

TRANSFERRED

DESCRIPTION
SUFFICIENT
FOR TAX MAPPING PURPOSES

JAN 15 2016

MERCER COUNTY
TAX MAP DEPARTMENT

JAN 15 2016

RANDALL E. GRAPNER
COUNTY AUDITOR
MERCER COUNTY, OHIO

Exemption paragraph, conveyance for EN
The Grantor and Grantee of this deed have
complied with the provisions of R.C. Sec 219,
292 Randall E. Grapner Mercer County Auditor.

KP 1-15-16
Deputy Aud. Date

AFFIDAVIT OF SURVIVORSHIP

State of Ohio

County of Mercer ss:

Mary A. Rosenbeck, a widow and unremarried woman, being first duly sworn, says that her spouse, Wilfred F. Rosenbeck, died a resident of Butler Township, Mercer County, Ohio, on December 9, 2016, as shown by the attached certified copy of his death certificate.

The affiant states that the survivorship deed dated December 28, 2005 and recorded in Instrument 200500008019, Volume 208, Page 57 of the Official Records of Mercer County, Ohio conveyed to the said Wilfred F. Rosenbeck and Mary A. Rosenbeck as joint tenants with rights of survivorship, the real estate described as follows:

Being a parcel of land situated in Butler Township, Mercer County, Ohio, in the southeast quarter of Section 27, Township 6 South, Range 2 East. Being more particularly described as follows:

Commencing for reference at the cornerstone at the southeast corner of said Section 27;

Thence, North 89°57'58" West, along the south line of the southeast quarter of said Section 27 and the centerline of State Route 219, a distance of 424.42 feet to a Mag nail;

Thence, North 02°20'18" West, a distance of 232.72 feet to a 5/8 inch iron bar. Said point being the place of beginning for the parcel of land to be conveyed by this instrument;

Thence, continuing, North 02°20'18" West, a distance of 41.54 feet to a 5/8 inch iron bar;

Thence, North 26°52'18" East, a distance of 88.58 feet to a 5/8 inch iron bar;

Thence, North 00°35'44" East, a distance of 177.42 feet to a 5/8 inch iron bar;

Thence, North 89°57'58" West, a distance of 249.03 feet to a point in the approximate centerline of Coldwater Creek;

Thence, Northerly, along the approximate centerline of Coldwater Creek, the following courses and distances:

North 13°10'44" West, a distance of 96.30 feet to a point;
North 34°33'50" East, a distance of 59.25 feet to a point;
North 13°50'04" East, a distance of 102.06 feet to a point;
North 26°19'52" East, a distance of 37.27 feet to a point;
North 12°53'33" East, a distance of 602.28 feet to a point;
North 00°45'05" West, a distance of 58.32 feet to a point;
North 31°03'30" East, a distance of 113.37 feet to a point;
North 04°34'05" East, a distance of 77.04 feet to a point;

Thence, leaving said centerline, North 89°55'37" East, a distance of 409.19 feet to a point;

Thence, South 00°36'29" West, along the east line of the southeast quarter of said Section 27, and the centerline of Fleetfoot Road, a distance of 349.68 feet to the point;

Thence, North 89°29'30" West, a distance of 202.31 feet to a 3/4 inch iron bar;

Thence, South 00°34'42" West, a distance of 231.83 feet to a 3/4 inch iron bar;

Thence, South 00°36'34" West, a distance of 116.09 feet to a 5/8 inch iron bar;

Thence, South 00°38'30" West, a distance of 231.97 feet to a 3/4 inch iron bar;

Thence, South 00°36'33" West, a distance of 50.02 feet to a 3/4 inch iron bar;

Thence, South 00°41'23" West a distance of 231.69 feet to a 3/4 inch iron bar;

Thence, South 00°21'08" West, a distance of 183.71 feet to a 5/8 inch iron bar;

Thence, North 89°57'58" West, a distance of 234.54 feet to the place of beginning.

Containing 13.039 acres of land more or less.

Subject to all easements and right-of-way of record.

Reference is made to a survey of this area by James W. Geeslin, Professional Surveyor 7764, date December 5, 2005. On file in the County Engineer's Office.

