

DESCRIPTION
SUFFICIENT
FOR TAX MAPPING PURPOSES

NOV 25 2019

MERCER COUNTY
TAX MAP DEPARTMENT

TRANSFERRED

NOV 25 2019

RANDALL E. GRAPNER
COUNTY AUDITOR
MERCER COUNTY, OHIO

Exemption paragraph, conveyance fee EW
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 11-25-19
Deputy Aud. Date

AFFIDAVIT ON DEATH

STATE OF OHIO, COUNTY OF MERCER, ss:

I, Perfedia A. Dietrich, aka Parfidia M. Dietrich, being absolutely sworn, state
that:

1. I am the surviving spouse of Steven Lee Dietrich, aka Steve L. Dietrich,
who died May 13, 2019. A certified copy of the Certificate of Death of
Steven Lee Dietrich is attached hereto and incorporated herein by
reference.
2. Pursuant to a Joint and Survivorship Deed recorded in Mercer County
Recorder's Office Official Records Instrument #201800001949, Steve L.
Dietrich and Parfidia M. Dietrich owned real estate described as follows:

Situated in the Village of Rockford, County of Mercer and State of Ohio, to-wit:

Being Lot Numbered Four Hundred Eleven (411) in the Bellvue Addition to the
Village of Rockford, Mercer County, Ohio, Revised Numbering, subject to all
easements, conditions and restrictions imposed thereon.

Also, being the North one-half of the following previously vacated alley 16.5 feet
in width, located in the Village of Rockford, Ohio, bounded on the East by Main
Street, on the North by Lot 411 Bellvue Addition, and on the South by Lot 349,
Cale Frysinger Addition.

PARCEL NO. 08-045000.0000 TAX MAP NO. 02-16-355-016

The last transfer of record appears at Instrument #201800001949, Mercer
County Recorder's Official Records.

3. By reason of the death of Steven Lee Dietrich, aka Steve L. Dietrich, Perfedia A. Dietrich, aka Parfidia M. Dietrich, has become the sole owner of said real estate.
4. Further, the debts and expenses of Steven Lee Dietrich have been paid in full and no estate tax is due.
Further, affiant saith naught.

Perfedia A Dietrich
Perfedia A. Dietrich

Sworn to absolutely and subscribed in my presence by Perfedia A. Dietrich, at Celina, Ohio, this 25th day of November, 2019.

Thomas Luth
Notary Public



THOMAS LUTH, ATTORNEY AT LAW
Notary Public for State of Ohio
My Comm. has no Expiration
O.R.C. 147.03

This instrument prepared by:
Meikle, Tesno & Luth, Attys.
100 N. Main St., Celina, OH 45822
Phone (419) 586-6481,
without benefit of title search.

STATE OF FLORIDA

THIS DOCUMENT HAS A LIGHT BACKGROUND ON TRUE WATERMARKED PAPER. HOLD TO LIGHT TO VERIFY FLORIDA WATERMARK.

BUREAU of VITAL STATISTICS

CERTIFICATION OF DEATH

STATE FILE NUMBER: 2019078041

DATE ISSUED: MAY 16, 2019

DECEDENT INFORMATION

DATE FILED: MAY 16, 2019

NAME: STEVEN LEE DIETRICH

DATE OF DEATH: MAY 13, 2019

SEX: MALE

SSN: [REDACTED]

AGE: 062 YEARS

DATE OF BIRTH: FEBRUARY 12, 1957

BIRTHPLACE: ROCKFORD, OHIO, UNITED STATES

PLACE OF DEATH: HOSPICE

FACILITY NAME OR STREET ADDRESS: HOPE HOPSICE-2430 DIPLOMAT PKWY

LOCATION OF DEATH: CAPE CORAL, LEE COUNTY, 33909

RESIDENCE: 703 S. MAIN, ROCKFORD, OHIO 45882, UNITED STATES

COUNTY: MERCER

OCCUPATION, INDUSTRY: FARMER/ELECTRICIAN, AGRICULTURE/FACTORY

EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED EVER IN U.S. ARMED FORCES? NO

HISPANIC OR HAITIAN ORIGIN? NO, NOT OF HISPANIC/HAITIAN ORIGIN

RACE: WHITE

SURVIVING SPOUSE / PARENT NAME INFORMATION

(NAME PRIOR TO FIRST MARRIAGE, IF APPLICABLE)

MARITAL STATUS: MARRIED

SURVIVING SPOUSE NAME: PERFEDIA FELGER

FATHER'S/PARENT'S NAME: NORMAN DIETRICH

MOTHER'S/PARENT'S NAME: MARY DONER

INFORMANT, FUNERAL FACILITY AND PLACE OF DISPOSITION INFORMATION

INFORMANT'S NAME: PERFEDIA DIETRICH

RELATIONSHIP TO DECEDENT: WIFE

INFORMANT'S ADDRESS: 703 S. MAIN, ROCKFORD, OHIO 45882, UNITED STATES

FUNERAL DIRECTOR/LICENSE NUMBER: LINDA L FULLER, F019958

FUNERAL FACILITY: LEE COUNTY CREMATION SERVICES F065328

3615 CENTRAL AVENUE #6, FORT MYERS, FLORIDA 33901

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: COLONIAL CREMATORY

FORT MYERS, FLORIDA

CERTIFIER INFORMATION

TYPE OF CERTIFIER: CERTIFYING PHYSICIAN

MEDICAL EXAMINER CASE NUMBER: NOT APPLICABLE

TIME OF DEATH (24 HOUR): 1916

DATE CERTIFIED: MAY 16, 2019

CERTIFIER'S NAME: MALKAN G PATEL

CERTIFIER'S LICENSE NUMBER: OS10455

NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER): NOT APPLICABLE

CAUSE OF DEATH AND INJURY INFORMATION

MANNER OF DEATH: NATURAL

CAUSE OF DEATH - PART I - AND APPROXIMATE INTERVAL: ONSET TO DEATH

a. ASHD

UNK

b.

c.

d.

PART II - OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I:

AUTOPSY PERFORMED? NO

AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH?

DATE OF SURGERY:

DID TOBACCO USE CONTRIBUTE TO DEATH? NO

REASON FOR SURGERY:

PREGNANCY INFORMATION: NOT APPLICABLE

DATE OF INJURY: NOT APPLICABLE

TIME OF INJURY (24 HOUR):

INJURY AT WORK?

LOCATION OF INJURY:

DESCRIBE HOW INJURY OCCURRED:

PLACE OF INJURY:

IF TRANSPORTATION INJURY, STATUS OF DECEDENT:

TYPE OF VEHICLE:



, STATE REGISTRAR

REQ: 2020459078

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.

WARNING:

THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARKS. THE DOCUMENT FACE CONTAINS A MULTICOLORED BACKGROUND, GOLD EMBOSSED SEAL, AND THERMOCHROMIC FL. THE BACK CONTAINS SPECIAL LINES WITH TEXT. THIS DOCUMENT WILL NOT PRODUCE A COLOR COPY.



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DH FORM 1947 (03-13)

CERTIFICATION OF VITAL RECORD

