

DESCRIPTION
SUFFICIENT
FOR TAX MAPPING PURPOSES

JAN 25 2023

MERCER COUNTY
TAX MAP DEPARTMENT

TRANSFERRED

JAN 25 2023

RANDALL E. GRAPNER
COUNTY AUDITOR
MERCER COUNTY, OHIO

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

48 1/25/2023
Deputy Aud. Date

AFFIDAVIT
(O.R.C. 5302.17)

STATE OF OHIO, COUNTY OF MERCER, SS:

Nila L. Swander, being duly cautioned and sworn, deposes and says that:

1] She is the age of majority and is a resident of 808 S. Main Street, Rockford, Mercer County, Ohio.

2] She is the surviving spouse of **Carl L. Swander**, who passed away on October 25, 2022, a resident of Rockford, Mercer County, Ohio. A certified copy of the death certificate of **Carl L. Swander aka Carl Swander** is attached hereto.

3] There is a Survivorship Deed dated **May 23, 2018**, and recorded on **May 23, 2018, at 11:00 a.m.**, in **Instrument #201800002407**, Mercer County, Ohio, Recorder's Records, which conveyed to **Carl L. Swander** and **Nila L. Swander**, husband and wife, for their joint lives, remainder to the survivor of them, the following described real estate:

Situated in the **VILLAGE** of **ROCKFORD**, **COUNTY** of **MERCER**, and **STATE** of **OHIO**, to-wit:

Situated in the Village of Rockford, Mercer County, Ohio, and being part of the Conrail Railroad right-of-way lying South of Walnut Street (U.S. Highway #33) and East of Main Street (State Highway #118) and being more particularly described as follows:

Commencing at a railroad spike on the centerline of U.S. Highway #33 (Walnut Street), said railroad spike being at Station 323+14.19 O.D.O.T. R/W plans;

thence South 01° 28' 06" West 348.54 feet to a point;

thence South 01° 25' 01" West 9.60 feet to an iron pin;

thence South 00° 50' 05" West 99.00 feet to an iron pin;

thence South 00° 18' 54" East 115.51 feet to an iron pin;

thence South 01° 45' 27" East 153.94 feet to an iron pin;

thence South 03° 03' 50" East 90.15 feet to an iron pin, said iron pin being the TRUE POINT OF BEGINNING for the tract described herein;

thence South 04° 01' 51" East 90.25 feet to an iron pin;

thence North 89° 44' 40" West 30.10 feet to a point at the Southeast corner of the tract as described in Deed Book 260, Page 693;

thence in a Northerly direction curving to the right with a radius of 5374.75 feet to an arc distance of 90.26 feet, said arc having a chord North 04° 00' 25" West 90.26 feet along the East line of said tract to a point;

thence South 89° 44' 40" East 30.07 feet to the point of beginning **containing 0.061 acres**, more or less, and being subject to all easements of record.

This description was prepared from an actual survey completed in June, 1985, by Richard T. Mote, R.S. #5552.

ALSO: Being a part of Out-Lot Forty-one (41) to the Village of Rockford, Ohio, and beginning at a point located at the Southwest corner of Lot Three Hundred Fifty-nine (359) in Cale Frysinger's Second Addition to the Village of Rockford, Ohio, as the same appears upon the recorded plat thereof, and which point is designated by a wooden stake; thence West 31.55 feet to a point in the center of State Route #118; thence South at a right angle to the South line of Lot Three Hundred Fifty-nine (359) and in the center of said State Route #118, a distance of 210.5 feet to a point, which is the point of beginning for the tract of real estate herein conveyed; thence South and in the center of State Route #118, a distance of Ninety (90) feet to a point; thence East and at right angle to State Route #118 to the West right-of-way line of the New York Central Railroad; thence in a Northerly direction and following the West right-of-way line of the New York Central Railroad to a point that is directly East of the point of beginning and which is the Southeast point of the Ethel VanFleet real estate; thence West to the point of beginning in the center of State Route #118.

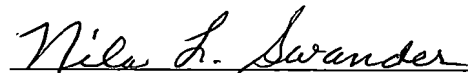
Subject to all legal highways, easements and restrictions of record.

Tax Parcel I.D. #08-062400.0000 / Tax Map #02-16-357-010

Prior Reference: Instrument #201800002407, Mercer County Recorder's Records.

4] There are no requirements for probating the Estate of **Carl L. Swander** or for filing an Ohio Estate Tax Return. All costs of the last sickness and funeral expenses have been paid by the surviving spouse, **Nila L. Swander**.

