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Date 1/05/2018 Time 11:46:46AM
Rec Amt $12.00 Aud Amt $5.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

Entered for taxation 9th day
of January AD 2018
Carla K. Bacher, Auditor
By D. Hilkegrand, Deputy

Elaine Fink
P.O. Box 213
Wesh IA 52233

0003-1611

Samuel M. DeGree

Prepared by and Return Document To: Samuel DeGree, 300 Main Street, Suite 323, Dubuque, IA 52001, (563) 582-2000

Affidavit of Termination of Life Estate

RE: Lot 2 of Cozy Cove Subdivision, a subdivision of Lot 1 through Lot 7 of Willie's Second Subdivision, being part of the southeast quarter of the northeast quarter of Section 15, and part of the northeast quarter of the southeast quarter of Section 15, and part of the northwest quarter of the northwest quarter of Section 14, Township 88 North, Range 5 West, of the 5th Principal Meridian, Delaware County, Iowa

The undersigned David Fink, being acquainted with the above real estate, has personal knowledge that the Life Estate in the above-described real estate created in an instrument dated April 7, 2003 and filed on April 7, 2003 in the office of the Recorder of Delaware County, Iowa, was terminated by the death of Vera Evelyn Fink-Buehler aka Vera E. Buehler. A copy of the decedent's Death Certificate is attached hereto. Further the Affiant sayeth not.

David J. Fink

STATE OF IOWA)
COUNTY OF Delaware) ss:

On this 5th day of January, 2018, before me, the undersigned, a Notary Public in and for the State of Iowa, personally appeared David J. Fink, to me known to be the person named in and who executed the foregoing instrument, and acknowledged that she executed the same as her voluntary act and deed.

Notary Public in and for State of Iowa

NOTARIAL SEAL
ANDREA WILLEY
Commission Number 806852
My Commission Expires
October 6, 2020

STATE OF IOWA
IOWA DEPARTMENT OF PUBLIC HEALTH
CERTIFICATE OF DEATH

114-2016-023465

BIRTH NUMBER: *Not Available*

DECEDENT INFORMATION

NAME: *Vera Evelyn Fink-Buehler*
ALIAS: *Vera Evelyn Fink*
PLACE OF BIRTH: *Iowa*
ARMED FORCES: *No*

NAMES (PRIOR TO ANY MARRIAGE):

DECEDENT LAST: *Verdon*
FATHER'S NAME: *Joseph Verdon*
MOTHER'S NAME: *Florence Protzman*
RESIDENTIAL ADDRESS: *24587 198th Avenue Manchester, Iowa 52057*
INFORMANT NAME: *David J Fink*
INFORMANT RELATIONSHIP: *Son*
DATE/TIME OF DEATH: *10/27/2016 11:00 PM*
M.E. CONTACTED: *No*

DATE FILED: *11/03/2016*
SSN: [redacted]
SEX: *Female*
DATE OF BIRTH/AGE: *07/22/1931* *85 Years*

CITIZENSHIP: *United States*
MARITAL STATUS: *Widowed*

RESIDENCE COUNTY: *Delaware*
COUNTY OF DEATH: *Buchanan*
INFORMANT ADDRESS: *P. O. Box 213 Delhi, Iowa 52223*
PLACE OF DEATH: *Nursing Home/long Term Care Facility*
FACILITY/ADDRESS: *ABCM Rehabilitation Centers of Independence-West Campus Independence, Iowa 50644*

MEDICAL CAUSE OF DEATH INFORMATION

	INTERVAL	UNITS
IMMEDIATE CAUSE OF DEATH: *Pneumonia*	*1*	*Weeks*
DUE TO OR AS A CONSEQUENCE OF:		
DUE TO OR AS A CONSEQUENCE OF:		
UNDERLYING CAUSE, IF ANY:		

OTHER SIGNIFICANT CONDITIONS: *End Stage Renal Insufficiency, Coronary Artery Disease, Stage Iv Sacral Pressure Ulcer*

MANNER OF DEATH: *Natural*
AUTOPSY PERFORMED/FINDINGS: *No*

TOBACCO CONTRIBUTED TO DEATH: *No*

PREGNANCY, IF FEMALE: *Not Applicable*

DESCRIPTION OF INJURY: *None*

Not For Legal Purposes

CERTIFIER: *Timothy Gerst* *MD*
DATE CERTIFIED: *11/03/2016*
CERTIFIER ADDRESS: *709 West Main Street, PO Box 359 Manchester, Iowa 52057*

DISPOSITION

FUNERAL HOME: *Leonard-Muller Funeral Home-Manchester Manchester, Iowa 52057*
METHOD: *Burial*
FUNERAL DIRECTOR: *Deborah J Ommen*
PLACE: *Saint Marys Cemetery-Northern Manchester*
LOCATION: *Northern Manchester, Iowa*