

When Recorded Mail To:  
Helen A. Reisenweber  
2137-0 Ronda Granada  
Laguna Hills, CA 92653

Application No. 203772-IK

AFFIDAVIT BY SURVIVING JOINT TENANT

STATE OF NEVADA            )  
  )    ss.  
COUNTY OF DOUGLAS        )

HELEN A. REISENWEBER being first duly sworn, deposes and says:

THAT affiant is the surviving spouse of LEWIS WILLIAM REISENWEBER,

and that the affiant and the said, LEWIS WILLIAM REISENWEBER,

deceased, are the grantees in joint tenancy with the right of survivorship  
under a deed of conveyance affecting the following described real property,

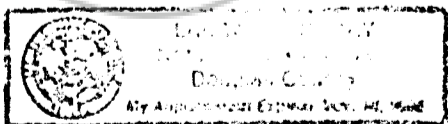
situate in the County of Douglas, State of Nevada:  
Lot 9, Block C, as shown on the Map of Round Hill Village Unit No. 3, filed in the  
office of the County Recorder of Douglas County, on November 24, 1965, in Book 36,  
Page 131, Document No. 30185.

A.P.N. 05-β31-04

THAT the said LEWIS WILLIAM REISENWEBER, one of the joint tenant  
grantees in said deed, died on the 21 day of September, 1983,

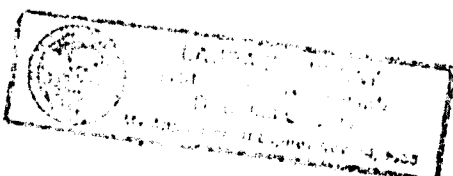
and is the identical person named in that certain certified copy of death  
certificate attached hereto as Exhibit "A"; that the said certified copy of  
death certificate is hereby referred to and, by such reference, is incorporated  
into this paragraph as though herein fully set forth.

THAT all interests in and to said real property vested absolutely in affiant,  
namely, HELEN A. REISENWEBER, as of the date of said decedent's  
death.



Helen A. Reisenweber  
HELEN A. REISENWEBER

SUBSCRIBED and SWORN to before me this 10<sup>th</sup> day of Oct., 1988.



**188913**

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[Signature]  
Notary Public  
My Commission expires: Nov. 14, 88

**CERTIFICATION STATEMENT**

This is to certify, that this is a true and correct copy of the vital statistics record which is on file in this office.

Curtiss E. Weidmer, **J.D.**

Ardis Wise Deputy Registrar  
 Registrar of Vital Statistics **OCT 11 1983**  
 El Dorado County, California Date

**CERTIFICATE OF DEATH**  
 STATE OF CALIFORNIA

STATE FILE NUMBER				LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER					
1A. NAME OF DECEDENT—FIRST <b>Lewis</b>		1B. MIDDLE <b>William</b>		1C. LAST <b>Reisenweber</b>		2A. DATE OF DEATH (MONTH, DAY, YEAR) <b>September 21, 1983</b>		2B. HOUR <b>2040</b>	
3. SEX <b>Male</b>	4. RACE/ETHNICITY <b>White</b>		5. SPANISH/HISPANIC <b>NO</b>	6. DATE OF BIRTH <b>February 7, 1912</b>		7. AGE <b>71</b> YEARS	IF UNDER 1 YEAR MONTHS	IF UNDER 24 HOURS HOURS	MINUTES
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY) <b>South Dakota</b>		9. NAME AND BIRTHPLACE OF FATHER <b>William F. Reisenweber - South Dakota</b>				10. BIRTH NAME AND BIRTHPLACE OF MOTHER <b>Rosina Muth - Germany</b>			
11. CITIZEN OF WHAT COUNTRY <b>U.S.A.</b>		12. SOCIAL SECURITY NUMBER <b>[REDACTED] 2068</b>		13. MARITAL STATUS <b>Married</b>		14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME) <b>Helen Werner</b>			
15. PRIMARY OCCUPATION <b>Field Supervisor</b>		16. NUMBER OF YEARS THIS OCCUPATION <b>40</b>	17. EMPLOYER (IF SELF EMPLOYED, SO STATE) <b>Cenex Corporation</b>			18. KIND OF INDUSTRY OR BUSINESS <b>Farm Supply</b>			
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) <b>306 Ute Way</b>				19B.		19C. CITY OR TOWN <b>Zephyr Cove</b>			
19D. COUNTY <b>Douglas</b>		19E. STATE <b>Nevada</b>		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP <b>Helen Reisenweber - Wife</b> <b>P.O. Box 11319</b> <b>Zephyr Cove, Nevada 89448</b>					
21A. PLACE OF DEATH <b>Barton Memorial Hospital</b>		21B. COUNTY <b>El Dorado</b>		21D. CITY OR TOWN <b>So. Lake Tahoe</b>					
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION) <b>4th and South Ave.</b>		22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C) IMMEDIATE CAUSE (A) <b>Acute myocardial infarction with ruptured left ventricle.</b> DUE TO, OR AS A CONSEQUENCE OF (B) DUE TO, OR AS A CONSEQUENCE OF (C)							
23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH		24. WAS DEATH REPORTED TO CORONER? <b>YES</b>							
25. WAS BIOPSY PERFORMED? <b>NO</b>		26. WAS AUTOPSY PERFORMED? <b>YES</b>							
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? DATE		28. DATE SIGNED							
28. PHYSICIAN'S LICENSE NUMBER		28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE							
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		28C. DATE SIGNED		28D. PHYSICIAN'S LICENSE NUMBER					
I ATTENDED DECEDENT SINCE (ENTER MO. DA. YR.)		I LAST SAW DECEDENT ALIVE (ENTER MO. DA. YR.)		28E. TYPE PHYSICIAN'S NAME AND ADDRESS					
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 INVESTIGATION) Investigation		35B. CORONER—SIGNATURE AND DEGREE OR TITLE <i>Daniel E. Patton</i> <b>Captain</b>		35C. DATE SIGNED <b>9-23-83</b>					
36. DISPOSITION <b>Cremation</b>		37. DATE—MONTH, DAY, YEAR <b>9-26-83</b>		38. NAME AND ADDRESS OF CEMETERY OR CREMATORY <b>Masonic Memorial Gardens, Reno, Nevada</b>		39. EMBALMER'S LICENSE NUMBER AND SIGNATURE <b>6907-Michael T. McFarlane</b>			
40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) <b>McFarlane Mortuary</b>		40B. LICENSE NO. <b>1180</b>		41. LOCAL REGISTRAR—SIGNATURE <i>Curtiss E. Weidmer</i>		42. DATE ACCEPTED BY LOCAL REGISTRAR <b>9-23-83</b>			
STATE REGISTRAR		A.		B.		C.		D. <b>BOOK 1088</b>	
E. <b>PAGE 2503</b>		F. <b>188913</b>							

COPY

REQUEST BY  
**FIRST NEVADA TITLE COMPANY**  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

'88 OCT 20 AM 11:17

SUZANNE BEAUDREAU  
RECORDER **188913**  
\$7.00 PAID *[Signature]* DEPUTY  
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