RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

NAME

Dorothy Fultz

ADDRESS 1031 Umbarger Rd.

CITY. Troy Idaho 83871

STATE
ZIP

Order No..... Escrow No.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Affidavit--Death of Joint Tenant

AmaavitDeath of Joint Tenant	
STATE OF CHINENANCE, County of	
Certificate of Death, is the same person as Glenn L.	ancy Deed dated October 25, 1995, usband and wife, on November 6, 1995, in Douglas
Lots 44 and 45, of TOPAZ SUBDIVISIO of said Subdivision, fuly filed in of Doughlas County, State of Nevada	N, as the same appears upon a Plat the office of the County Recorder , on August 10, 1954, as File No. 9774.
and without liability for the consi	ED AS AN ACCOMODATION ONLY deration therefor; or as to the validity or or the effect of such recording on the title of
Dated 428.28	Sprang Fulty Borothy Fultz
SUBSCRIBED AND SWORN TO before me, the undersigned, a Notary Public in and for said County and State, this day of State, this day of State	SEAL
Netary Public in and for said County and State 438	707

BK0598PG0073

(This area for official notarial seal)

AT





IDAHO DEPARTMENT OF HEALTH AND WELFARE CENTER FOR VITAL STATISTICS AND HEALTH POLICY

CERTIFICATE OF DEATH

DATE FILED: APRIL 13, 1998

STATE FILE NUMBER: 98-02399

DECEDENT: GLENN LAVERNE FULTZ

DATE OF DEATH: APR. 09, 1998

PLACE OF DEATH: TROY, IDAHO

TIME OF DEATH: 2:00 P.M.

DATE OF BIRTH: JAN. 17, 1908

PLACE OF BIRTH: IDAHO

AGE: 90 YEARS

SEX: MALE

VETERAN? NO

MARITAL STATUS: MARRIED

SPOUSE (MAIDEN): DOROTHY TRESSL

SOCIAL SECURITY NUMBER:

-1598 RESIDENCE: TROY, IDAHO

FATHER: ANDREW FULTZ

FATHERS BIRTHPLACE: UNKNOWN

MOTHER (MAIDEN): LAURA AULDRICH

MOTHERS BIRTHPLACE: UNKNOWN

MORTUARY: VASSAR-RAWLS FUNERAL HOME, INC.

LEWISTON, IDAHO

MORTICIAN: JEFFREY D. SEIPERT

DISPOSITION: CREMATION

CERTIFYING PHYSICIAN: DENNIS L. PETERSON, MD

AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST:

INTERVAL

METASTATIC PROSTATE CA

6 YEARS

2. OTHER CONDITIONS CONTRIBUTING TO DEATH BUT UNRELATED TO ABOVE CAUSES:

NONE LISTED

- MANNER OF DEATH: NATURAL

438707

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO CENTER FOR VITAL STATISTICS AND HEALTH POLICY.

DATE ISSUED:

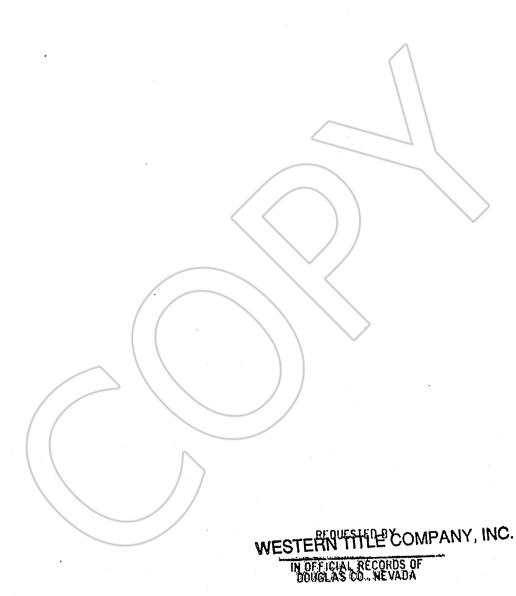
APRIL 15, 1998

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

JANE S. SMITH



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



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LINDA SLATER
RECORDER
PAID DEPUTY