

Jeffrey K. Rahbeck  
P.O. Box 3566  
State line, NV  
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AFFIDAVIT BY SURVIVING JOINT TENANT

STATE OF CALIFORNIA )  
 ) ss.  
COUNTY OF ORANGE )

EUGENE B. ZWICK, being first duly sworn, deposes  
and says:

That Affiant is the surviving spouse of JEAN  
ZWICK, aka PHYLLIS JEAN ZWICK, deceased, who are the grantees  
in joint tenancy with right of survivorship of the herein-  
after described parcel of real property. The real property  
is located within the County of Douglas, State of Nevada,  
and is more particularly described as follows, to wit:

The real property in the County  
of Douglas, State of Nevada,  
described as Lot 3, Block D,  
Logan Creek Estates.

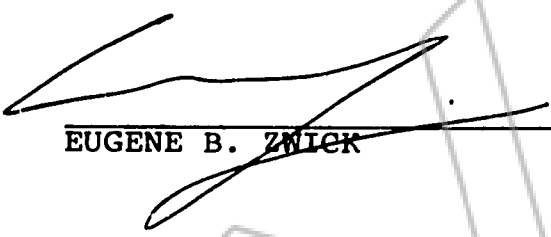
That the said JEAN ZWICK, aka PHYLLIS JEAN ZWICK,  
one of the joint tenant grantees respecting the above-  
described parcel of real property, died on the 20th day of  
May, 1982, and is the identical person named in that certain  
certified copy of Certificate of Death, attached hereto as  
Exhibit "A"; that said certified copy of Certificate of  
Death hereby referred to and by such reference is incorporated  
into this paragraph as though fully herein set out.

That all interest in and to the above-described

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/

1 real property vested absolutely in Affiant, namely, EUGENE B.  
2 ZWICK, as of the date of the decedent's death.

3 DATED: June 25, 1985.

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5   
6 EUGENE B. ZWICK

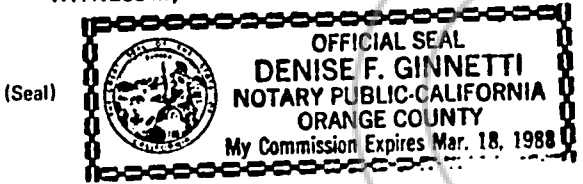
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8 SUBSCRIBED and SWORN TO before me  
9 this 25<sup>th</sup> day of June, 1985.

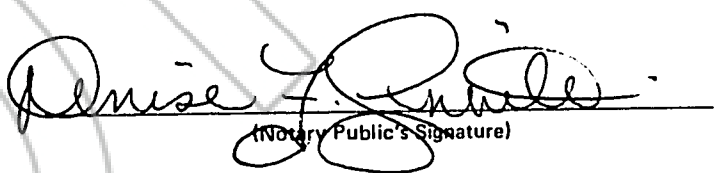
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STATE OF CALIFORNIA }  
COUNTY OF Orange } ss.

On June 25, 1985, before me, the undersigned, a Notary Public in and for said State, personally appeared  
\* \* \* \* \* Eugene B. Zwick \* \* \* \* \*  
personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is  
subscribed to the within Instrument and acknowledged that he executed the same.

WITNESS my hand and official seal.



  
(Notary Public's Signature)

023200 9-82\* 25 PS Individual Notarial Acknowledgment

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THIS IS A TRUE CERTIFIED COPY OF THE RECORD FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES IF IT BEARS THIS SEAL IN PURPLE INK.



