

DESCRIPTION  
SUFFICIENT  
FOR TAX MAPPING PURPOSES

FEB 10 2015

MERCER COUNTY  
TAX MAP DEPARTMENT

**TRANSFERRED**

FEB 10 2015

RANDALL E. GRAPNER  
COUNTY AUDITOR  
MERCER COUNTY, OHIO

Exemption paragraph, ~~conveyance fee~~ ET  
The Grantor and Grantee of this deed have  
complied with the provisions of R.C. Sec 319,  
202 Randall E. Grapner Mercer County Auditor.

KP 2-10-15  
Deputy Aud. Date

**AFFIDAVIT AS TO DEATH OF TRUSTEE  
AND APPOINTMENT OF SUCCESSOR TRUSTEE**

STATE OF OHIO           )  
COUNTY OF DARKE    ) SS:

I, the undersigned, being first duly cautioned and sworn, depose  
and say that:

1. On August 13, 1997, at Greenville, Ohio, Elmer H. Klosterman of 4659 Harrison Road, Celina, Ohio 45822 as Grantor, and Elmer H. Klosterman of 4659 Harrison Road, Celina, Ohio 45822, as Trustee entered into an intervivos trust agreement known as the ELMER H. KLOSTERMAN TRUST dated the 13<sup>th</sup> day of August, 1997;
2. A Memorandum of Trust concerning said trust was recorded in Volume 34, Page 475 of the Miscellaneous Records of MERCER County, Ohio on August 18, 1997;
3. Also on August 13, 1997, Elmer H. Klosterman as Grantor executed a Quit Claim Deed thereby transferring real estate to Elmer H. Klosterman, as Trustee. Said deed was recorded in Volume 34, Page 499 of the Deed Records of MERCER County, Ohio and relates to the following described real estate:

See Exhibit "A" attached hereto and made a part hereof-----

4. Elmer H. Klosterman died on April 24, 2014 and his estate was administered in the MERCER County Probate Court under Case Number 2014 1189;
5. On the 29<sup>th</sup> day of May, 2014, Eulalia M. Klosterman resigned as Trustee of the ELMER H. KLOSTERMAN TRUST dated the 13<sup>th</sup> day of August, 1997, a copy of her Resignation is attached hereto as Exhibit "B" and is made a part hereof.

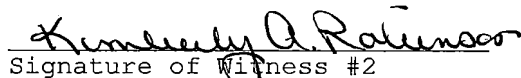
6. By reason of the death of Elmer H. Klosterman and the resignation of Eulalia M. Klosterman, and pursuant to Article VIII of the ELMER H. KLOSTERMAN TRUST dated the 13<sup>th</sup> day of August, 1997, Brian J. Klosterman, of 7392 County Road 219A, Celina, Ohio 45822; Terence L. Klosterman, of 4424 Harrison Road, Celina, Ohio 45822; James A. Klosterman, 4659 Harrison Road, Celina, Ohio 45822; and Daniel E. Klosterman, of 7989 State Route 219, Celina, Ohio 45822, have succeeded as the Co-Trustees of the ELMER H. KLOSTERMAN TRUST. Article VIII Provisions Regarding The Trustee, which states in part that, "If the successor Trustee should die...then the following individuals shall serve...as alternate successor Co-Trustees...with all the...duties and powers...granted to the original Trustee...: Brian J. Klosterman; Terence L. Klosterman; James A. Klosterman; and Daniel E. Klosterman.";
7. This Affidavit is executed to evidence of record the death of a Trustee, the resignation of Eulalia M. Klosterman as Trustee, the current status of the trusteeship, and to enable the Auditor of MERCER County to transfer the ownership of said real property upon the Auditor's Tax List into the name of the present owner as a Co-Trustees, Brian J. Klosterman, Terence L. Klosterman, James A. Klosterman and Daniel E. Klosterman, Co-Trustees of the ELMER H. KLOSTERMAN TRUST dated the 13<sup>th</sup> day of August, 1997 and out of the name of the deceased owner. A copy of the Death Certificate of ELMER H. KLOSTERMAN is attached hereto as Exhibit "C" and is made a part hereof.

