

Recorded at the request of:  
Eiji Watanabe

After recordation, return to:

✓ Eiji Watanabe  
c/o N. Keith Kellison, Esq.  
235 South Sierra Street  
Reno, Nevada 89501-1939

APN: 40-330-07

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF CALIFORNIA )

COUNTY OF *SAN MATEO* )

Comes now Eiji Watanabe and makes the following affidavit concerning real property owned in joint tenancy by affiant and Kazuko Watanabe.

1. Affiant is the surviving spouse of Kazuko Watanabe (aka Kazuko Tokoshima Watanabe).

2. Affiant and Kazuko Watanabe acquired title to the subject property as joint tenants by a Grant, Bargain, Sale Deed dated November 15, 1993 and recorded on November 23, 1993 in Book 1193, Page 4713, Filing No. 323318, Official Records, Douglas County, Nevada.

3. That the property held in joint tenancy is located at 313 Tramway Drive, Unit #27, Stateline, Douglas County, Nevada, and particularly described as follows, to-wit:

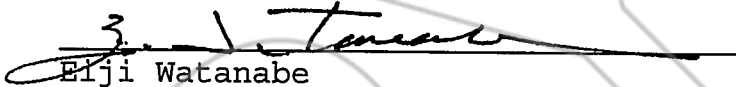
Unit 27, as set forth on that Condominium Map of Lot 51, 6th Amended Map of Tahoe Village Unit No. 1, recorded May 25, 1982 in Book 582, at Page 1325, Douglas County, Nevada, as Document No. 68043, said Map being a Condominium Map of Lot 51, Tahoe Village Unit No. 1, as amended map of Alpine Village Unit No. 1, filed in the Office of the County Recorder of Douglas County, Nevada, on

December 7, 1971, as Document No. 55769.

Together with an undivided 1/30th interest in the Common Area set forth on said Condominium Map.

4. Kazuko Watanabe died on July 17, 1996 at 2824 Hallmark Drive, Belmont, San Mateo County, California. A certified certificate of death of Kazuko Tokoshima Watanabe is attached hereto.

5. Due to the death of Kazuko Watanabe, all title and interest in the subject property vested in the surviving joint tenant, namely, Eiji Watanabe.

  
Eiji Watanabe

Signed and sworn to before me on the 15 day of May, 1997, by Eiji Watanabe, an individual.

\_\_\_\_\_  
(Signature of notarial officer)

My Commission Expires:  
\_\_\_\_\_

Attached to: Affidavit  
terminating joint tenancy  
3 pages

**Certificate Of Acknowledgment**

State of California )  
County of San Mateo )

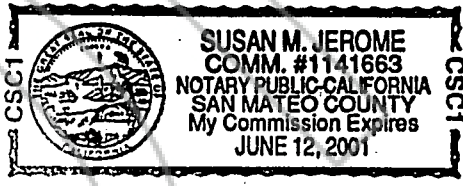
On September 2nd 1997 before me, Susan M Jerome, a Notary Public for the  
State of California, personally appeared Eiji Watanabe

~~personally known to me~~ (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and  
acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the  
person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature Susan M Jerome

(Seal)



STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SAN MATEO

HEALTH DEPARTMENT

SAN MATEO, CALIFORNIA

CERTIFICATE OF DEATH

3-96-41-002830

STATE FILE NUMBER: \_\_\_\_\_ STATE OF CALIFORNIA USE BLACK INK OR PRINTING PLATE. WHOLESALE OR ALIQUOTS VS-11 (REV. 7/03) LOCAL REGISTRATION NUMBER: \_\_\_\_\_

1. NAME OF DECEDENT - FIRST (GIVEN) **KAZUKO** 2. MIDDLE **IOKOSHIIMA** 3. LAST (FAMILY) **WATANABE**

4. DATE OF BIRTH MM/DD/YYYY **08/10/1940** 5. AGE YRS **55** 6. SEX **F** 7. DATE OF DEATH MM/DD/YYYY **07/17/1996** 8. HOUR **0420**

9. STATE OF BIRTH **Japan** 10. SOCIAL SECURITY NO. **0903** 11. MILITARY SERVICE  YES  NO **None** 12. MARITAL STATUS **Married** 13. EDUCATION - YEARS COMPLETED **18**

