

Section Twenty-Six (26), Township Seven (7) North, Range Four (4), East of the 6th P.M., in Saline County, Nebraska.

Dated: October 15th, 2018.



Kynda A. Bauer

County Judge

No.	Gen.	Num.	Paged	
#15		✓	✓	
dk Register of Deeds				

From & Return to:
Matt Hanson
PO Box 626
Wilber NE 68465
Fee: \$11.50 charge

2011. 00646
STATE OF NEBRASKA } ss
SALINE COUNTY
Entered in numerical index and filed on
record, the 1 day of April
20 11 at 2:28 o'clock P.M. and recorded
in Book 71 of Misc Page 359-360
Ginda Kastanek
County Clerk

Please record against the following:

- 1) The West Half (W½) of the Southwest Quarter (SW¼) of Section Twenty-One (21), Township Six (6) North, Range One (1), East of the 6th P.M., Saline County, Nebraska;
- 2) The Southwest Quarter (SW¼) of the Northeast Quarter (NE¼) and the Northwest Quarter (NW¼) of the Southeast Quarter (SE¼) of Section Thirty-Four (34), Township Seven (7) North, Range Four (4), East of the 6th P.M., Saline County, Nebraska; and
- 3) The Southwest Quarter (SW¼) of Section Thirty-Five (35), Township Seven (7) North, Range Four (4), East of the 6th P.M., Saline County, Nebraska.

Please file, charge and return to:

Matthew Hanson
P.O. Box 626
Wilber, NE 68465

STATE OF NEBRASKA

WHEN THIS COPY CARRIES THE RAISED SEAL OF THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, IT CERTIFIES THE BELOW TO BE A TRUE COPY OF THE ORIGINAL RECORD ON FILE WITH THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, VITAL RECORDS OFFICE, WHICH IS THE LEGAL DEPOSITORY FOR VITAL RECORDS.

DATE OF ISSUANCE

MAR 11 2011

LINCOLN, NEBRASKA

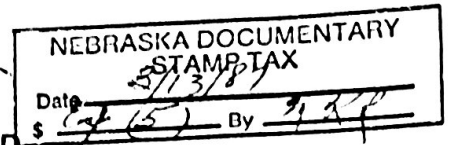
STANLEY S. COOPER
ASSISTANT STATE REGISTRAR
DEPARTMENT OF HEALTH AND
HUMAN SERVICES

