

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF CALIFORNIA)
COUNTY OF YOLO) ss.

ELVA GIUSTI, being first duly sworn, deposes and says that the affiant is over the age of 21 years and competent to be a witness as to the matters hereinafter stated.

That the affiant is the same person as the person named as ELVA GIUSTI, one of the grantees in that certain deed recorded January 13, 1982, as Instrument No. 63870 in Book No. 182, page 656, of Official Records in the office of the County Recorder of Douglas County, State of Nevada.

That ANGELO GIUSTI was one of the grantees named in said deed and was the identical person named as ANGELO PAUL GIUSTI, the decedent, in that certain Death Certificate, a certified copy of which is annexed hereto and made a part hereof.

APN: 17-270-02

PROPERTY ADDRESS: 1760 Pinewood Drive, Minden, NV, more particularly described in Exhibit "A" attached.

AFFIANT'S ADDRESS: P. O. Box 37, Robbins, CA 95676

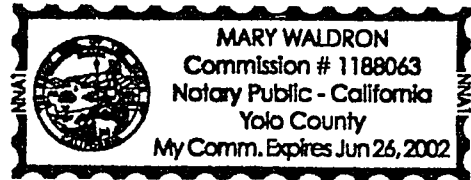
Elva Giusti

ELVA GIUSTI

Subscribed and sworn to before me this
11 day of September, 1998.

Mary Waldron

Notary Public in and for said
County and State



When recorded, mail to:

✓ Chris Konwinski
Calfee & Young PC
611 North Street
Woodland, CA 95695
(530) 666-2185

0450417
BK0998PG5594

CERTIFICATION OF VITAL RECORD

COUNTY of SUTTER

YUBA CITY, CALIFORNIA

CERTIFICATE OF DEATH

5100

234

STATE FILE NUMBER		STATE OF CALIFORNIA			LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER		
1A. NAME OF DECEDENT—FIRST Angelo		1B. MIDDLE Paul	1C. LAST Giusti		2A. DATE OF DEATH (MONTH, DAY, YEAR) July 16, 1988		2B. HOUR 0333
3. SEX Male	4. RACE/ETHNICITY White	5. SPANISH/HISPANIC NO BX	6. DATE OF BIRTH October 1, 1914		7. AGE 73 YEARS	IF UNDER 1 YEAR MONTHS DAYS	IF UNDER 24 HOURS HOURS MINUTES
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY) California		9. NAME AND BIRTHPLACE OF FATHER Giuseppi Giusti Italy			10. BIRTH NAME AND BIRTHPLACE OF MOTHER Itala Unti Italy		
11A. CITIZEN OF WHAT COUNTRY USA	11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE 19None to 19	12. SOCIAL SECURITY NUMBER [REDACTED] 3621	13. MARITAL STATUS Married	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME) Elva M. (Anderson)			
15. PRIMARY OCCUPATION Farmer		16. NUMBER OF YEARS THIS OCCUPATION 58	17. EMPLOYER (IF SELF-EMPLOYED, SO STATE) Self		18. KIND OF INDUSTRY OR BUSINESS Farming		
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) Hwy #113, 1 mile south of Robbins				19B.	19C. CITY OR TOWN Robbins		
19D. COUNTY Sutter		19E. STATE California		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP Mrs. Elva M. Giusti - Wife P.O. Box 277 Robbins, California 95676			
21A. PLACE OF DEATH Fremont Medical Center		21B. COUNTY Sutter		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP Mrs. Elva M. Giusti - Wife P.O. Box 277 Robbins, California 95676			
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION) 970 Plumas Street		21D. CITY OR TOWN Yuba City					
22. DEATH WAS CAUSED BY IMMEDIATE CAUSE CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST.		(A) Respiratory Distress DUE TO OR AS A CONSEQUENCE OF			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	24. WAS DEATH REPORTED TO CORONER? Yes	
		(B) Carcinoma of Pancreas DUE TO, OR AS A CONSEQUENCE OF			yes	25. WAS BIOPSY PERFORMED? yes	
		(C)				26. WAS AUTOPSY PERFORMED? No	
23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A				27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION Stomach Biopsy 9-23-87			
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. I ATTENDED DECEDENT SINCE I LAST SAW DECEDENT ALIVE (ENTER MO., DA. YR.) 4/27/76 7/1588		28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE John W. Lockwood, M.D.		28C. DATE SIGNED 7-18-88	28D. PHYSICIAN'S LICENSE NUMBER G-7074		
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)				35B. CORONER—SIGNATURE AND DEGREE OR TITLE		35C. DATE SIGNED	
36. DISPOSITION Burial	37. DATE—MONTH, DAY, YEAR 7-19-1988	38. NAME AND ADDRESS OF CEMETERY OR CREMATORY Sutter Cemetery, Sutter, California			39. EMBALMER'S LICENSE NUMBER AND SIGNATURE 4376		
40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		40B. LICENSE NO. 265	41. LOCAL REGISTRAR—SIGNATURE A H Beard, MD		42. DATE ACCEPTED BY LOCAL REGISTRAR JUL 28 1988		
STATE REGISTRAR	A.	B.	C.	D.	E.	F.	J.

VS-11 (1-85)

23710

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA } SS
COUNTY OF SUTTER

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SUTTER COUNTY RECORDER.

ATTEST: Memmler
DATE ISSUED: MAR 1 1988

Lonna B Smith
SUTTER COUNTY RECORDER-CLERK

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

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Exhibit A

The real property in the County of Douglas, State of Nevada,
described as

Unit 2, as shown on the Official Map of WESTWOOD MANOR PHASE 1
filed for record in the office of the County Recorder of Douglas
County, Nevada, on September 29, 1981, as Instrument No. 60744.

APN: 17-270-02

COPY

REQUESTED BY
Colfee + Young
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'98 SEP 28 AM 11:31

0450417

BK0998PG5596

LINDA SLATER
RECORDER
\$ 9.00 PAID Ko DEPUTY