

1 Recording requested by and
when recorded return to:

2 Duane P. Sartori, Esq.
3 Baddeley, Olikier & Sartori
17 Keller Street
4 Petaluma, CA 94952

5
6 AFFIDAVIT OF DEATH OF JOINT TENANT

7 STATE OF CALIFORNIA)
8 COUNTY OF SONOMA) ss.

9 WANDA RUEGAMER, being the surviving spouse of RUSSELL
10 RUEGAMER, deceased, does solemnly declare and affirm under penalty
11 of perjury in accordance with the laws of the State of Nevada, as
12 follows:

13 1. That WANDA RUEGAMER is over the age of twenty-one
14 (21) years and legally competent to be a witness as to the matters
15 hereinafter stated.

16 2. That WANDA RUEGAMER is one of the Grantees of that
17 certain Quitclaim Deed recorded September 30, 1994, in Book 994,
18 Page 5441, File No. 347350 of the Official Records of Douglas
19 County, State of Nevada, and that the property is more particularly
20 described in Exhibit "A" attached hereto.

21 3. That RUSSELL RUEGAMER, deceased, was another Grantee
22 named in the deed as a joint tenant, and was the identical person
23 named as decedent in that certain Certificate of Death, a certified
24 copy of which is attached hereto.

25 4. That RUSSELL RUEGAMER, deceased, died in Santa Rosa,
26 Sonoma County, State of California, on the 13th day of February,
27 1997; that prior to his death, decedent, WANDA RUEGAMER and MARC
28

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17 Keller Street
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1 EDWARD RUEGAMER held title to the above-described property as joint
2 tenants, with right of survivorship; that decedent had not, prior
3 to the time of his death, conveyed or transferred his interest in
4 the aforesaid property, and that as a consequence of the death of
5 the decedent, WANDA RUEGAMER and MARC EDWARD RUEGAMER, as the
6 surviving joint tenants, are entitled to the property.

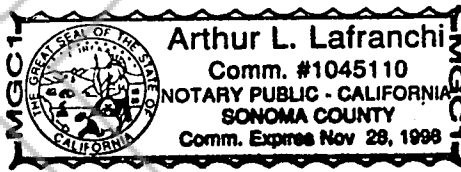
7 5. That prior to his death, the decedent, RUSSELL
8 RUEGAMER, was a resident and domiciliary of Santa Rosa, Sonoma
9 County, State of California, for a period in excess of one (1)
10 year, and that each of WANDA RUEGAMER and MARC EDWARD RUEGAMER is
11 now and for a period in excess of one (1) year prior to the date of
12 decedent's death, has been a resident and domiciliary of Santa
13 Rosa, Sonoma County, State of California.

14 6. Further, affiant sayeth not.

Wanda Ruegamer
WANDA RUEGAMER

15 Subscribed and sworn to before me,
16 the undersigned notary public on
17 MAY 8, 1997.

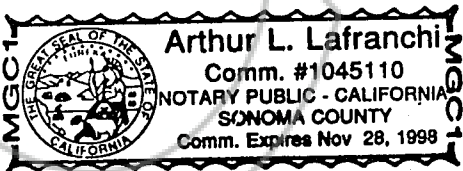
18 *[Signature]*
19 Notary Public



20 State of California)
21 County of Sonoma) ss.

22 On MAY 8, 1997, before me, the undersigned notary public,
23 personally appeared WANDA RUEGAMER, personally known to me or
24 proved to me on the basis of satisfactory evidence to be the person
25 whose name is subscribed to the within instrument and acknowledged
26 to me that she executed the same in her authorized capacity, and
27 that by her signature on the instrument the person, or the entity
28 upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.



[Signature]
Notary Public

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EXHIBIT "A"

All that certain lot, piece or parcel of land situate, lying and being in the County of Douglas, State of Nevada, commonly known as 442 Lakeview Drive, Zephyr Cove, Nevada, and more particularly described as follows:

The N½ of Lot 38 and the N½ of Lot 39, as the same are laid down, delineated and numbered upon a certain map entitled Amended Plat of Elks Subdivision of Lake Tahoe, Nevada, filed in the Office of the County Recorder of the County of Douglas, State of Nevada, on January 5, 1928, and as shown on the Second Amended Plat of the Elks Subdivision filed in the Office of the County Recorder of Douglas County, Nevada, on June 5, 1952, as Document No. 8537.

Assessor's Parcel No. 5-241-28.