STATE OF NEBRASKA - DEPARTMENT OF HEALTH AND HUMAN SERVICES

CERTIFICATE OF DEATH

Amended March 11, 2011

1. DECEDENT'S NAME (First, Middle, Last, Suffix) Evelyn M. Herman		2. SEX Female	3. DATE OF DEATH (Mo., Day, Yr.) January 30, 2011
4. CITY AND STATE OR TERRITORY, OR FOREIGN COUNTRY OF BIRTH Wilber, Nebraska		5a. AGE-Last Birthday (Yrs.) 97	5b. UNDER 1 YEAR MOS. DAYS HOURS MINS.
7. SOCIAL SECURITY NUMBER 045-20-0372 569-09-0994		8. DATE OF BIRTH (Mo., Day, Yr.) May 29, 1913	
8b. FACILITY-NAME (If not institution, give street and number) 2322 County Road M		8c. PLACE OF DEATH HOSPITAL: <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> DOA OTHER: <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Hospice Facility <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other (Specify)	
9a. RESIDENCE-STATE Nebraska		9b. COUNTY Saline	
9c. CITY OR TOWN OF DEATH (Include Zip Code) Wilber 68465		9d. COUNTY OF DEATH Saline	
9e. STREET AND NUMBER 2322 County Road M		9f. ZIP CODE 68465	
10a. MARITAL STATUS AT TIME OF DEATH <input checked="" type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Married, but separated <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Unknown		10b. NAME OF SPOUSE (First, Middle, Last, Suffix) If wife, give maiden name. Floyd D. Herman	
11. FATHER'S NAME (First, Middle, Last, Suffix) Edward - Rezabek		12. MOTHER'S NAME (First, Middle, Maiden Surname) Anna - Fisher	
13. EVER IN U.S. ARMED FORCES? Give dates of service if yes. (Yes, no, or unk.) No		14a. INFORMANT-NAME Floyd D. Herman	
15. METHOD OF DISPOSITION <input type="checkbox"/> Burial <input type="checkbox"/> Donation <input checked="" type="checkbox"/> Cremation <input type="checkbox"/> Entombment <input type="checkbox"/> Removal <input type="checkbox"/> Other (Specify)		16a. EMBALMER-SIGNATURE Not Embalmed	
16b. LICENSE NO.		16c. DATE (Mo., Day, Yr.) February 1, 2011	
16d. CEMETERY, CREMATORY OR OTHER LOCATION Lincoln Cremation Service		16e. CITY/TOWN Lincoln	
16f. STATE Nebraska		16g. INSIDE CITY LIMITS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
17a. FUNERAL HOME NAME AND MAILING ADDRESS (Street, City or Town, State) Kunc1 Funeral Home 131 West 12th St. Crete, Nebraska		17b. Zip Code 68333	
18. PART I. Enter the chain of events--diseases, injuries, or complications--that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary. IMMEDIATE CAUSE: (a) Probable Acute Myocardial Infarction DUE TO, OR AS A CONSEQUENCE OF: (b) DUE TO, OR AS A CONSEQUENCE OF: (c) DUE TO, OR AS A CONSEQUENCE OF: (d)			
18. PART II. OTHER SIGNIFICANT CONDITIONS-Conditions contributing to the death but not resulting in the underlying cause given in PART I. Congestive Heart Failure			
20. IF FEMALE: <input checked="" 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		21a. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined	
21b. IF TRANSPORTATION INJURY <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify)		21c. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
21d. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
22a. DATE OF INJURY (Mo., Day, Yr.)		22b. TIME OF INJURY m	
22c. PLACE OF INJURY-At home, farm, street, factory, office building, construction site, etc. (Specify)			
22d. INJURY AT WORK? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		22e. DESCRIBE HOW INJURY OCCURRED	
22f. LOCATION OF INJURY - STREET & NUMBER, APT. NO.		CITY/TOWN STATE ZIP CODE	
23a. DATE OF DEATH (Mo., Day, Yr.)		23b. DATE SIGNED (Mo., Day, Yr.)	
23c. TIME OF DEATH m		23d. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) ▼	
24a. DATE SIGNED (Mo., Day, Yr.) January 31, 2011		24b. TIME OF DEATH 6:30 p m	
24c. PRONOUNCED DEAD (Mo., Day, Yr.) January 30, 2011		24d. TIME PRONOUNCED DEAD 7:17 p m	
24e. 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) stated. (Signature and Title) ▼ Deputy County Attorney			
25. DID TOBACCO USE CONTRIBUTE TO THE DEATH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> PROBABLY <input type="checkbox"/> UNKNOWN		25a. HAS ORGAN OR TISSUE DONATION BEEN CONSIDERED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
25b. WAS CONSENT GRANTED? Not Applicable if 25a is no <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
27. NAME, TITLE AND ADDRESS OF CERTIFIER (PHYSICIAN, PHYSICIAN ASSISTANT, CORONER'S PHYSICIAN OR COUNTY ATTORNEY) (Type or Print) Steven J. Reisdorff, Deputy Saline Co. Attorney, P.O. Box 713, Wilber, NE 68465			
28a. REGISTRAR'S SIGNATURE Stanley S. Cooper		28b. DATE FILED BY REGISTRAR (Mo., Day, Yr.) FEB 3 2011	



JOINT TENANCY WARRANTY DEED

Floyd D. Herman and Evelyn M. Herman, husband and wife GRANTOR, in consideration of One Dollar (\$1.00) and love and affection----- DOLLARS received from GRANTEES,

Floyd D. Herman and Evelyn M. Herman, husband and wife

conveys to GRANTEES, as joint tenants and not as tenants in common, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

The Northwest Quarter (NW $\frac{1}{4}$) of the Southeast Quarter (SE $\frac{1}{4}$) and the Southwest Quarter (SW $\frac{1}{4}$) of the Northeast Quarter (NE $\frac{1}{4}$), all in Section Thirty-four (34), in Township Seven (7) North, Range Four (4), East of the 6th P.M. in Saline County, Nebraska, except a tract of land consisting of approximately One (1) acre, more or less heretofore conveyed to the State of Nebraska for highway purposes by warranty deed recorded in Book 82 at Page 137 of the Deed Records of Saline County, Nebraska, subject to easements of record

GRANTOR covenants (jointly and severally, if more than one) with GRANTEES that GRANTOR:

(1) is lawfully seised of such real estate and that it is free from encumbrances except lawful and valid restrictions of record and except for lawful and valid easements whether of record or not

(2) has legal power and lawful authority to convey the same;

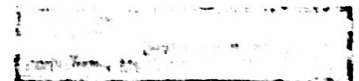
(3) warrants and will defend title to the real estate against the lawful claims of all persons.

Executed..... March 10..... 19 87.

Floyd D. Herman
Floyd D. Herman

Evelyn M. Herman
Evelyn M. Herman

STATE OF NEBRASKA)
COUNTY OF SALINE) SS.



The foregoing instrument was acknowledged before me on March 10 19 87 by Floyd D. Herman and Evelyn M. Herman, husband and wife

Shirley A. Pecka
Notary Public
My commission expires November 9, 1987



STATE OF NEBRASKA, County of Saline

83 Filed for record and entered in Numerical Index on March 13th 19 87 at 4:55 o'clock P. M., and

recorded in Deed Record 231 Page 658
From, Chg. and Return to:
Steinacher, Vosoba and Hanson
P. O. Box 626
Wilber, NE. 68465
Fee: \$5.50 Chg.