14. RACE **Asian/Japanese** 15. EMPLOYER - SPECIFY  YES  NO **Union Bank** 16. UNEMPLOYED  YES  NO

17. OCCUPATION **Vice-President/Manager** 18. KIND OF BUSINESS **Banking** 19. YEARS IN OCCUPATION **26**

20. RESIDENCE - STREET AND NUMBER OR LOCATION **2824 Hallmark Drive**

21. CITY **Belmont** 22. COUNTY **San Mateo** 23. ZIP CODE **94002** 24. YEAR OF COUNTY **10** 25. STATE OR FOREIGN COUNTRY **CA**

26. NAME, RELATIONSHIP **Eiji Watanabe - Husband** 27. MAILING ADDRESS (STREET AND NUMBER OR PO BOX NUMBER, CITY OR TOWN, STATE, ZIP) **2824 Hallmark Dr., Belmont, CA. 94002**

28. NAME OF SURVIVING SPOUSE - FIRST **Eiji** 29. MIDDLE **-** 30. LAST (MARRIED NAME) **Watanabe**

31. NAME OF FATHER - FIRST **Genzo** 32. MIDDLE **-** 33. LAST **Suganuma** 34. BIRTH STATE **JPN**

35. NAME OF MOTHER - FIRST **Atsue** 36. MIDDLE **-** 37. LAST (MARRIED) **Genda** 38. BIRTH STATE **JPN**

39. DATE MM/DD/YYYY **07/30/1996** 40. PLACE OF FINAL INTERMENT **80% Hiroshima City Cem., Hiroshima, Japan/20% RES: Eiji Watanabe, 2824 Hallmark Dr., Belmont, CA 94002**

41. TYPE OF DISPOSITION **CR/TR/RES** 42. DISPOSITION FOR BURIAL **John C. Morrow** 43. LICENSE NO. **6923**

44. NAME OF FUNERAL DIRECTOR **Cusimano Family Colonial Mortuary** 45. LICENSE NO. **FD1041** 46. SIGNATURE OF REGISTRAR **John C. Morrow** 47. DATE MM/DD/YYYY **07/17/1996**

101. PLACE OF DEATH **Watanabe Residence** 102. IF HOSPITAL, SPECIFY ONE:  IP  ER/OP  DOA  CONV. HOSP.  RES.  OTHER **San Mateo**

103. STREET ADDRESS - STREET AND NUMBER OR LOCATION **2824 Hallmark Drive** 104. COUNTY **San Mateo**

105. CITY **Belmont**

107. DEATH WAS CAUSED BY: (FINISH ONLY ONE CAUSE PER LINE FOR A, B, C, AND D) **Malignant Brain Tumor (Glioblastoma)** 108. TIME INTERVAL BETWEEN ONSET AND DEATH **10 mos.** 109. DEATH REPORTED TO CORONER  YES  NO 110. DEATH REPORTED TO CORONER BY: (FINISH ONLY ONE CAUSE PER LINE FOR A, B, C, AND D) **96-1290-3**

111. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 **None**

112. WAS OPERATION PERFORMED FOR ANY CAUSE IN ITEM 107 OR 111? IF YES, LIST TYPE OF OPERATION AND DATE **Surgical Removal 10/--/1995; 11/--/1995; 5/10/1996**

114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE STATED **10/01/1995** 115. SIGNATURE AND TITLE OF CORONER **Kendra Peterson M.D.** 116. LICENSE NO. **G63072** 117. DATE MM/DD/YYYY **7/19/96**

118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS + ZIP **Kendra Peterson, M.D., 300 Pasteur Dr., Stanford, CA**

119. SIGNATURE OF PHYSICIAN **Kendra Peterson M.D.** 120. DATE MM/DD/YYYY **05/31/1996** 121. MARRIED  YES  NO 122. SEX **F** 123. PLACE OF BIRTH **Japan**

124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN DEATH)

125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY AND ZIP CODE)

126. SIGNATURE OF CORONER OR DEPUTY CORONER **John C. Morrow** 127. DATE MM/DD/YYYY **07/17/1996** 128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER **John C. Morrow, Registrar**

STATE REGISTRAR: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

011747

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA } SS  
COUNTY OF SAN MATEO

DATE ISSUED

MAY 07 1997

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SAN MATEO COUNTY HEALTH DEPARTMENT.

*Scott Morrow M.D.*

SCOTT MORROW, M.D.  
HEALTH OFFICER AND REGISTRAR

0421932

This copy not valid unless prepared on engraved border displaying seal and signature of County Health Officer.

BK 0997 PG 3539

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



COPY

REQUESTED BY  
N. Keith Kellison  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

'97 SEP 18 AIO:27

0421932  
BK0997PG3540

LINDA SLATER  
RECORDER  
\$ 11.00 PAID W DEPUTY