W	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE OF  TIPLE OF CENTER EN  PHYSICIAN'S VANE,  Las Posita  121. INJUNY CATE	CONV. RE	TIME INTERNAL DEFINE PARE AND DEATH.  6 yrs  116 License Made and Death.  G41112  ZIP Chau 270, Plea	Alameda OG. CITY Pleasar 100 DEATHS 100 DEAT	DETERMINING CO.  ATE MM / DD / 1./08/199  D.  A 9458
CAUSE OF DEATH	Graham-Hitch  101 PLACE OF DEATH  OWN residence  105. STREET #DORESS-STRE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE CAUSE  DUE TO (B)  DUE TO (C)  112 OTI-SR SCHIFICANT CON  113. WAS OPERATION PERFO  114. CERTIES THAT TO THE DEATH OCCUMBED AT THE PLACE STATED FROM THE DOCCEDENT ATTENDED SINCE  WM / DD / CC YY  10 / 17 / 1996  I CURTIET THAT IN MY AT THE MOUR, DATE AN THE CAUSES STATED.  19 MAINER OF DEATH  NATURAL SUCCED  NATURAL SU	MOTURITY  ET AND MUMBLE OR LE  e AVe.  IENTER ONLY ONE CO  STATIC CATC  DEST OF MY KNOWLEDGE HE MOUN, DATE AND E CAUSES STATE MIN. DD / CC VY  11/03/1996  OPRION DEATH OCCUR DD PLACE STATIC FROM  E  IGATION COULD IN  GRADING COULD IN  GRADING COULD IN  COULD IN  GRADING COULD IN  C	FD429  J2. # FD5474 SPE  DCATION  AUSE PER LINE FOR A. B. C.  INDODA OF BELATED  IND TEM 107 OR 1121  IND TEM 107 OR 1121  ALINE  118. THE ATTENDING  5575 West  IND TEM 120 NUMBY AT WORK  IND TEM 120 NUMBY AT W	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE OF  TIPLE OF CENTER EN  PHYSICIAN'S VANE,  Las Posita  121. INJUNY CATE	CONV. RE	TIME INTERNAL DEFINE PARE AND DEATH.  6 yrs  116 License Made and Death.  G41112  ZIP Chau 270, Plea	Alameda OG. CITY Pleasar 100 DEATHS 100 DEAT	DETERMINING CO.  ATE MM / DD / 1./08/199  D.  A 9458
CAUSE OF DEATH  PHYSI CIAN'S CERTIFICATION  CORONER USE	Graham-Hitch  101 PLACE OF DEATH  OWN residence  105. STREET #DORESS-STRE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE CAUSE  DUE TO (B)  DUE TO (C)  112 OTI-SR SCHIFICANT CON  113. WAS OPERATION PERFO  114. CERTIES THAT TO THE DEATH OCCUMBED AT THE PLACE STATED FROM THE DOCCEDENT ATTENDED SINCE  WM / DD / CC YY  10 / 17 / 1996  I CURTIET THAT IN MY AT THE MOUR, DATE AN THE CAUSES STATED.  19 MAINER OF DEATH  NATURAL SUCCED  NATURAL SU	MOTURITY  ET AND MUMBLE OR LE  e AVe.  IENTER ONLY ONE CO  STATIC CATC  DEST OF MY KNOWLEDGE HE MOUN, DATE AND E CAUSES STATE MIN. DD / CC VY  11/03/1996  OPRION DEATH OCCUR DD PLACE STATIC FROM  E  IGATION COULD IN  GRADING COULD IN  GRADING COULD IN  COULD IN  GRADING COULD IN  C	ETO DEATH BUT NOT FELATED  IND. THE ATTENDING  5575 WEST  ITS PEOPLE AND THE ATTENDING  124 DESCRIBE HOW ITS  125 DESCRIBE HOW ITS  126 DESCRIBE HOW ITS  127 DESCRIBE HOW ITS  128 DESCRIBE HOW ITS  129 DESCRIBE HOW ITS  120 DESCRIBE HOW ITS  120 DESCRIBE HOW ITS  120 DESCRIBE HOW ITS  121 DESCRIBE HOW ITS  122 DESCRIBE HOW ITS  124 DESCRIBE HOW ITS  125 DESCRIBE HOW ITS  126 DESCRIBE HOW ITS  127 DESCRIBE HOW ITS  128 DESCRIBE HOW ITS  129 DESCRIBE HOW ITS  120 DESCRIBE HOW ITS	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE OF  TIPLE OF CENTER EN  PHYSICIAN'S VANE,  Las Posita  121. INJUNY CATE	DE OPERATION AND HAILING ADDRESS S BIVd. #	TIME INTERNAL STREET OF STREET	Alameda Od. CONTY Alameda Od. CITY Pleasar L 108 Death to Section 109 Deoff M 110 AUTOSY 110 AUTOSY 111 USSO M 111 USSO M 111 USSO M 111 USSO M 112 USSO M 113 USSO M 114 USSO M 115 USSO M 116 AUTOSY 117 C	DETERMINING CO.  ATE MM / DD / 1 / O8 / 199  D. A. 9458