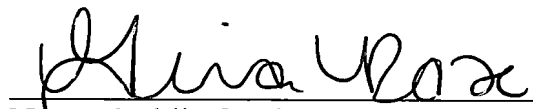
5] That by virtue of the death of **Carl L. Swander**, Affiant is the fee simple owner of the above-described real estate, and the Mercer County Auditor and the Mercer County Recorder are requested to record the transfer of the decedent's interest to the surviving tenant, **Nila L. Swander**.


Nila L. Swander

SWORN TO BEFORE ME and subscribed in my presence this 24th day of January, 2023.



GINA ROSE
Notary Public, State of Ohio
My Commission Expires
August 2, 2023
Recorded in Mercer County


Notary Public for the State of Ohio
My Commission expires:

This instrument prepared by:
Jeffrey P. Knapke, Knapke Law Office, LLC, 115 North Walnut Street, P. O. Box 504, Celina, Ohio

Ohio Department of Health
VITAL STATISTICS

Primary Reg. Dist. No. 5400

State File No. 2022112700

Registrar's No. 5400-2022000260

CERTIFICATE OF DEATH

DECEDENT	1. Decedent's Legal Name (First, Middle, Last, Suffix) (Include AKA's if any)						2. Sex	3. Date of Death (Mo/Day/Year)	
	CARL SWANDER						MALE	OCTOBER 25, 2022	
	4. Social Security Number	5a. Age (Years)	5b. Under 1 Year Months	5c. Under 1 day Days	5d. Under 1 day Hours	5e. Under 1 day Minutes	6. Date of Birth (Mo/Day/Year)	7. Birthplace (City and State or Foreign Country)	
		82					JUNE 01, 1940	CELINA, OHIO	
	8a. Residence State		8b. County		8c. City or Town				
	OHIO		MERCER		ROCKFORD				
	8d. Street Address and Zip Code						9. Ever in US Armed Forces?		
	908 S. MAIN ST 45882						NO		
	10. Marital Status at Time of Death				11. Surviving Spouse's Name (If wife, give name prior to first marriage)				
	MARRIED				NILA VINING				
DISPOSITION	12. Decedent's Education				13. Decedent of Hispanic Origin		14. Decedent's Race		
	MASTERS DEGREE (E.G., MA, MS..)				NO		WHITE		
	15. Father's Name				16. Mother's Name (prior to first marriage)				
	JOSEPH RAYMOND SWANDER				WILMA F SEARIGHT				
	17a. Informant's Name				17b. Relationship to Decedent		17c. Mailing Address (Street and Number, City, State, Zip Code)		
	NILA SWANDER				SPOUSE		908 S. MAIN ST		
	18a. Place of Death				ROCKFORD, OHIO 45882				
	NURSING HOME/LONG TERM CARE FACILITY								
	18b. Facility Name (If not Institution, give street & number)				18c. City or Town, State and Zip Code		18d. County of Death		
	SHANE HILL NURSING HOME				ROCKFORD, OH 45882		MERCER		
CERTIFIER	19. Funeral Service Licensee or Other Agent				20. License Number (of licensee)		21. Name and Complete Address of Funeral Facility		
	SEAN SAUER				009270		KETCHAM-RIPLEY FUNERAL HOME		
	22. Method and Place of Disposition				21. Name and Complete Address of Funeral Facility				
	BURIAL - RIVERSIDE CEMETERY - MERCER, ROCKFORD, OH				111 W FIRST ST ROCKFORD, OH 45882				
CAUSE OF DEATH	23. Local Registrar				24. Date Filed (Month/Day/Year)				
	KRISTI TIMMERMAN				OCTOBER 31, 2022				
	25a. 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				26c. Date Pronounced Dead (Month/Day/Year)		26d. Was Case Referred to Medical Examiner or Coroner?		
	21:00				OCTOBER 25, 2022		NO		
	26e. Certifier Name and Title				26f. License number		26g. Date Signed (Month/Day/Year)		
	RACHEL LYNN HUNTER DO				34.012467		OCTOBER 27, 2022		
	27. Name and Address of Person who Completed Cause of Death								
	RACHEL LYNN HUNTER, 1896 AMY'S RIDGE COURT, BEAVERCREEK, OH 45434								
	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 CARDIOPULMONARY ARREST					Approximate Interval: Onset and Death		
							IMMEDIATE		
Sequentially list conditions, if any, leading to immediate cause.		b. Due to (or as Consequence of)							
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.						29a. Was An Autopsy Performed?		29b. Were Autopsy Findings Available Prior To Completion Of Cause of Death?	
						NO		NOT APPLICABLE	
30. Did Tobacco Use Contribute to Death?				31. If Female, Pregnancy Status		32. Manner of Death			
NO				NOT APPLICABLE		NATURAL			
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?	
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:			

HEA 2724 Rev. 08/18

Kristi Timmerman
LOCAL REGISTRAR

NOV - 7 2022

Kristi Timmerman