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AFFIDAVIT-DEATH OF TRUSTOR AND BENEFICIARY

STATE OF CALIFORNIA)
) ss.
COUNTY OF EL DORADO)

HELEN HOWE EDGIN, surviving Settlor and successor Trustee, being first duly sworn, deposes and says that affiant is of legal age and is competent to be a witness as to the matters hereinafter stated.

That affiant is HELEN HOWE EDGIN, the person named as one of the grantees in that certain deed recorded February 15, 1990, as Document No. 220200, in the office of the County Recorder of Douglas County, State of Nevada, which real property is described as follows:

Lot 18, Block A, as shown on the Map of Round Hill Village Unit No. 2, filed in the office of the Recorder of Douglas County, State of Nevada, on August 31, 1965, in Book 1 of Maps, Document No. 29312.

**Assessor's Parcel Number 05-322-07
Said property is commonly known as 284 Cheyenne Way.**

That ALLIE IRICK EDGIN was named as one of the parties in that certain Trust Transfer Deed dated January 2, 1990, executed by ALLIE I. EDGIN and HELEN H. EDGIN, wherein the decedent is a Settlor of the REVOCABLE TRUST OF ALLIE IRICK EDGIN AND HELEN HOWE EDGIN dated November 17, 1989, as well as the beneficiary and Co-Trustee under said Trust; it being further acknowledged that HELEN HOWE EDGIN is the surviving Settlor and beneficiary and the successor Trustee under said declaration of Trust on the death of ALLIE IRICK EDGIN; and that ALLIE IRICK EDGIN and was the identical person named as ALLIE IRICK EDGIN, the decedent in that certain Death Certificate, a certified copy of which is annexed hereto and made a part hereof.

Dated: 5-20-94

Helen Howe Edgin
HELEN HOWE EDGIN

SUBSCRIBED AND SWORN to before me

this 20th day of May 1994

Signature JoAnn Tillson

JoAnn Tillson
Name (Typed or Printed)



WHEN RECORDED MAIL TO:

Joseph W. Tillson, Esq.
2311 Lake Tahoe Boulevard, Ste 1
South Lake Tahoe, CA 96151

FOR RECORDER'S USE

MAIL TAX STATEMENTS TO:

Helen Howe Edgin, Trustee
2281 Lake Tahoe Blvd., Ste 2
South Lake Tahoe, CA 96150

RECORDING REQUESTED BY:
Joseph W. Tillson, Esq.

339729
BK 0694 PG 2643

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. Weidner, M.D.

Curtis Weidner
 Registrar of Vital Statistics
 El Dorado County, California

Deputy Registrar
SEP 08 1993
 Date

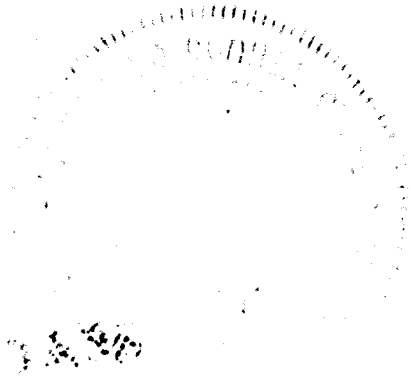
SEAD

CERTIFICATE OF DEATH
 STATE OF CALIFORNIA
 USE BLACK INK ONLY

03 - 93 09 000459

STATE FILE NUMBER			LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER		
1A. NAME OF DECEDENT—FIRST (GIVEN) ALLIE		1B. MIDDLE IRICK	1C. LAST (FAMILY) EDGIN		2A. DATE OF DEATH—MO. DAY, YR. 08/26/1993
4. RACE White		5. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	6. DATE OF BIRTH—MO. DAY, YR. 02/19/1914	7. AGE IN YEARS 79	2B. HOUR 2000
8. STATE OF BIRTH AR	9. CITIZEN OF WHAT COUNTRY U.S.A.	10A. FULL NAME OF FATHER James Edgin		10B. STATE OF BIRTH AR	11A. FULL MAIDEN NAME OF MOTHER Virginia Russell
12. MILITARY SERVICE 19__ TO 19__ <input checked="" type="checkbox"/> NONE		13. SOCIAL SECURITY NO. 0745	14. MARITAL STATUS Married		15. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME) Helen Howe
16A. USUAL OCCUPATION Owner		16B. USUAL KIND OF BUSINESS OR INDUSTRY Auto Sales & Car Wash	16C. USUAL EMPLOYER Self-Employed	16D. YEARS IN OCCUPATION 30	17. EDUCATION—YEARS COMPLETED 12
18A. RESIDENCE—STREET AND NUMBER OR LOCATION 2201 Morro Dr.			18B. CITY So. Lake Tahoe	18C. ZIP CODE 96158	
18D. COUNTY El Dorado		18E. NUMBER OF YEARS IN THIS COUNTY 33	18F. STATE OR FOREIGN COUNTRY California		20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT Helen Edgin - Wife P.O. Box 7365 So. Lake Tahoe, CA 96158
19A. PLACE OF DEATH Barton Memorial Hospital		19B. IF HOSPITAL, SPECIFY ONE: IP, ER/OP, DOA IP	19C. COUNTY El Dorado		21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C) (A) MASSIVE LEFT CEREBRAL STROKE
19D. STREET ADDRESS—STREET AND NUMBER OR LOCATION 4th and South Ave.		19E. CITY So. Lake Tahoe		22. WAS DEATH REPORTED TO CORONER REFERRAL NUMBER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	23. WAS BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C) (B) ATHEROSCLEROTIC VASCULAR DISEASE - SEVERE		24. WAS AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		24B. WAS IT USED IN DETERMINING CAUSE OF DEATH <input type="checkbox"/> YES <input type="checkbox"/> NO	
25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21		26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25. IF YES, LIST TYPE OF OPERATION AND DATE.			
1 CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. 27A. DECEDENT ATTENDED SINCE MONTH, DAY, YEAR 08/14/1993		27B. SIGNATURE AND DEGREE OR TITLE OF CERTIFIER <i>Larry A. Pappas</i>		27C. CERTIFIER'S LICENSE NUMBER A37034	27D. DATE SIGNED 08/30/1993
DECEDENT LAST SEEN ALIVE MONTH, DAY, YEAR 08/26/1993		27E. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS Larry A. Pappas, MD, P.O. Box 5657, So. Lake Tahoe, CA 96157			
1 CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		28A. SIGNATURE AND TITLE OF CORONER OR DEPUTY CORONER <i>[Signature]</i>		28B. DATE SIGNED	
29. MANNER OF DEATH—Specify one: natural, accident, suicide, homicide, pending investigation or could not be determined		30A. PLACE OF INJURY		30B. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO	30C. DATE OF INJURY MONTH, DAY, YEAR
32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY)			33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)		
34A. DISPOSITION(S) CR/BU		34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS Happy Homestead Cemetery, So. Lake Tahoe, CA		34C. DATE MO. DAY, YR. 09/01/1993	35A. SIGNATURE OF EMBALMER Not Embalmed
36A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) McFarlane Mortuary		36B. LICENSE NO. FD-1180	37. SIGNATURE OF LOCAL REGISTRAR <i>Curtis E. Weidner</i>		38. REGISTRATION DATE 08/30/1993, M. Mc
STATE REGISTRAR	A.	B.	C.	D.	E.
					F.
CENSUS TRACT					

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4492690 BK 0694 PG 254



COPY

REQUESTED BY
Joseph W. Hillson
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'94 JUN 15 AIO:43

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SUZANNE BEAUDREAU
RECORDER
\$ 9.00 PAID *SK* DEPUTY