APPROVED FOR TRANSFER
BY: _____ DATE: 1-22-13
PERRY COUNTY ENGINEER

Transfer Not Necessary
2-4 20 13
Teresa L. Stevenson
Perry Co. Auditor

Instrument 201300000496 OR Book 393 Page 972

201300000496
Filed for Record in
PERRY COUNTY, OHIO
JACKIE HOOVER, RECORDER
02-07-2013 At 08:37 am.
AFF TRNSFR 40.00
OR Book 393 Page 972 - 974

STATE OF OHIO :
: ss
COUNTY OF PERRY :

AFFIDAVIT OF TRANSFER

EVELYN M. FULTZ, aka EVELYN FULTZ, of 2475 Panther Drive, New Lexington, Ohio 43764, of full age, being first duly sworn and cautioned according to law, deposes and says that she has personal knowledge of all matters herein.

Affiant further states that she was married to RUFUS FULTZ, who resided at 2475 Panther Drive, New Lexington, Ohio 43764, at the time of his death on December 20, 2012 (Death Certificate attached).

Affiant further states that she and RUFUS FULTZ owned the following real estate as joint and survivorship tenants in O.R. Volume 13, Page 697:

Situated in the County of Perry in the State of Ohio and in the Township of Pike:

Being a part of the Southeast Quarter of Section 4, Township 15 North, Range 15 West, Pike Township, Perry County, Ohio, and being more particularly described as follows:

Beginning, for reference, at the southwest corner of the Southeast Quarter of Section 4; thence with the half section line North 0° 00' 00" West 2,178.36 feet to an iron pin set and the principal place of beginning of the tract to be conveyed; thence continuing with the half section line North 0° 00' 00" West 343.92 feet to an iron pin set; thence North 78° 10' 38" East 156.28 feet to an iron pin set; thence South 17° 05' 34" East 304.14 feet to an iron pin set; thence South 70° 37' 24" West 256.91 feet to the principal place of beginning. The tract as surveyed contains 1.5 acres, more or less, subject to all legal highways and easements of record.

The bearings in the above description are based on the half section line bearing North 0° 00' 00" West.

Iron pins set at 5/8 inch rebar, 30 inches long set flush with the ground with plastic identification caps. Ronald M. Merckle, Ohio Reg. Surveyor No. 6473, Dated March 21, 1986.

EXCEPTING AND RESERVING HEREIN THE OIL, GAS AND MINERAL RIGHTS IN, ON AND UNDER THE AFORESAID REAL ESTATE.

Parcel No. 24-000103-0100.

Further affiant sayeth naught.

Evelyn M. Fultz

Evelyn M. Fultz

SWORN to and subscribed in my presence this 24th day of January, 2013.

Linda L. Smith

NOTARIAL SEAL STATE OF OHIO

Linda L. Smith, Attorney at Law
Notary Public – State of Ohio
Lifetime Commission

THIS INSTRUMENT WAS PREPARED BY: SCHNITTKE & SMITH, ATTORNEYS AT LAW
114 SOUTH HIGH STREET, P.O. BOX 536, NEW LEXINGTON, OHIO 43764

THE ATTORNEY PREPARING THIS DOCUMENT MAKES NO WARRANTY AS TO DESCRIPTION OR TITLE OF PROPERTY DESCRIBED HEREIN.

FULTZRUFUS.AOT

REV. 6/2009

Reg. Dist. No. 64

Primary Reg. Dist. No. 6400

Registrar's No. 6400-2012000172

Ohio Department of Health
VITAL STATISTICS

CERTIFICATE OF DEATH

Type or print in permanent blue or black ink

Instrument 201300000496 OR Book 393 Page 974

State File No.

DECEDENT

1. Decedent's Legal Name(Include AKA's if any)(First Middle, LAST, suffix): RUFUS FULTZ

2. Sex: Male

3. Date of Death (Mo/Day/Year): December 20, 2012

[redacted] | 5a. Age (Years): 85 | 5b. Under 1 Year: Months / Days | 5c. Under 1 day: Hours / Minutes | 6. Date of Birth(Mo/Day/Year): November 20, 1927 | 7. Birthplace(City and State or Foreign Country): HARLAN, KENTUCKY

8a. Residence State: OHIO | 8b. County: PERRY | 8c. City or Town: NEW LEXINGTON

8d. Street and Number: 2475 Panther Drive | 8e. Apt. No. | 8f. Zipcode: 43764 | 8g. Inside City Limits?: No

