## **2022-007927**Klamath County, Oregon



06/28/2022 10:46:34 AM

Fee: \$97.00

FORM No. 1406-A-AFFIDAVIT OF CLAIMING SUCCES	SOR-TEALE ESTATE.	CORYRIGHT 1991 STEVENS	ESS LAW PUBLISHING CO	D., PORTLAND, OR 97204
NB *				<u> </u>
<b>-</b>	•		<b>E</b> 11	ED W
		KLAMATH	071-77 05	- <u> </u>
In the Probate Cou	ort of the County of		, Orego	niktous
			100/200	11
		Estate No. 4	204288	
Small Estate of:			1997 DEC 3	T PA 3: 11
FLORENCE LURYNE WILLIA	MS >	Affidavit of Cl	AIMING SUCC	ESSOR
***************************************	Deceased.	TESTAT	E ESTATE	F COURT
	Deceased.			0
STATE OF OREGON, County of	KLAMATH	<b>&gt;</b>	BY Sally	Ray
STATE OF OREGON, County of		) SS.	U	ų ,
- CENEVIEVE A UPAC	omu .			
I, GENEVIEVE A. HEAR	<u> </u>	, being tirst duly swe	orn, depose and	say that: I am a
devisee of the above named deced				ate as set forth
below. This affidavit is made pursu	uant to Oregon Revised S	tatutes, Section 114.505 to	o 114.560.	
			W.	1,7 1,6 7077
(1) Name of Decedent FLO	PRENCE LURYNE WILLI D5 HOPE STREET, KLA	AMS Age 94	Soc. Sec. No.	7057
Domicile/Post Office Address 210	5 HOPE STREET, KLA	MATH FALLS, OREGO	N 97603	
,			·	
(2) Decedent died	EMBER 12	1991 at KLAMATH	FALLS, ORE	EGON
A certified copy of decedent's death				•
A certified copy of decederic's death	certificate is attached her	eto.		
(2) A description of all of a		ting at a fair manhad mate	o of the sent o	increase and the
(3) A description of all of o		iing the lair market valu	ie of the real p	roperty and the
fair market value of the personal p				Fair Market Value
Real Property Legal Description (I		WILL T. KI. 400	11111	Pair Market Value
NONE		CONTRACTOR OF THE PARTY OF THE	72. 4	
·····		Contraction of the second	THE E	
		Liberary Company	0003	
Personal Property Desc	ription	a direct and	F 2	Fair Market Value
LIFE INSURANCE PAYMENT		oi in softing \ 37 julie		1127.00 tiàmille/k/r/
UNITED STATE SAVING BON	IDS, SERIES EE	Cistik & Court		N45/1.00 ///
		970	0 1 1	
		18 18 2 W	JUNI SE	了,在最初上的一
		DateC104AAAA	- E	16.50 E. S.
(4) No application or petition	on for the appointment of	a personal representative	has been érafit	ed in Oreconic
(1) The application of points	in tor the appointment of	a personal representative	3000	
(5) The decedent died tests	ite: decedent's will is atta	ched to this affidavit		25
(3) The decedent died tests	ite, decedent s will is alla	ched to this anidavit.	Ω.Υ. Ο	以"是 <b>的</b> 的"的
(6) Decedent's heirs and the	a last address of each an I	rooms to affiord and	Š.	₹島市市品 メネス
			Known Address	H g d + g ひ ひ .
AMY, LURYNE, RILEY	863 W 38th Ave, F	PEKA CA 96097	Ż∌	品を買いる。
MARIE E. CLINE		, KLAMATH FALLS,	OR 976038	- <del>6</del> -2-5-5-5
DANIEL E. WILLIAMS	-4087 GRAHAM ST.,	PLEASANTON, CA 9	4566 PE	<u>'-5895</u>
BARBARA L. WILLIAMS		KLAMATH FALLS, OR	1 - 1- 12/	J. 3. 3. 3. 5. 5. 4. 4.
GENEVIEVE A. HEARTH		KLAMATH FALLS, OR	- 1/2 () 4-	<b>1</b> 3 · <b>8</b> · 3 · 3 · 3 · 3 · 3 · 3 · 3 · 3 · 3 ·
"WILLIAM R. WILLIAMS		STREET, FEDERAL WA		2 3 T T T
***************************************				4 6 3 4 D
A copy of this affidavit show	ving the date of filing and	a copy of decedent's wil	l will be defive	eg to gach their
or mailed to each heir at the heir's	last known address stated	d above.	1, 3, 6	\d \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		•	2 3	
(7) Decedent's devisees and	the last address of each a	as known to affiant are:	5 8	2 2 2 3
Name		I set Vesus	n Address 🖁 🧸	
AMY LURYNE RILEY	863 W 38th Ave, I		1 *1	्र ९ चे ईं हे
CARL_D. WILLIAMS	612 SHASTA AVE,	reka, ca 96097	\ \ \ \ \ \ \	2 \$ ≠ 0 €
MARIE E. CLINE	2105% HOPE STREET	r, KLAMATH FALLS,	OR -97603 0	Q # 500
DANIEL E. WILLIAMS	4087 GRAHAM ST.,		4566	
BARBARA. L. WILLIAMS	1622 AUSTIN ST	KLAMATH FALLS, OR		, a
GENEVIEVE A. HEARTH		KLAMATH FALLS, OR		) <del>**</del>
***************************************				<u>, 8                                   </u>
WILLIAM R. WILLIAMS		STREET, FEDERAL WA	• • • • • • • • • • • • • • • • • • •	- <i>J</i>
A copy of the will and a co	py of the affidavit showing	ng the date of filing will	be delivered t	o each devisee

