

STATE OF NEVADA)
County of Carson City)
SS.

ROSS DOUGLAS ROBINSON, of legal age, being first
duly sworn, deposes and says:

That John W. Robinson^{B2}, the decedent mentioned in
the attached certified copy of Certificate of Death, is the same person as
JOHN W. ROBINSON, an unmarried man, also known as
JOHN WILLIAM ROBINSON, an unmarried man, named as one of the parties
in that certain Individual Grant Deed, dated July 1, 1998
executed by JOHN W. ROBINSON, an unmarried man
to JOHN W. ROBINSON, an unmarried man and ROSS DOUGLAS ROBINSON, an unmarried man
as Joint Tenants, recorded as Document No. 0443398 on July 1, 1998
Book 0798, Page 0078, Douglas County, State of Nevada
covering the following described property situated in Douglas County,
State of Nevada, described as follows:

Parcel 2 as set forth on Parcel Map for J.W. Robinson et ux, filed for record in the
office of the County Recorder of Douglas County, Nevada on April 27, 1987, in Book
487, at Page 2956, as Document No. 153734, of Official Records.

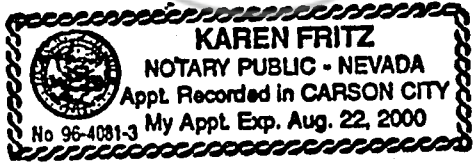
PARCEL II:

Exclusive Easement for roadway and appurtenances thereto dated January 28, 1981 by
and between Jack M. Beauchamp, et ux and John William Robinson, recorded April 14,
1981, in Book 481, at Page 942, as Document No. 55378, of Official Records of Douglas
County, State of Nevada.

APN 21-030-05

That the said decedent, John W. Robinson^{B2} is one of
the joint tenant grantees in that certain said Individual Grant Deed
and that all interest in and to said real property is vested absolutely in affiant,
namely ROSS DOUGLAS ROBINSON, an unmarried man.

Dated: OCTOBER 19, 1998



Ross Robin
Ross Douglas Robinson
Ross Douglas Robin

SUBSCRIBED AND SWORN TO before me,
a Notary Public, this 19th day
of OCTOBER, 1998

Karen Fritz
(Signature)

Name KAREN FRITZ
(Typed or printed)

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT

VITAL STATISTICS

Reno, Nevada

STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH — SECTION OF VITAL STATISTICS CERTIFICATE OF DEATH

ROLL 94 IMAGE 996

2164

STATE FILE NUMBER

DECEASED	DECEASED—NAME 1. John W. ROBINSON		DATE OF DEATH (Month, Day, Year) 2. September 23, 1998		COUNTY OF DEATH 3a. Washoe
	CITY, TOWN OR LOCATION OF DEATH 3b. Reno		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number) 3c. Veterans Administration Medical		If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify) 3e. Inpatient
DECEASED	FACE—(e.g., White, Black, American Indian, etc.) (Specify) 5. White		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc. 6.	AGE—Last Birthday (Years) 7a. 80	UNDER 1 YEAR MOS : DAYS 7b. :
	STATE OF BIRTH (If not U.S.A., name country) 9a. Oklahoma		CITIZEN OF WHAT COUNTRY 9b. USA	Decedent's Education. Specify highest grade completed. 10. 15	UNDER 1 DAY HOURS : MINS 7c. :
DECEASED	SOCIAL SECURITY NUMBER 13. 5966		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) 14a. Self Employed		KIND OF BUSINESS OR INDUSTRY 14b. Plumbing
	RESIDENCE—STATE 15a. Nevada	COUNTY 15b. Douglas	CITY, TOWN, OR LOCATION 15c. Minden	STREET AND NUMBER 15d. Vicky Lane 3027	INSIDE CITY LIMITS (Specify Yes or No) 15e. Yes
PARENTS	FATHER—NAME 16. Louis D. Robinson		MOTHER—MAIDEN NAME 17. Ruby Maupin		
	INFORMANT—NAME (Type or Print) 18. Ross Robinson		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 18b. 3027 Vicky Lane, Minden, Nevada 89423		
DISPOSITION	BURIAL, CREMATION, REMOVAL, OTHER (Specify) 19a. Removal/Burial		CEMETERY OR CREMATORY—NAME 19b. Oakwood Memorial Park		LOCATION City or Town State 19c. Chatsworth California
	FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such) 20a. <i>[Signature]</i>		FUNERAL DIRECTOR LICENSE NUMBER 20b. 16	NAME AND ADDRESS OF FACILITY 20c. Walton Funeral Home 875 West Second Street, Reno, Nevada 89503	
CERTIFIER	21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) <i>[Signature]</i>		22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated. (Signature and Title) <i>[Signature]</i>		
	DATE SIGNED (Mo., Day, Yr.) 21b. 9/23/98	HOUR OF DEATH 21c. 0500	DATE SIGNED (Mo., Day, Yr.) 22b.	HOUR OF DEATH 22c.	
	NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) 21d.		PRONOUNCED DEAD (Mo., Day, Yr.) 22d. ON		PRONOUNCED DEAD (Hour) 22e. AT
	NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print.) 23a. BRUCE DENNEY, 1000 LOCUST ST., RENO, NV 89520		LICENSE NUMBER 23b. LL 1096		
CAUSE OF DEATH	REGISTRAR 24a. (Signature) <i>[Signature]</i>		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) 24b. September 24, 1998	DEATH DUE TO COMMUNICABLE DISEASE 24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)				
CAUSE OF DEATH	PART I	(a) CARDIOGENIC SHOCK DUE TO, OR AS A CONSEQUENCE OF:	Interval between onset and death : : 1 DAY		
	CAUSE OF DEATH	(b) DIASTOLIC HEART FAILURE DUE TO, OR AS A CONSEQUENCE OF:	Interval between onset and death : : 3-5 MONTHS		
PART II		OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part 1.		AUTOPSY (Specify Yes or No) 26. No	WAS CASE REFERRED TO CORONER (Specify Yes or No) 27. No
CAUSE OF DEATH	ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) 28a.	DATE OF INJURY (Mo., Day, Yr.) 28b.	HOUR OF INJURY 28c. M	DESCRIBE HOW INJURY OCCURRED 28d.	
	INJURY AT WORK 28e.	PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify) 28f.	LOCATION. 28g.	STREET OR R.F.D. No.	CITY OR TOWN STATE

STATE REGISTRAR

No. 132234

This is to certify that the above is a true and legal copy of the certificate on file in this office.

0452449 *[Signature]* Date: **SEP 28 1998**

Deputy Registrar: *[Signature]*

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

BK 1098 PG 4869 (BK 1098 PG 4869)

COPY

REQUESTED BY
FIRST AMERICAN TITLE CO.

IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'98 OCT 23 P4:43

0452449

BK1098PG4870

LINDA SLATER
RECORDER

\$ 9.00 PAID KS DEPUTY