9. Ever in US Armed Forces?: No | 10. Marital Status at Time of Death: Married | 11. Surviving Spouse's Name (If wife, give name prior to first marriage): EVELYN SWACKHAMMER

12. Decedent's Education: 8TH GRADE OR LESS | 13. Decedent of Hispanic Origin: No | 14. Decedent's Race: White

15. Father's Name: WILLIE FULTZ | 16. Mother's Name (prior to first marriage): ELIZABETH RILEY

17a. Informant's Name: EVELYN FULTZ | 17b. Relationship to Decedent: Wife | 17c. Mailing Address (Street and Number, City, State, Zip Code): 2475 Panther Drive NEW LEXINGTON, OHIO 43764

18a. Place of Death: Decedent's Home | 18b. Facility Name (If not Institution, give street & number): 2475 Panther Drive | 18c. City or Town, State and Zip Code: NEW LEXINGTON, OH 43764 | 18d. County of Death: PERRY

DISPOSITION

19. Signature of Funeral Service Licensee or Other Agent: Robert C Winegardner | 20. License Number (of licensee): 008230 | 21. Name and Complete Address of Funeral Facility: ROBERTS WINEGARDNER FUNERAL HOME 304 MILL ST NEW LEXINGTON, OH 43764

22a. Method of Disposition: Cremation | 22b. Date of Disposition: December 21, 2012

22c. Place of Disposition (Name of Cemetery, Crematory, or other place): SRS Services Crematory | 22d. Location (City/Town and State): HOPEWELL, OH

REGISTRAR

23. Registrar's Signature: Tina Marie Watkins | 24. Date Filed: December 28, 2012

25a. Name of Person Issuing Burial Permit: WATKINS, TINA MARIE | 25b. District No.: 6400 | 25c. Date Burial Permit Issued: December 21, 2012

CERTIFIER

26a. Certifier (Check only one)

[X] 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.

[ ] 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: 12:15 A | 26c. Date Pronounced Dead (Mo/Day/Year): 12-20-12 | 26d. Was case referred to coroner?: No

26e. Signature and Title of Certifier: DO | 26f. License number: 34.002872 | 26g. Date Signed: 12-21-12

27. Name (Last, First, Middle) and Address of Person who Completed Cause of Death: HAGGENJOS, JEFFREY JORDAN, 401 LINCOLN PARK DR NEW LEXINGTON, OH 43764

CAUSE OF DEATH

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.

		Approximate Interval Between Onset and Death
Immediate Cause (Final disease or condition resulting in death)	a. Cardiopulmonary Arrest	Minutes
Sequentially list conditions, if any, leading to immediate cause. Enter Underlying Cause (Disease or injury that initiated events resulting in death)	b. Due to (or as Consequence of): Pleural effusion	10 days
	c. Due to (or as Consequence of): CAD II	4 years
	d. Due to (or as Consequence of): COPD / Black Lung	4 years

Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.
DM, HBP, Hypercholestrum, Carotid Stenosis

29a. Was An Autopsy Performed? [ ] Yes [X] No

29b. Were Autopsy Findings Available Prior To Completion Of Cause of Death? [ ] Yes [ ] No [ ] Not Applicable

30. Did Tobacco Use Contribute to Death? [ ] Yes [X] No [ ] Unknown [ ] Probably

31. If Female, Pregnancy Status
[ ] Not pregnant within past year
[ ] Pregnant at time of death
[ ] Not pregnant, but pregnant within 42 days of death
[ ] Not pregnant, but pregnant 43 days to 1 year before death
[ ] Unknown if pregnant within the past year

32. Manner of Death
[X] Natural [ ] Accident [ ] Suicide [ ] Homicide [ ] Pending Investigation [ ] Could not be determined

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? [ ] Yes [ ] 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: [ ] Driver/Operator [ ] Pedestrian [ ] Passenger [ ] Other:

HEA 2724 Rev. 01/07

201300000496
SCHNITTKE & SMITH
PICK UP

I HEREBY CERTIFY THIS DOCUMENT IS A TRUE COPY OF THE RECORD ON FILE IN THE OHIO DEPARTMENT OF HEALTH

DE 28125348 20

Tina Marie Watkins
TINA MARIE WATKINS, REGISTRAR
OFFICE OF VITAL STATISTICS
WITNESS MY SIGNATURE & SEAL