or mailed to the devisee at the devisee's last known address.

MY LURYNĖ RILEY Name			Interest /2
ARIE E. CLINE			1/7
ANIEL E. WILLIAMS		······································	<u> 1/7</u>
ARBARA L. WILLIAMS ENEVIEVE A. HEARTH		•	1/2
ILLIAM R. WILLIAMS		•••••	1/7
IDDIAN K. WIDDIAND	<u> </u>		1//
e estate remaining unpaid or or m the estate, including the know own to the affiant are:	wn or estimated amounts ther	nt or any other pers	on is entitled to reimburse
Name of Creditor	Address	Nature of Expe	nse/Claim Known or Estimated
	- · · · · · · · · · · · · · · · · · · ·		
* * * * * * * * * * * * * * * * * * * *	······································		
•	· · · ·	,	·····
•			
or mailed to the creditor at the (10) The name and address	e last known address. s of each person known to th	e affiant to assert a	claim against the estate
affiant disputes and the last k	nown or estimated amount th	nereof:	
Name	Add	ress	Known or Estimated
ME.			
A copy of the affidavit show	ing the date of filing will be do	elivered to each of the	e above or mailed to each p
each person's last known addres	ss. it showing the date of filing t	will be mailed or del	ivered to the Adult and F
A copy of the affidavit show, each person's last known addres  (11) A copy of the affidavit shows a copy of the affidavit structure of the copy of the copy of the affidavit structure of the copy of the	it showing the date of filing tration Section and to the Dep	will be mailed or del partment of Revenue	ivered to the Adult and F , Salem, Oregon.
A copy of the affidavit show each person's last known addres  (11) A copy of the affidavitivices Division, Estate Administ  (12) Claims against the estates:	it showing the date of filing tration Section and to the Depter tate not listed herein or in an	will be mailed or del partment of Revenue nounts larger than th	ivered to the Adult and F , Salem, Oregon. nose listed herein may be b
A copy of the affidavit shows each person's last known address (11) A copy of the affidavitivices Division, Estate Administ (12) Claims against the estates:  (a) A claim is presented to to 143 SHASTA WAY, KLAMAT	it showing the date of filing tration Section and to the Deptate not listed herein or in another affiant within four months H FALLS, OREGON 9760	will be mailed or deloartment of Revenue nounts larger than the of the filing of this at 13,4431	ivered to the Adult and F , Salem, Oregon. lose listed herein may be b fidavit at the following ad
A copy of the affidavit show each person's last known address (11) A copy of the affidavivices Division, Estate Administ (12) Claims against the estimates:  (a) A claim is presented to (2) SHASTA WAY, KLAMAT (b) A personal representati	it showing the date of filing tration Section and to the Deptate not listed herein or in another affiant within four months H FALLS, OREGON 9760 we of the estate is appointed	will be mailed or deloartment of Revenue nounts larger than th of the filing of this at 3 4431 within the time allow	ivered to the Adult and F , Salem, Oregon. lose listed herein may be b fidavit at the following ad
A copy of the affidavit show each person's last known address (11) A copy of the affidavitivices Division, Estate Administ (12) Claims against the estates:  (a) A claim is presented to the SHASTA WAY, KLAMAT (b) A personal representation (13) The claim(s), if any, 1	it showing the date of filing tration Section and to the Deptate not listed herein or in and the affiant within four months H FALLS, OREGON 9760 we of the estate is appointed listed in Section (10) may be	will be mailed or deloartment of Revenue nounts larger than the of the filing of this at 1431 within the time allow barred unless:	ivered to the Adult and F , Salem, Oregon. nose listed herein may be b fidavit at the following advected under ORS 114.555.
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A copy of the affidavit show each person's last known address (11) A copy of the affidavities Division, Estate Administ (12) Claims against the estates:  (a) A claim is presented to to SHASTA WAY, KLAMAT (b) A personal representati (13) The claim(s), if any, I (a) A petition for summary	it showing the date of filing tration Section and to the Deptate not listed herein or in and the affiant within four months H FALLS, OREGON 9760 we of the estate is appointed isted in Section (10) may be a determination is filed within we of the estate is appointed when the state i	will be mailed or deloartment of Revenue nounts larger than the of the filing of this at 1431 within the time allow barred unless:	ivered to the Adult and F , Salem, Oregon. nose listed herein may be be fidavit at the following advection and the following advection of this affidavit; or
A copy of the affidavit show each person's last known address (11) A copy of the affidavitivices Division, Estate Administ (12) Claims against the estates:  (A) A claim is presented to to SHASTA WAY, KLAMAT (b) A personal representati (13) The claim(s), if any, I (a) A petition for summary (b) A personal representation	it showing the date of filing tration Section and to the Deptate not listed herein or in another affiant within four months. H. FALLS, OREGON 9760 we of the estate is appointed isted in Section (10) may be determination is filed within we of the estate is appointed within the state is appointed within the	will be mailed or deleartment of Revenue nounts larger than the of the filing of this at 1431 within the time allow barred unless: a four months of the within the time allow that the time allow the tim	ivered to the Adult and F , Salem, Oregon. nose listed herein may be be fidavit at the following advection and the following advection of this affidavit; or

