

## RECORDING COVER SHEET

Any errors in this cover sheet DO NOT affect the transactions(s) contained in the instrument itself.

**2023-006078**

Klamath County, Oregon

07/21/2023 11:28:02 AM

Fee: \$92.00

### AFTER RECORDING RETURN TO:

**FNAS**

**6500 PINECREST DR STE 600**

**PLANO TX 75024**

**FNC-ARS-86529**

**IF A CHANGE IS REQUIRED: ALL TAX STATEMENTS SHALL BE SENT TO THE FOLLOWING NAME AND ADDRESS:**

**MARGARET PAULSON**

**17787 Fishhole Creek Road**

**Bly, OR 97622**

**DOCUMENT TITLE: DEATH CERTIFICATE**

**NAME OF DECEASED:**

**FRANKLIN LEROY PAULSON**

# STATE OF OREGON

## CERTIFICATION OF VITAL RECORD



Returned at Counter

\*7525471\*

TO BE COMPLETED BY FUNERAL FACILITY

### OREGON HEALTH AUTHORITY CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

892989

I.D. TAG NO.

STATE FILE NUMBER

1. Legal Name First: Franklin Middle: LeRoy Last: Paulson Suffix:				2. Death Date March 02, 2022	
3. Sex Male		4. Age 78 years		5. Social Security Number	
7. Birthdate October 24, 1943		8. Birthplace Klamath Falls, Oregon		6. County of Death Klamath	
10. Was Decedent of Hispanic Origin? No		11. Decedent's Race(s) White		9. Decedent's Education High school grad. or GED	
13. Residence: Number and Street 17787 Fishhole Creek Road		14. City/Town Bly		12. Was Decedent Ever in U.S. Armed Forces? No	
15. Residence County Klamath		16. State or Foreign Country Oregon		17. Zip Code + 4 97622	
18. Marital Status at Time of Death Married		20. Spouse's Name Prior to First Marriage Margaret L. Johanntoberns			
21. Usual Occupation Car Man		22. Kind of Business/Industry Railroad			
23. Father's Name Charles Henry Paulson		24. Mother's Name Prior to First Marriage Helen Hazel Anderson			
25. Informant's Name Margaret Paulson		26. Telephone Number Not Available		27. Relationship to Decedent Spouse	
29. Place of Death Hospital-Inpatient		30. Facility Name Sky Lakes Medical Center			
31. Location of Death 2865 Daggett Avenue		32. City/Town or Location of Death Klamath Falls		33. State Oregon	
35. Method of Disposition Cremation		36. Place of Disposition Pyramid Cremations		34. Zip Code + 4 97601	
37. Location Klamath Falls, Oregon					
38. Name and Complete Address of Funeral Facility Desert Rose Funeral Chapel 1705 N 4th St, Lakeview, Oregon 97630					
39. Date of Disposition March 03, 2022		40. Funeral Director's Signature Kristin A. Thompson		41. OR License Number FS-0650	
42. Registrar's Signature Jessica F. Dale		43. Date Received 3-14-2022		44. Local File Number 22-044	
45. Amendment					

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

DATE ISSUED: MAR 14 2022

JENNIFER A. WOODWARD, Ph.D.  
STATE REGISTRAR

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



### **Exhibit A**

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE COUNTY OF KLAMATH, STATE OF OREGON, AND IS DESCRIBED AS FOLLOWS:

Parcel 1: The N1/2 NE1/4 NE1/4 of Section 12, Township 37 South, Range 14 East of the Willamette Meridian, Klamath County, Oregon.

Parcel 2: The S1/2 NE1/4 NE1/4 of Section 12, Township 37 South, Range 14 East of the Willamette Meridian, Klamath County, Oregon.

Manufactured/Mobile Home:

Name: N/A

Model No.: QH287401

New/Used/Year: 2007

Serial No.: 09136086XU

Length and Width: 27x70

Parcel Id: 404182 & 404164 & 584246

Parcel ID:404182 & 404164 & 584246

Commonly known as 17787 Fishhole Creek Road, Bly, OR 97622  
However, by showing this address no additional coverage is provided