CERTIFICATION OF VITAL RECORD

COUNTY OF SONOMA
SANTA ROSA, CALIFORNIA

CERTIFICATE OF DEATH

3-1997-49-000480

STATE FILE NUMBER		USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 1/96)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) RUSSELL		2. MIDDLE EDWARD		3. LAST (FAMILY) RUEGAMER			
4. DATE OF BIRTH M/M/DD/CYY 12/18/1921		5. AGE YRS. 75		6. SEX M		7. DATE OF DEATH M/M/DD/CYY 02/13/1997	
8. HOUR 0345		9. STATE OF BIRTH MT		10. SOCIAL SECURITY NO. [REDACTED] 0133		11. MILITARY SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
12. MARITAL STATUS Married		13. EDUCATION—YEARS COMPLETED 8		14. RACE White		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
16. USUAL EMPLOYER Northwest Pacific Railroad		17. OCCUPATION Train Conductor		18. KIND OF BUSINESS Transportation		19. YEARS IN OCCUPATION 38	
20. RESIDENCE—STREET AND NUMBER OR LOCATION 859 Shady Oak Drive							
21. CITY Santa Rosa		22. COUNTY Sonoma		23. ZIP CODE 95404		24. YRS IN COUNTY 29	
25. STATE OR FOREIGN COUNTRY California		26. NAME, RELATIONSHIP Wanda Ruegamer - Wife					
27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 859 Shady Oak Drive; Santa Rosa, CA 95404							
28. NAME OF SURVIVING SPOUSE—FIRST Wanda		29. MIDDLE Colleen		30. LAST (MAIDEN NAME) Brown			
31. NAME OF FATHER—FIRST Peter		32. MIDDLE Otto		33. LAST Ruegamer		34. BIRTH STATE IN	
35. NAME OF MOTHER—FIRST Mae		36. MIDDLE -		37. LAST (MAIDEN) Harby		38. BIRTH STATE MT	
39. DATE M/M/DD/CYY 02/14/1997		40. PLACE OF FINAL DISPOSITION Santa Rosa Memorial Park; Santa Rosa, California					
41. TYPE OF DISPOSITION(S) CR/BU		42. SIGNATURE OF EMBALMER Not Embalmed				43. LICENSE NO. -	
44. NAME OF FUNERAL DIRECTOR Daniels Chapel of the Roses		45. LICENSE NO. f-209		46. SIGNATURE OF LOCAL REGISTRAR <i>Darryl R. Flores</i>		47. DATE M/M/DD/CYY 02/14/1997	
101. PLACE OF DEATH Santa Rosa Memorial Hosp.		102. IF HOSPITAL, SPECIFY ONE: <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. FACILITY OTHER THAN HOSPITAL: <input type="checkbox"/> CONV. HOSP. <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER		104. COUNTY Sonoma	
105. STREET ADDRESS—STREET AND NUMBER OR LOCATION 1165 Montgomery Drive		106. CITY Santa Rosa					
107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)						108. DEATH REPORTED TO CORONER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO REFERRAL NUMBER 97-0273	
IMMEDIATE CAUSE (A) ACUTE CEREBROVASCULAR ACCIDENT		TIME INTERVAL BETWEEN ONSET AND DEATH 1 day					
DUE TO (B) ATHEROSCLEROTIC VASCULAR DISEASE		14 yr		109. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (C)				110. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (D)				111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO			
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 CORONARY ARTERY DISEASE							
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE.							
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE M/M/DD/CYY 12/12/82 DECEDENT LAST SEEN ALIVE M/M/DD/CYY 2/12/97		115. SIGNATURE AND TITLE OF CERTIFIER <i>Bruce Tucker</i>		116. LICENSE NO. 644232		117. DATE M/M/DD/CYY 2/13/97	
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP BRUCE TUCKER, M.D. 500 Doyle Park Dr. #G03 Santa Rosa, CA 95405							
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		120. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO		121. INJURY DATE M/M/DD/CYY		122. HOUR	
123. PLACE OF INJURY		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)							
126. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE M/M/DD/CYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER			
192443		A		B		C	
D		E		F		G	
H		FAX AUTH. #		0185		CENSUS TRACT	

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CERTIFIED COPY OF VITAL RECORDS

02/21/1997

DATE ISSUED

STATE OF CALIFORNIA
COUNTY OF SONOMA

This is true and exact reproduction of the document officially registered and placed on file in the Vital Statistics office, Sonoma County Department of Health Services.

Darryl R. Flores

LOCAL REGISTRAR
SONOMA COUNTY, CALIFORNIA

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

COPY

REQUESTED BY
Bradley Olike + Sartori
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'97 MAY 12 AM 11:07

LINDA SLATER
RECORDER

\$ 11.00 PAID ke DEPUTY

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