of any county in which real property belonging to the decedent is situated.

EXCERPT FROM ORS 114.515: "If the estate consists of personal property having a fair market value of \$25,000 or less, or real property having a fair market value of \$60,000 or less, and real property having a fair market value of \$60,000 or less, and real property having a fair market value of \$60,000 or less, and real property having a fair market value of \$60,000 or less, not less than 30 days after the death of the decedent, one or more of the claiming successors may file an affidavit with the clerk of the probate court in any county where there is venue for a proceeding seeking the appointment of a personal representative for the estate. The affidavit shall contain the information restated by ORS 114.525 \*\*\*."

## the Name of God - - Amen 1992 DEC 21

KNOW ALTIMON, That I F/Orenet L, Williams CLERK OF COURT, a resident of and domiciled in X lamath Falls

BY Sally Day

in the State of OFE JOYA, of the age of 79 years, being of sound and

disposing mind and memory, and not acting under duress, menace, fraud or undue influence of any person whomsoever, do make, publish and declare this my last will and testament in manner and form following, to-wit:

FIRST, I direct that all my just and unsecured debts and funeral expenses be duly paid and satisfied as soon as conveniently can be done after my decease.

SECOND, I give my lot and house at 2105 Hope Street to my daughter, Marie Elizabeth Cline All the rest, residue, and remainder of my estate I direct to be divided among my surviving children, under the supervision of my executrix. · THIRD, In addition to all other powers conferred by law and elsewhere herein granted, my executrix, Genevieve Ann Hearth, shall have full power to receive, hold, manage, convert, sell, assign, alter, reinvest, and otherwise deal with the properties in my estate as she shall deem to be for the best interests of my beneficiaries to the same extent that I myself might do if living, all without obtaining authority or confirmation from any court. My executrix is to act without bond and without being required to give security. FOURTH, In addition, if fore said Marie Elizabeth Cline should procede me indeath, or wishes not to claim the forementioned property, my executrix shall have full power to deal with the property as the rest of my estate.

to be the execut	trix of this,	my will and	d the p	nd appoint Genevieve Ann Hearth  personal representative of my estate,
testament.  IN WIT	NESS WHERE	OF, I have	hereur	unto set my hand, on this day of last will and
•	M. Sti Austin	A .	Ý	Elouver L. Williams Klasmat Afalls. Ore.
	Summer Jummer		Hu anu Re	undlig.  Llamath Falls, Orign  Residence.
and testament a	and acknowledge made on said w	ill was his/	each d hers, w	declared the foregoing instrument to be his/her last will of the undersigned in the hearing and presence of each that the signa-whereupon each of the undersigned at his/her request attested said will nesses.  Common Stuley  Presulta Leuse Shundley
Cast Will and	<b>Testament</b> of	Flacense L. Williams	(FORM No. 1402)	STEVENS-NESS LAW PUB. CO PORTLAND, ORE.

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