IN WITNESS WHEREOF, the undersigned Brian J. Klosterman has hereunto set his hand this 2<sup>nd</sup> day of February, 2015.

Signed and acknowledged in  
the presence of:

  
Signature of Witness #1

GARY L. FLINN  
Printed Name of Witness #1

  
Signature of Witness #2

Kimberly A. Robinson  
Printed Name of Witness #2

  
Brian J. Klosterman, as Co-Trustee

Before me, a Notary Public in and for said County and State, personally appeared the said Brian J. Klosterman who acknowledges that he did sign the foregoing instrument and that the same is his free act and deed.

Sworn to before me and subscribed in my presence this 2<sup>nd</sup> day of February, 2015.

<SEAL>



Gary L. Flinn  
Notary Public  
My commission expires:

**GARY L. FLINN, Attorney - At - Law**  
**NOTARY PUBLIC - STATE OF OHIO**  
My Commission has no expiration date.  
Section 147.03 R. C.

STATE OF OHIO )  
COUNTY OF DARKE ) SS:

IN WITNESS WHEREOF, the undersigned Terence L. Klosterman has hereunto set his hand this 2<sup>nd</sup> day of February, 2015.

Signed and acknowledged in the presence of:

Gary L. Flinn  
Signature of Witness #1

GARY L. FLINN  
Printed Name of Witness #1

Terence L. Klosterman  
Terence L. Klosterman, as Co-Trustee

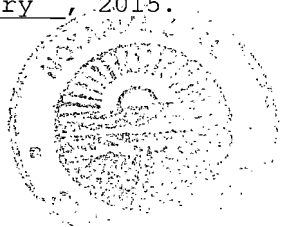
Kimberly A. Robinson  
Signature of Witness #2

Kimberly A. Robinson  
Printed Name of Witness #2

Before me, a Notary Public in and for said County and State, personally appeared the said Brian J. Klosterman who acknowledges that he did sign the foregoing instrument and that the same is his free act and deed.

Sworn to before me and subscribed in my presence this 2<sup>nd</sup> day of  
February, 2015.

<SEAL>



Gary L. Flinn  
Notary Public  
My commission expires:

GARY L. FLINN, Attorney - At - Law  
NOTARY PUBLIC - STATE OF OHIO  
My Commission has no expiration date.  
Section 147.03 R. C.

STATE OF OHIO )  
COUNTY OF DARKE ) SS:

IN WITNESS WHEREOF, the undersigned James A. Klosterman has  
hereunto set his hand this 2<sup>nd</sup> day of February, 2015.

Signed and acknowledged in  
the presence of:

Gary L. Flinn  
Signature of Witness #1

GARY L. FLINN  
Printed Name of Witness #1

James A. Klosterman  
James A. Klosterman, as Co-Trustee

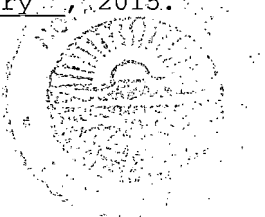
Kimberly A. Robinson  
Signature of Witness #2

Kimberly A. Robinson  
Printed Name of Witness #2

Before me, a Notary Public in and for said County and State,  
personally appeared the said James A. Klosterman who acknowledges that he  
did sign the foregoing instrument and that the same is his free act and  
deed.

Sworn to before me and subscribed in my presence this 2<sup>nd</sup> day of  
February, 2015.

<SEAL>



Gary L. Flinn  
Notary Public  
My commission expires:

GARY L. FLINN, Attorney - At - Law  
NOTARY PUBLIC - STATE OF OHIO  
My Commission has no expiration date.  
Section 147.03 R. C.

STATE OF OHIO )  
COUNTY OF DARKE ) SS:

IN WITNESS WHEREOF, the undersigned Daniel E. Klosterman has hereunto set his hand this 2nd day of February, 2015.

