

**AFFIDAVIT - DEATH OF JOINT TENANT**

LEONARD CAMPBELL, of legal age, being first duly sworn, deposes and says:  
That ANNETTE M. CAMPBELL, the decedent mentioned in the attached certified copy  
of Certificate of Death, is the same person as ANNETTE CAMPBELL  
named as one of the parties in that certain GRANT, BARGAIN SALE DEED dated May 20, 1985  
executed by BEN H. MIDDLETON AND CORA P. MIDDLETON  
to LEONARD CAMPBELL AND ANNETTE CAMPBELL, husband and wife  
as joint tenants, recorded as Instrument No. 117664, on May 22, 1985, in  
Book \*\*\*\*\*, Page \*\*\*\*\*, of Official Records of DOUGLAS  
County, Nevada, covering the following described property situated in the 640 Carmel Way  
Gardnerville, Nevada 89410, County of Douglas, State of Nevada:  
LOT 415, AS SHOWN ON THE MAP OF GARDNERVILLE RANCHOS UNIT NO. 7, FILED FOR RECORD IN  
THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON MARCH 27, 1974, AS  
DOCUMENT NO. 72456.

A.P.N. 1220-21-810-236

Dated July 22, 1999

STATE OF NEVADA  
COUNTY OF Douglas  
On July 22, 1999 personally  
appeared before me, a Notary Public,  
Leonard Campbell \*\*\*\*\*  
personally known or proved to me to be the person whose name is  
subscribed to the above instrument who acknowledged that he  
executed the instrument.

} s.s. Leonard Campbell  
Leonard Campbell



Signature Sheree Anne Sheets  
Sheree Anne Sheets

(This area for official notarial seal)

Title Order No.00081802 Escrow or Loan No.

RECORDING REQUESTED BY  
Western Title Company, Inc.  
AND WHEN RECORDED MAIL TO

SPACE BELOW THIS LINE FOR RECORDER'S USE

Name  Leonard Campbell  
Street Address 640 Carmel Way  
City, State Zip Gardnerville, NV 89410

# STATE OF NEVADA

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

	LOCAL FILE NUMBER	STATE FILE NUMBER
DECEASED	1. <b>Annette M. CAMPBELL</b>	2. <b>March 12, 1998</b>
	3b. <b>Gardnerville</b>	3c. <b>Valley Meadows Care Center</b>
	5. <b>White</b>	6. <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
	7a. <b>74</b>	7b. <b>74</b>
PARENTS	9a. <b>North Dakota</b>	9b. <b>U.S.A.</b>
	10. <b>10</b>	11. <b>Married</b>
	13. <b>0742</b>	14a. <b>Sales Clerk</b>
	14b. <b>Retail Industry</b>	
DISPOSITION	18a. <b>Leonard F. Campbell - Husband</b>	18b. <b>640 Carmel Way, Gardnerville, Nevada 89410</b>
	19a. <b>Cremation</b>	19b. <b>Carson Sierra Crematory</b>
	20a. <i>Jimmy Burns</i>	20c. <b>1614 N. Curry Street, Carson City, NV 89703</b>
	21a. <i>[Signature]</i>	21c. <b>2216</b>
CERTIFIER	23a. <b>Dr. D. Hoskins, 1190 High School Street, Minden, Nevada 89423</b>	23b. <b>4628</b>
	24a. <i>Catherine Bodnar</i>	24b. <b>March 17 1998</b>
	25. IMMEDIATE CAUSE	24c. <input type="checkbox"/> <b>YES</b> <input checked="" type="checkbox"/> <b>NO</b>
	26. <b>No</b>	27. <b>Yes</b>
CAUSE OF DEATH	PART I	
	(a) <b>Acute Aspiration of Stomach Contents</b>	
	(b) <b>Severe Ideopathic Gastroparesis</b>	
	PART II	
28a. <b>INJURY AT WORK</b>		28b. <b>DATE OF INJURY</b>
28c. <b>HOUR OF INJURY</b>		28d. <b>DESCRIBE HOW INJURY OCCURRED</b>
28e. <b>PLACE OF INJURY</b>		28f. <b>LOCATION</b>
28g. <b>STREET OR R.F.D. No.</b>		28h. <b>CITY OR TOWN</b>
28i. <b>STATE</b>		



STATE REGISTRAR

No. 116415

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

Date Issued: **MAR 17 1998**

State Registrar

Yvonne Sylva

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

REQUESTED BY  
**Leonard Campbell**  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

'99 JUL 22 P2:21

LINDA SLATER  
RECORDER  
PAID *K2* DEPUTY

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