

RECORDING REQUESTED BY  
Silver State Title Company  
850536-DA

AND WHEN RECORDED MAIL TO

Name **Mary L. San Filippo**  
Street Address **172 Khartoum Drive**  
City & State **Pacheco, California 94553**

SPACE ABOVE THIS LINE FOR RECORDER'S USE

# Affidavit - Death of Joint Tenant

NEVADA  
STATE OF ~~CALIFORNIA~~ } ss.  
County of Douglas

MARY L. SAN FILIPPO ..... of legal age, being first duly sworn, deposes and says:  
That DOMINIC SAN FILIPPO ..... the decedent mentioned in the attached certified copy of  
Certificate of Death, is the same person as DOMINIC P. SAN FILIPPO  
named as one of the parties in that certain Grant Deed ..... dated November 27, 1975  
executed by RUSSELL HEAROLD, a single man  
to DOMINIC P. SAN FILIPPO and MARY L. SAN FILIPPO, his wife  
as joint tenants, recorded as Instrument No. 85879 ..... on December 3, 1975 ..... in  
book 1275 ..... 151 of Official Records of Douglas .....  
County, ~~California~~ NEVADA, covering the following described property situated in the (unincorporated  
area) ..... County of Douglas ..... State of ~~California~~ NEVADA:

Lot 5, Block E, as shown on the Map of Gardnerville Ranchos Unit No. 4,  
filed in the office of the County Recorder of Douglas County, Nevada, on  
April 10, 1967, Document No. 35914.  
Assessor's Parcel No. 27-503-05.

That the value of all real and personal property owned by said decedent at date of death,  
including the full value of the property above described, did not then exceed the sum of \$.....

Dated June 24, 1985

*Mary L. San Filippo*  
MARY L. SAN FILIPPO

SUBSCRIBED AND SWORN TO before me

this 16th day of July 1985  
Signature *Paula Ferguson*

Paula Ferguson



(This area for official notarial seal)

Title Order No. .... Escrow ~~XXXXXX~~ No. 850536-DA

**120583**

**CERTIFICATE OF DEATH**

3-85-28

STATE FILE NUMBER			STATE OF CALIFORNIA			LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER		
1A. NAME OF DECEDENT—FIRST			1B. MIDDLE	1C. LAST		2A. DATE OF DEATH (MONTH, DAY, YEAR)		2B. HOUR
DOMINIC			P.	SAN FILIPPO		February 22, 1985		1220
3. SEX	4. RACE/ETHNICITY		5. SPANISH/HEBANC NO	6. DATE OF BIRTH		7. AGE	IF UNDER 1 YEAR MONTHS	IF UNDER 24 HOURS DAYS
Male	White		X	November 1, 1913		71 YEARS		
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)			9. NAME AND BIRTHPLACE OF FATHER			10. BIRTH NAME AND BIRTHPLACE OF MOTHER		
IL			Dominic San Filippo - Italy			Rose Lupo - Italy		
11A. CITIZEN OF WHAT COUNTRY	11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE.		12. SOCIAL SECURITY NUMBER		13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)		
U.S.A.	19__ TO 19__		2256		Married	Mary L. Billecci		
15. PRIMARY OCCUPATION		16. NUMBER OF YEARS THIS OCCUPATION	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE)		18. KIND OF INDUSTRY OR BUSINESS			
Machinist		35	Hamm's Brewery		Beverages			
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)					19B.	19C. CITY OR TOWN		
1315 Muri Drive						Gardnerville		
19D. COUNTY			19E. STATE		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP			
Douglas County			NV		Mary L. San Filippo - Wife			
21A. PLACE OF DEATH			21B. COUNTY		1315 Muri Drive			
3641 Argyle Street			Napa		Gardnerville, NV 89410			
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)			21D. CITY OR TOWN					
3641 Argyle Street			Napa					
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)					24. WAS DEATH REPORTED TO CORONER?	25. WAS SHOUPY PERFORMED?		
IMMEDIATE CAUSE					24. YES	25. YES		
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST.					APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	26. WAS AUTOPSY PERFORMED?		
(A) Post-vascular Colon Cancer					2-4 yrs	NO		
(B)								
(C)								
23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A					27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OR OPERATION DATE			
					Colon resection 1982			
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.			28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		28C. DATE SIGNED	28D. PHYSICIAN'S LICENSE NUMBER		
I ATTENDED DECEDENT SINCE (ENTER MO, DA, YR.)			LAST SAW DECEDENT ALIVE (ENTER MO, DA, YR.)		2/27/85	C36936		
12/31/84			12/3/84		David J. Klein, M.D., 3425 Valle Verde Dr., Napa, CA			
29. SPECIFY ACCIDENT, SUICIDE, ETC.			30. PLACE OF INJURY		31. INJURY AT WORK	32A. DATE OF INJURY—MONTH, DAY, YEAR		32B. HOUR
33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)					34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)			
35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HELD AN (INQUEST-INVIGATION)					35B. CORONER—SIGNATURE AND DEGREE OR TITLE		35C. DATE SIGNED	
36. DISPOSITION		37. DATE—MONTH, DAY, YEAR		38. NAME AND ADDRESS OF CEMETERY OR CREMATORY		39. EMBALMER'S LICENSE NUMBER AND SIGNATURE		
Burial		Feb. 25, 1985		Queen of Heaven Cemetery-Lafayette, CA		Not Embalmed		
40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)			40B. LICENSE NO.	41. LOCAL REGISTRAR—SIGNATURE		42. DATE ACCEPTED BY LOCAL REGISTRAR		
Connolly & Taylor Chapel			F 154	<i>[Signature]</i>		FEB 25 1985		
STATE REGISTRAR	A.	B.	C.	D.	E.	F.		

February 28, 1985

**SEAL**

This is a true copy of the certificate on file in my office

*[Signature]*  
REGISTRAR

REQUESTED BY  
**SILVER STATE TITLE CO.**  
IN OFFICIAL RECORDS OF  
DOUGLAS COUNTY, NEVADA

'85 JUL 24 P3:05

SUZANNE BEAUDREAU  
RECORDER  
\$6.00 PAID *[Signature]* DEPUTY

**120583**  
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