Last Transfer: Instrument No. 200500008019, Book 208, Page 57 of the Official Records of the Mercer County Recorder's Office.

Tax ID# 03-022900.0000; Map# 08-27-477-002

ALSO:

Being a parcel of land situated in Butler Township, Mercer County, Ohio, in the southeast quarter of Section 27, Township 6 South, Range 2 East. Being more particularly described as follows:

Commencing for reference at the cornerstone at the southeast corner of said Section 27;

Thence, North 89°57'58" West, along the south line of the southeast quarter of said Section 27 and the centerline of State Route 219, a distance of 124.34 feet to a Mag nail. Said point being the place of beginning for the parcel of land to be conveyed by this instrument.

Thence, continuing, North 89°57'58" West, along the last described line, a distance of 300.08 feet to a Mag nail;

Thence, North 02°20'18" West, a distance of 232.72 feet to a 5/8 inch iron bar;

Thence, South, 89°57'58" East, a distance of 234.54 feet to a 5/8 inch iron bar;

Thence, South 00°21'08" West, a distance of 48.68 feet to a 5/8 inch iron bar;

Thence, South 89°17'37" East, a distance of 75.36 feet to a ¾ inch iron bar;

Thence, South 00°00'20" West, a distance of 182.95 feet to the place of beginning.

Containing 1.542 acres of land more or less.

Subject to all easements and right-of-way of record.

Reference is made to a survey of this area by James W. Geeslin, Professional Surveyor 7764, dated December 5, 2005. On File in the County Engineer's Office.

Last Transfer: Instrument No. 200500008019, Book 208, Page 57 of the Official Records of the Mercer County Recorder's Office.

03-022300.0000
Tax ID# 03-~~02900.0200~~; Map# 08-27-477-009

ALSO:

Situated in the Township of Butler, in the County of Mercer, and State of Ohio, to-wit:

Being Lot Number Nine (9) in Rosenbeck's Subdivision as shown on the Recorded Plat thereof in Plat Book 10, Page 14, of the Plat Records of Mercer County, Ohio, subject to the restrictions recorded in Volume 4, Page 450, of the Miscellaneous Records in the Recorder's Office of Mercer County, Ohio.

Last Transfer Instrument No. 200500008019, Book 208, Page 57 of the Official Records of the Mercer County Recorder's Office.

Tax ID# 03-022300.0000; Map# 08-27-476-003

This Affidavit is made for the purpose of showing Mary A. Rosenbeck to be the surviving owner, vested with the entire fee simple title to the above described real estate, and for the purpose of obtaining a transfer by the auditor of Mercer County on the Mercer County real estate tax duplicate as provided by Section 319.20, of the Ohio Revised Code.

The address of Mary A. Rosenbeck, the owner, for tax billing purposes is 4975 State Route 219E, Coldwater, OH 45828.

Mary A. Rosenbeck
Mary A. Rosenbeck
Affiant

Sworn to before me by the above Mary A. Rosenbeck and subscribed in my presence this 14th day of January, 2016.

Emily Gast-Schlater
Notary Public
Attorney-at-law
No Expiration

SEAL

This instrument prepared by: Emily Gast-Schlater, Howell, Gast-Schlater & Co., L.P.A., Attorneys at Law, 397 N. Eastern Ave., P.O. Box 317, St. Henry, Ohio 45883-0317, 419-678-7111.