CAUSE OF DEATH  PHYSICIAN'S CERTIFICATION  CORONER USE	Graham-Hitch  101 PLACE OF DEATH  OWN residence  105. STREET #DORESS-STRE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE CAUSE  DUE TO (B)  DUE TO (C)  112 OTI-SR SCHIFICANT CON  113. WAS OPERATION PERFO  114. CERTIES THAT TO THE DEATH OCCUMBED AT THE PLACE STATED FROM THE DOCCEDENT ATTENDED SINCE  WM / DD / CC YY  10 / 17 / 1996  I CURTIET THAT IN MY AT THE MOUR, DATE AN THE CAUSES STATED.  19 MAINER OF DEATH  NATURAL SUCCED  NATURAL SU	MOTURITY  ET AND MUMBER OR LE  e AVe.  IENTER ONLY ONE CO  STATIC CATC  TO MY SHOWLEDGE HE HOUSE, DATE AND E CAUSES STATED. DECEDENT LAST SEEN A MUND DOCCOUNT NO DIVINION DEATH OCCUR DO PLACE STATED FROM DO NUMBER ON LOCATION D NUMBER ON LOCATION D NUMBER ON LOCATION	FD429  J22 # FOSPYAL, SPE  DOCATION  AUSE RED LINE FOR A. B. C.  STRIOTIA OF BIT NOT FELATED  HON IN "EM 107 OR 112"  SEE 1.5 SECH UPE AND 1  STYLE ATTENDING  124 DESCRIBE HOW IF  125 OR AND C IV AND ZIP CODE:	TO CAUSE G. ELL IN  TO CAUSE G. ELL IN  IF YES, LIST TIPE OF  TIPLE OF CENTER EN  PHYSICIAN'S VANE,  Las Posita  121. INJUNY CATE	DE OPERATION AND HAILING ADDRESS S BIVd. #	TIME INTERNAL DEFINE PARE AND DEATH.  6 yrs  116 License Made and Death.  G41112  ZIP Chau 270, Plea	Alameda Od. CONTY Alameda Od. CITY Pleasar L 108 Death to Section 109 Deoff M 110 AUTOSY 110 AUTOSY 111 USSO M 111 USSO M 111 USSO M 111 USSO M 112 USSO M 113 USSO M 114 USSO M 115 USSO M 116 AUTOSY 117 C	DETERMINING CO.  ATE MM / DD / 1 / O8 / 199  D. A. 9458
COPONER USE	Graham-Hitch  101 PLACE OF DEATH  OWN residence  105. STREET #DORESS—STRE  2557 Glen Isl  107 DEATH WAS CAUSED BY:  IMMEDIATE CAUSE  DUE TO (B)  DUE TO (C)  112 OTLER S GRIFICANT CON  113. WAS OPERATION PERFO  114. CERTIES THAT TO THE DEATH OCCURRED AT THE PLACE STATED FROM THE DOCCEDENT ATTENDED SINCE  WM / DD / CC YY  10/17/1996  1 CURTIES THAT IN MY AT THE HOUR, DATE AN THE CAUSES STATED.  19 MAINER OF DEATH  NATURAL SURCED  ACCIDENT PROST  125. LOCATION ISTREET AN	MOTURITY  ET AND MUMBER OR LE  e AVe.  IENTER ONLY ONE CO  STATIC CATC  TO MY SHOWLEDGE HE HOUSE, DATE AND E CAUSES STATED. DECEDENT LAST SEEN A MUND DOCCOUNT NO DIVINION DEATH OCCUR DO PLACE STATED FROM DO NUMBER ON LOCATION D NUMBER ON LOCATION D NUMBER ON LOCATION	FD429  J22 # FOSPYAL, SPE  DOCATION  AUSE RED LINE FOR A. B. C.  STRIOTIA OF BIT NOT FELATED  HON IN "EM 107 OR 112"  SEE 1.5 SECH UPE AND 1  STYLE ATTENDING  124 DESCRIBE HOW IF  125 OR AND C IV AND ZIP CODE:	AND DI  TO CAUTE G.EH IN  TO CAUTE G.EH IN  HE VES, LIST TIME G.  THILE OF CENTURE EM  PHYSICIAN S NAME  Las Positian S NAME  Las Positian S NAME  Las Positian S NAME  Las Positian S NAME  121 INJURY OCCURRE IE	TOP OPERATION AND MAILING ADDRESS S BIVD. #	TIME INTERNAL STREET OF STREET	Alameda Od. CONTY Alameda Od. CITY Pleasar L 108 Death to Section 109 Deoff M 110 AUTOSY 110 AUTOSY 111 USSO M 111 USSO M 111 USSO M 111 USSO M 112 USSO M 113 USSO M 114 USSO M 115 USSO M 116 AUTOSY 117 C	DETERMINING CO.  ATE MM / DD / 1 / O8 / 199  D. A. 9458

STATE OF CALIFORNIA, COUNTY OF ALAMEDA

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Alameda County Recorder.

PATRICK O'CONNELL AI AMEDA COUNTY RECORDER

APR 1 3 1998

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the Recorder.