JUN 4 - 1982

FEE \$3.00

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Director of Health Services and Registrar

CERTIFICATE OF DEATH  
STATE OF CALIFORNIA

0190-023394

STATE FILE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER							
1A. NAME OF DECEDENT—FIRST <b>Phyllis</b>		1B. MIDDLE <b>Jean</b>		1C. LAST <b>Zwick</b>		2A. DATE OF DEATH (MONTH, DAY, YEAR) <b>May 20, 1982</b>		2B. HOUR <b>1457</b>	
3. SEX <b>Female</b>		4. RACE <b>White</b>		5. ETHNICITY		6. DATE OF BIRTH <b>Apr. 5, 1927</b>		7. AGE <b>55</b> YEARS	
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY) <b>Ca.</b>		9. NAME AND BIRTHPLACE OF FATHER <b>Paul Tipton - Ca.</b>				10. BIRTH NAME AND BIRTHPLACE OF MOTHER <b>Valeta Smith - Ca.</b>			
11. CITIZEN OF WHAT COUNTRY <b>U. S. A.</b>		12. SOCIAL SECURITY NUMBER <b>██████████-3901</b>		13. MARITAL STATUS <b>Married</b>		14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME) <b>Eugene B. Zwick</b>			
15. PRIMARY OCCUPATION <b>Vice President &amp; General Manager</b>		16. NUMBER OF YEARS THIS OCCUPATION <b>10</b>		17. EMPLOYER (IF SELF-EMPLOYED, SO STATE) <b>Zwick Energy Research Organization, Inc.</b>		18. KIND OF INDUSTRY OR BUSINESS <b>Mfg. Oil Field Equipment</b>			
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) <b>16841 Edgewater Ln.</b>		19B.		19C. CITY OR TOWN <b>Huntington Beach</b>					
19D. COUNTY <b>Orange</b>		19E. STATE <b>Ca.</b>		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP <b>Eugene B. Zwick - Husband 16841 Edgewater Lane Huntington Beach, Ca. 92649</b>					
21A. PLACE OF DEATH <b>St. Vincents Med. Center</b>		21B. COUNTY <b>Los Angeles</b>							
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION) <b>2131 W. 3rd St.</b>		21D. CITY OR TOWN <b>Los Angeles</b>							
22. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)		(A) <b>Brain metastases</b>		4mo		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH		24. WAS DEATH REPORTED TO CORONER? <b>No</b>	
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST		(B) <b>Squamous Carcinoma of Esophagus</b>		17mo				25. WAS BIOPSY PERFORMED? <b>yes</b>	
		(C)						26. WAS AUTOPSY PERFORMED? <b>No</b>	
23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH		27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION <b>Temporal bone resection</b> 6/19/81							
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE <b>Robert J. McKenna</b>		28C. DATE SIGNED <b>May 1982</b>		28D. PHYSICIAN'S LICENSE NUMBER <b>G 4284</b>			
I ATTENDED DECEDENT SINCE (ENTER MO., DA., YR.) <b>6-8-81</b>		I LAST SAW DECEDENT ALIVE (ENTER MO., DA., YR.) <b>5-20-82</b>		28E. TYPE PHYSICIAN'S NAME AND ADDRESS <b>Robert J. McKenna, M.D., 201 S. Alvarado St., Suite A Los Angeles, Ca. 90057</b>					
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 <b>Burial</b>		37. DATE—MONTH, DAY, YEAR <b>May 23, 1989</b>		38. NAME AND ADDRESS OF CEMETERY OR CREMATORY <b>Westminster Memorial Park 14801 Beach Blvd., Westminster, Ca.</b>		39. BURIALMAN'S LICENSE NUMBER AND SIGNATURE <b>Jack O. ... 25812</b>			
40. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) <b>Westminster Mem. Pk. Mort.</b>		41. LOCAL REGISTRAR—SIGNATURE <b>[Signature]</b>		42. DATE OF REGISTRATION <b>MAY 22 1982</b>					
STATE REGISTRAR		A.		B.		C.		D.	
E.		F.							

VS-11 (10-78) 1732

124495

017-1-0762

COPY

REQUESTED BY  
*Jeffrey H. Rabuck*  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

'85 SEP 30 NO 50

SUZANNE BEAUDREAU  
RECORDER

*SP00* PAID *SP* DEPUTY

124495

BOOK 985 PAGE 3199