Signed and acknowledged in the presence of:

Gary L. Flinn  
Signature of Witness #1

Daniel E. Klosterman  
Daniel E. Klosterman, as Co-Trustee

GARY L. FLINN  
Printed Name of Witness #1

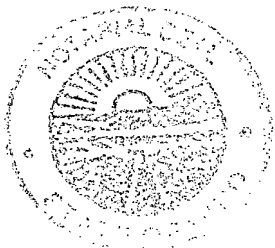
Kimberly A. Robinson  
Signature of Witness #2

Kimberly A. Robinson  
Printed Name of Witness #2

Before me, a Notary Public in and for said County and State, personally appeared the said Daniel E. Klosterman who acknowledges that he did sign the foregoing instrument and that the same is his free act and deed.

Sworn to before me and subscribed in my presence this 2nd day of February, 2015.

<SEAL>



Gary L. Flinn  
Notary Public  
My commission expires:

GARY L. FLINN, Attorney - At - Law  
NOTARY PUBLIC - STATE OF OHIO  
My Commission has no expiration date.  
Section 147.03 R. C.

This instrument prepared by: Gary L. Flinn of Gary L. Flinn Co., L.P.A., located at 429 Memorial Drive, Greenville, Ohio 45331 at the specific request of, and based solely upon information supplied by one or more of the parties to this instrument. The drafter assumes no liability for any errors, inaccuracies or omissions in this instrument resulting from the information provided, and makes no assertions with respect to liens which may be against the property, and the parties hereto signify assent to this Disclaimer by the execution and acceptance of this instrument.

**EXHIBIT A**

*An undivided one-half (1/2) interest in the following:*

Situated in the Township of Franklin, County of Mercer and State of Ohio, and bounded and described as follows: The east one-half (1/2) of the southeast quarter (1/4) of Section 28, Town 6 South, Range 3 East, less and except the following out of the southwest corner thereof, which exception is described as follows, to-wit;

Commencing at the southwest corner of the east half of the southeast quarter (1/4) of Section 28, Town 6 South, Range 3 East, thence north 9 rods; thence east 17 7/9 rods, thence south 9 rods to the section line; thence west on and along the section line 17 7/9 rods to the place of beginning, containing one (1) acre of land more or less and containing after said exception, seventy-nine (79) acres of land more or less.

EXCEPTING THEREFROM: Situate in the Township of Franklin in the County of Mercer and the State of Ohio. Being a parcel of land situated in Franklin Township, Mercer County, Ohio, in the east half of the southeast quarter of Section 28, Township 6 South, Range 3 East. Being more particularly described as follows: Commencing for reference at the corner at the northeast corner of the southeast quarter of said Section 28. Thence, west, along the north line of the southeast quarter of said Section 28 and the centerline of County Road 219-A, a distance of nine hundred seventy-six and 52/100 (976.52) feet to a mine spike set by this survey. Said point being the place of beginning for the parcel to be conveyed by this instrument. Thence, continuing, west, along the last described line, a distance of three hundred fifty-two and 13/100 (352.13) feet to a mine spike set by this survey at the northwest corner of the east half of the southeast quarter of said Section 28. Thence, south 00° 00' 41" east, along the west line of the east half of the southeast quarter of said Section 28, a distance of two hundred forty-seven and 41/100 (247.41) feet to a 5/8 inch iron bar set by this survey. Thence, east, a distance of three hundred fifty-two and 13/100 (352.13) feet to a 5/8 inch bar set by this survey. Thence, north 00 ° 00' 41" west, a distance of two hundred forty-seven and 41/100 (247.41) feet to the place of beginning. Containing 2.000 acres of land more or less of which the northerly thirty (30.00) feet is dedicated as road right-of-way of record.

Remaining herein 77.000 acres, more or less, subject to all legal highways, easements and restrictions of record.

