

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF NEVADA)
) :SS
CARSON CITY)

THOMAS R. SORENSEN, being first duly sworn, deposes and says:

1. Affiant is over the age of 18, and competent to be a witness as to the matters hereinafter stated.

2. On July 21, 1980, a deed was executed in favor of THOMAS R. SORENSEN and EARNEST T. SORENSEN, as joint tenants. Such deed was recorded on September 24, 1980, in Book 980, page 1885, Official Records of Douglas County, Nevada.

3. On October 21, 1971, one of the joint tenants died, being one of the joint tenants in the above deed, and was the identical person named as ERNEST T. SORENSEN, in that certain death certificate, a certified copy of which is attached hereto and made a part hereof.

4. Affiant was the father of the deceased.

5. The real estate that is the subject matter of the above deed is located in Douglas County, Nevada, and is more particularly described as follows:

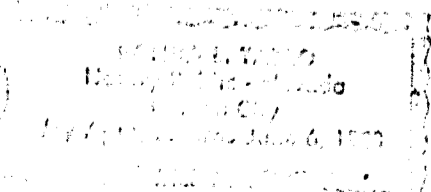
See EXHIBIT A attached hereto and made a part hereof by reference.

Dated this 14 day of January, 1986.

Thomas R. Sorensen
THOMAS R. SORENSEN

SUBSCRIBED AND SWORN to be me this 14 day of January, 1986.

[Signature]
Notary Public



THIS IS A TRUE AND CORRECT COPY OF THE DOCUMENT ON FILE IN THE SOLANO COUNTY DEPARTMENT OF PUBLIC HEALTH, VALLEJO, CALIFORNIA.

HEALTH OFFICER AND LOCAL REGISTRAR

DATE: SEP - 5 1972

SEAL

CERTIFICATE OF DEATH

4801

9720

1. NAME OF DECEASED—FIRST NAME, MIDDLE NAME, LAST NAME Ernest Sorensen		10. SOCIAL SECURITY NUMBER U.S.A.		11. DATE OF BIRTH October 21, 1917		12. HOUR 8:10 A.M.	
2. SEX Male		3. RACE White		4. BIRTHPLACE California		5. DATE OF BIRTH November 20, 1905	
6. NAME AND BIRTHPLACE OF FATHER Carl Sorensen - Denmark		7. NAME AND BIRTHPLACE OF MOTHER Marie Thomsen - Denmark		8. AGE 55		9. MARRIAGE STATUS Divorced	
13. LAST OCCUPATION Power Plant Oper		14. NAME OF LAST EMPLOYING COMPANY OR FIRM U.S. Government		15. KIND OF INDUSTRY OR BUSINESS Power Plant		16. NAME OF SURVIVING SPOUSE IF WIFE (ENTER MARRIAGE DATE) None	
17. PLACE OF DEATH—NAME OF HOSPITAL OR OTHER INSTITUTION FACILITY At Home		18. STREET ADDRESS—CITY AND NUMBER OR LOCATION 1345 West K. Street		19. NAME AND MAILING ADDRESS OF INFORMANT Thomas Sorensen		20. CITY OR TOWN Benicia	
21. USUAL RESIDENCE—STREET ADDRESS, CITY AND NUMBER OR LOCATION 1345 West K. Street		22. INSIDE CITY CORPORATE LIMITS Yes		23. NAME AND MAILING ADDRESS OF INFORMANT Thomas Sorensen		24. CITY OR TOWN Benicia	
25. CITY OR TOWN Benicia		26. COUNTY Solano		27. STATE California		28. ZIP CODE 94580	
29. PHYSICIAN—NAME, ADDRESS, CITY AND NUMBER OR LOCATION Dr. Donald Macdonald, M.D., 2600 Alameda Street, Vallejo		30. DATE SIGNED 10-21-71		31. NAME OF CEMETERY OR CREMATORY Burnt Eden Cemetery, Hayward		32. ADDRESS OF CEMETERY OR CREMATORY 2600 Alameda Street, Vallejo	
33. NAME OF FUNERAL DIRECTOR OR PERSON MAKING ARRANGEMENTS Paralacuna Funeral Chapel		34. DATE 10-26-71		35. NAME OF REGISTRAR David R. Gage, M.F.		36. LICENSE NUMBER A-13800	
37. PART I DEATH WAS CAUSED BY Cardiac failure		38. UNDERLYING CAUSE Arteriosclerotic heart disease		39. PERIOD OF ILLNESS 6 years		40. PERIOD OF AGING 3 mos.	
41. OTHER SIGNIFICANT CONDITIONS None		42. PLACE OF INQUIRY At Home		43. DATE OF INQUIRY 10-21-71		44. HOUR 10:00	
45. PLACE OF INQUIRY At Home		46. DATE OF INQUIRY 10-21-71		47. HOUR 10:00		48. SIGNATURE OF REGISTRAR David R. Gage, M.F.	

REQUESTED BY Northern Nevada Title Company

IN OFFICE OF RECORDS OF SOLANO COUNTY

JAN 30 A9:16

PAID \$6.00

130127 BOOK 186 PAGE 2459