Reg. Dist. No. 54
Primary Reg. Dist. No: 5400
Registrar's No. 2015000271

Ohio Department of Health
VITAL STATISTICS
CERTIFICATE OF DEATH

State File No. 2015112263

1. Decedent's Legal Name (First, Middle, Last, Suffix) (Include AKA's if any) WILFRED FRANK ROSENBECK				2. Sex MALE		3. Date of Death (Mo/Day/Year) DECEMBER 09, 2015			
5a. Age (Years) 91		5b. Under 1 Year Months		5c. Under 1 day Hours Minutes		6. Date of Birth (Mo/Day/Year) SEPTEMBER 26, 1924		7. Birthplace (City and State or Foreign Country) COLDWATER, OHIO	
8a. Residence State OHIO				8b. County MERCER		8c. City or Town COLDWATER			
8d. Street and Number 4975 OHIO 219				8e. Apt. No.		8f. Zipcode 45828		8g. Inside City Limits? NO	
9. Ever in US Armed Forces? YES		10. Marital Status at Time of Death MARRIED				11. Surviving Spouse's Name (If wife, give name prior to first marriage) MARY KING			
12. Decedent's Education UNKNOWN				13. Decedent of Hispanic Origin NO		14. Decedent's Race WHITE			
15. Father's Name HENRY ROSENBECK				16. Mother's Name (prior to first marriage) FRANCES SEVERT					
17a. Informant's Name MARY ROSENBECK				17b. Relationship to Decedent WIFE		17c. Mailing Address (Street and Number, City, State, Zip Code) 4975 OHIO 219			
18a. Place of Death HOSPITAL - INPATIENT				18c. City or Town, State and Zip Code COLDWATER, OH 45828					
18b. Facility Name (If not Institution, give street & number) MERCER CO JOINT TOWNSHIP COMM				18d. County of Death MERCER					
19. Signature of Funeral Service Licensee or Other Agent <i>[Signature]</i>				20. License Number (of licensee) 007618		21. Name and Complete Address of Funeral Facility N J HOGENKAMP SONS INC			
22a. Method of Disposition BURIAL				22b. Date of Disposition (Mo/Day/Year) DECEMBER 12, 2015		22c. Place of Disposition (Name of Cemetery, Crematory, or other place) ST. ELIZABETH CEMETERY			
22d. Location (City/Town and State) COLDWATER, OH				22e. Date Filed (Mo/Day/Year) <i>[Signature]</i> December 10, 2015		25c. Date Disposition Permit Issued (Mo/Day/Year) DECEMBER 10, 2015			
23. Registrar's Signature <i>[Signature]</i>				24. Date Filed (Mo/Day/Year) December 10, 2015					
25a. Name of Person Issuing Disposition Permit HOGENKAMP, BRIAN JAMES				25b. District No. 5400					
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 or Medical Examiner 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 12:10		26c. Date Pronounced Dead (Mo/Day/Year) DECEMBER 9, 2015		26d. Was the Medical Examiner or Coroner Contacted? NO		26e. Signature and Title of Certifier <i>[Signature]</i>	
		26f. License number 34.010406		26g. Date Signed (Mo/Day/Year) 12/11/2015					
27. Name (First, Middle, Last) and Address of Person who Completed Cause of Death JONATHAN WINNER, 909 E. WAYNE ST SUITE 124, CELINA, OH 45822									
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.									
Immediate Cause (Final disease or condition resulting in death)		a. ACUTE MYOCARDIAL INFARCTION						Approximate Interval Between Onset and Death 1 DAY	
Sequentially list conditions, if any, leading to immediate cause.		b. Due to (or as Consequence of) LEFT FEMUR FRACTURE (REQUIRING SURGERY)						1 DAY	
Enter Underlying Cause (Disease or injury that initiated events resulting in a death)		c. Due to (or as Consequence of)							
		d. Due to (or as Consequence of)							
Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I. PARKINSON'S, CHRONIC HEART FAILURE, GLOBAL WEAKNESS									
30. Did Tobacco Use Contribute to Death? <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input checked="" 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"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		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 type="checkbox"/> Not Applicable	
33a. Date of Injury (Mo/Day/Year)		33b. Time of Injury		33c. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)		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)									
33f. Describe How Injury Occurred: 33g. If Transportation Injury, Specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other:									

HEA 2724 Rev. 07/15

I HEREBY CERTIFY THIS DOCUMENT IS AN EXACT COPY OF THE RECORD ON FILE WITH THE OHIO DEPARTMENT OF HEALTH.

DE 15 15 521223

[Signature]
KRISTI TIMMERMAN, LOCAL REGISTRAR
OFFICE OF VITAL STATISTICS
WITNESS MY SIGNATURE & SEAL