Prior Reference: Volume 34, Page 502; Volume 34, Page 499; Volume 311, Page 375; Volume 283, Page 444; and Volume 181, Page 50 of the Deed Records of Mercer County, Ohio.

**Parcel No. 09-117200.0000 (77.000 Acres)**  
**Map Number: 09-28-400-003**

EXHIBIT "B"

RESIGNATION TO ACT AS TRUSTEE

The undersigned, Eulalia M. Klosterman, of 4659 Harrison Road, Celina, Ohio 45822 designated as successor Trustee under that certain trust agreement known as the ELMER H. KLOSTERMAN TRUST dated August 13, 1997, does hereby irrevocably resign and decline to act as successor Trustee under the terms and conditions of such Trust Agreement.

Signed at Greenville, Darke County, Ohio, this 29th day of May, 2014.

Witnesseth:

Lynette K. Fourman

Printed Name: Lynette K. Fourman



Eulalia M. Klosterman  
Eulalia M. Klosterman

Judith J. Stauffer

Printed Name: JUDITH J. STAUFFER

STATE OF OHIO  
COUNTY OF DARKE, SS:

Sworn to before me and subscribed in my presence by the said Eulalia M. Klosterman this 29th day of May, 2014.



Judith J. Stauffer  
Notary Public

JUDITH J. STAUFFER  
Notary Public-State of Ohio  
My Comm. Expires 1-15-16

VERIFY PRESENCE OF ODH WATERMARK

HOLD TO LIGHT TO VIEW

Reg. Dist. No. 54

Ohio Department of Health  
VITAL STATISTICS

EXHIBIT "C"