Marna R. Lips
County or Deputy County Clerk
Register or Deputy Register of Deeds
658

DEED RECORD No. 82

137

No. 22 81468

Huffman No. 100 and 103 Deed—Containing 286 Printed Words

FROM
ED A. KOVARIK & WF.
TO
THE STATE OF NEBRASKA

STATE OF NEBRASKA
County of SALINE
the 1st day of July
and recorded in Book 82 page 137
LESLIE S. DOANE

Entered in Numerical Index and filed for record in
the Register of Deeds office of said County
19 37 at 9 o'clock and 30 minutes A. M.
of Deeds.
Register of Deeds,
Deputy.

KNOW ALL MEN BY THESE PRESENTS: That we, Ed A. Kovarik and Hattie Kovarik, husband and wife,

of the County of Saline and State of Nebraska for and in consideration of the sum
of One Hundred Fifty Two and 85/100 (\$152.85) DOLLARS,
in hand paid do hereby grant, bargain, sell, convey and confirm unto The State of Nebraska

of the County of and State of the following described real estate situated
in

in Saline County, and State of Nebraska, to-wit: A strip of land lying over and
across the westerly part of the Northwest Quarter of the Southeast Quarter of Section 34, Town-
ship 7 North, Range 4 East of the 6th P. M. Saline County, Nebraska, described as follows:
Beginning at the northwest corner of the Northwest Quarter of the Southeast Quarter of said
Section 34; thence southerly on the West line of said Northwest Quarter of the Southeast Quarter
a distance of 1320.1 feet to the southwest corner of said Northwest Quarter of the Southeast Quarter
ter; thence easterly on the South line of said Northwest Quarter of the Southeast Quarter a dis-
tance of 49.7 feet; thence northerly a distance of 1320.1 feet to a point on the North line of said
Northwest Quarter of the Southeast Quarter, said point being 49.8 feet easterly from said north-
west corner; thence westerly on said North line a distance of 49.8 feet to the point of beginning,
containing 1.508 acres, more or less, which includes 1.000 acre more or less, previously occupied
as a public highway, the remaining 0.508 acre, more or less, being the additional acreage secured
in this transaction.

Also, a strip of land lying over and across the westerly part of the Southwest Quarter
of the Northeast Quarter of Section 34, Township 7 North, Range 4 East of the 6th P. M. Saline
County, Nebraska, described as follows:

Beginning at the southwest corner of the Southwest Quarter of the Northeast Quarter of
said Section 34; thence northerly on the West line of said Southwest Quarter of the Northeast Quar-
ter a distance of 1320.2 feet to the northwest corner of said Southwest Quarter of the Northeast
Quarter; thence easterly on the North line of said Southwest Quarter of the Northeast Quarter a
distance of 49.9 feet; thence southerly a distance of 1320.2 feet to a point on the South line of
said Southwest Quarter of the Northeast Quarter, said point being 49.8 feet easterly from said
southwest corner; thence westerly on said South line a distance of 49.8 feet to the point of be-
ginning, containing 1.511 acres, more or less, which includes 1.000 acre more or less, previously
occupied as a public highway, the remaining 0.511 acre, more or less, being the additional acreage
secured in this transaction.

TO HAVE AND TO HOLD the premises above described, together with all the Tenements, Hereditaments and Appurtenances
thereunto belonging unto the said The State of Nebraska successors

And we do hereby covenant with the said Grantee and with its suc- cessors its / -heirs and assigns forever.
lawfully seized of said premises; that they are free from encumbrance_ heirs and assigns, that we are

that we have good right and lawful authority to sell the same; and we do hereby covenant to warrant and defend the
title to said premises against the lawful claims of all persons whomsoever.

And the said Hattie Kovarik hereby relinquishes all
her rights of every name and kind

Signed this 6th day of April, A. D., 19 37 . in and to the above described premises.

J J Grimm

Ed A Kovarik

Hattie Kovarik

STATE OF Nebraska

Saline
County,
J. J.
Grimm
Notarial Seal
Saline County,
Nebraska
Commission
Expires
Dec. 18,
1942

ss. On this 6th day of April, A. D., 19 37, before me, the
undersigned J. J. Grimm a Notary Public, duly commissioned and qualified for
and residing in said County, personally came Ed A. Kovarik and Hattie Kovarik, husband
and wife,

to me known to be the identical person s whose name s are affixed to the foregoing instrument
as grantor s and acknowledged the same to be their voluntary act and deed.
WITNESS my hand and Notarial Seal the day and year last above written.

My commission expires the 18th day of December, 19 42 . Notary Public.