Primary Reg. Dist. No. 5400

## CERTIFICATE OF DEATH

State File No. 2014037337

Registrar's No. 2014000100

Type or print in permanent blue or black ink

DECEDENT

1. Decedent's Legal Name (Include AKA's if any) (First Middle, LAST, suffix) <b>ELMER HENRY KLOSTERMAN</b>				2. Sex <b>Male</b>		3. Date of Death (Mo/Day/Year) <b>April 24, 2014</b>					
4. Social Security Number <b>[REDACTED]</b>		5a. Age (Years) <b>84</b>		5b. Under 1 Year Months <b>[REDACTED]</b>		5c. Under 1 day Hours <b>[REDACTED]</b> Minutes <b>[REDACTED]</b>		6. Date of Birth (Mo/Day/Year) <b>September 18, 1929</b>		7. Birthplace (City and State or Foreign Country) <b>DAYTON, OHIO</b>	
8a. Residence/State <b>OHIO</b>				8b. County <b>MERCER</b>				8c. City or Town <b>CELINA</b>			
8d. Street and Number <b>4659 Harrison Rd.</b>				8e. Apt. No. <b>[REDACTED]</b>		8f. Zipcode <b>45822</b>		8g. Inside City Limits? <b>No</b>			
9. Ever in US Armed Forces? <b>Yes</b>		10. Marital Status at Time of Death <b>Married</b>				11. Surviving Spouse's Name (If wife, give name prior to first marriage) <b>EULALIA STAMMEN</b>					
12. Decedent's Education <b>HIGH SCHOOL GRADUATE OR GED</b>				13. Decedent of Hispanic Origin <b>No</b>				14. Decedent's Race <b>White</b>			
15. Father's Name <b>LAWRENCE L KLOSTERMAN</b>						16. Mother's Name (prior to first marriage) <b>FLORENTINA C KRAMER</b>					
17a. Informant's Name <b>EULALIA KLOSTERMAN</b>						17b. Relationship to Decedent <b>Wife</b>		17c. Mailing Address (Street and Number, City, State, Zip Code) <b>4659 Harrison Rd. CELINA, OHIO 45822</b>			
18a. Place of Death <b>Hospital - Inpatient</b>				18b. Facility Name (If not institution, give street & number) <b>MERCER CO JOINT TOWNSHIP COMM</b>				18c. City or Town, State and Zip Code <b>COLDWATER, OH 45828</b>			
18d. County of Death <b>MERCER</b>				19. Signature of Funeral Service Licensee or Other Agent <i>[Signature]</i>				20. License Number (of licensee) <b>007618</b>			
21. Name and Complete Address of Funeral Facility <b>N J HOGENKAMP SONS INC 715 E MAIN ST COLDWATER, OH 45828</b>				22a. Method of Disposition <b>Burial</b>				22b. Date of Disposition <b>April 28, 2014</b>			
22c. Place of Disposition (Name of Cemetery, Crematory, or other place) <b>Our Lady of Guadalupe Cemetery</b>				22d. Location (City/Town and State) <b>MONTEZUMA, OH</b>				23. Registrar's Signature <i>[Signature]</i>			
24. Date Filed <b>April 29, 2014</b>				25a. Name of Person Issuing Burial Permit <b>HOGENKAMP, BRIAN JAMES</b>				25b. District No. <b>5400</b>			
25c. Date Burial Permit Issued <b>April 27, 2014</b>				26a. Certifier (Check only one) <input checked="" type="checkbox"/> Certifying Physician To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated. <input type="checkbox"/> Coroner On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.				26b. Time of Death <b>1000</b>			
26c. Date Pronounced Dead (Mo/Day/Year) <b>April 24, 2014</b>				26d. Was case referred to coroner? <b>No</b>				26e. Signature and Title of Certifier <i>[Signature]</i>			
26f. License number <b>35.059399</b>				26g. Date Signed <b>Apr 1 24 2014</b>				27. Name (Last, First, Middle) and Address of Person who Completed Cause of Death <b>SCHWIETERMAN, JAMES THOMAS, 8381 ST RT 119 MARIA STEIN, OH 45860</b>			
28. Part I. Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. Type or print in permanent blue or black ink.				29a. Was An Autopsy Performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				29b. Were Autopsy Findings Available Prior To Completion Of Cause of Death? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable			
Immediate Cause (Final disease or condition resulting in death) <b>Respiratory Failure</b>				a. Due to (or as Consequence of) <b>Aspiration Pneumonia</b>				Approximate Interval Between Onset and Death <b>48 hours</b>			
Sequentially list conditions, if any, leading to immediate cause. <b>Aspiration Pneumonia</b>				b. Due to (or as Consequence of) <b>Aortic Stenosis</b>				<b>48 hours</b>			
Enter Underlying Cause (Disease or injury that initiated events resulting in a death) <b>Aortic Stenosis</b>				c. Due to (or as Consequence of) <b>[REDACTED]</b>				<b>71 year</b>			
d. Due to (or as Consequence of) <b>[REDACTED]</b>				Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I. <b>[REDACTED]</b>				30. Did Tobacco Use Contribute to Death? <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> Probably			
31. If Female, Pregnancy Status <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year				32. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined				33a. Date of Injury (Mo/Day/Year) <b>[REDACTED]</b>			
33b. Time of Injury <b>[REDACTED]</b>				33c. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area) <b>[REDACTED]</b>				33d. Injury at Work? <input type="checkbox"/> Yes <input type="checkbox"/> No			
33e. Location of Injury (Street and Number or Rural Route Number, City or Town, State) <b>[REDACTED]</b>				33f. Describe How Injury Occurred: <b>[REDACTED]</b>				33g. If Transportation Injury, Specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other: <b>[REDACTED]</b>			

REGISTRAR DISPOSITION

CERTIFIER

CAUSE OF DEATH

HEA 2724 Rev. 01/07

SEAL

I HEREBY CERTIFY THIS  
DOCUMENT IS AN EXACT  
COPY OF THE ORIGINAL FILED WITH  
THE OHIO DEPARTMENT OF HEALTH.

AP 29 14 4 19 125

KRISTI TIMMERMAN  
OFFICE OF VITAL STATISTICS  
WITNESS MY SIGNATURE & SEAL

VERIFY PRESENCE OF ODH WATERMARK

HOLD TO LIGHT TO VIEW