

EXHIBIT "A"

LEGAL DESCRIPTION

ESCROW NO.: 99071662

Lot 122, in Block B, as set forth on the map of WINHAVEN, UNIT NO. 1, A Planned Unit Development filed for record in the office of the County Recorder of Douglas County, State of Nevada, on January 13, 1989 as Document No. 194373.

COPY

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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		DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
1. Albert JOHNSON		2. April 28, 1999		3a. Douglas		COUNTY OF DEATH	
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)		If Hosp. or Inst. indicate DOA, OP/Emr, Rm. Inpatient (Specify)		SEX	
3b. Minden		3c. 1033 Wisteria Drive		3e.		4. Male	
RACE—(e.g., White, Black, American Indian, etc.) (Specify)		Was Decedent of Hispanic Origin? Specify <input checked="" type="checkbox"/> yes <input type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.		AGE—Last Birthday (Years)		DATE OF BIRTH (Mo., Day, Yr.)	
5. White		6.		7a. 78		8. October 2, 1920	
9a. Wisconsin		9b. U.S.A.		10. 13		11. Married	
13. 4933		14a. Tool Design Engineer		14b. Airline Industry		12. Barbara G. Hefter	
15a. Nevada		15b. Douglas		15c. Minden		15d. 1033 Wisteria Drive	
15e. Yes		16. Harry Johnson		17. Kathryn Brandau		18a. Barbara Gayle Johnson - Wife	
18b. 1033 Wisteria Drive, Minden, Nevada 89423		19a. Cremation		19b. Carson Sierra Crematory		19c. Carson City, Nevada	
20a. [Signature]		20b. 9		20c. 1478 Fourth Street, Minden, Nevada 89423		21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.	
21b. 4/30/99		21c. 2335		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.		22b. [Signature]	
21d.		22d. ON		22e. AT		23a. Dr. C. B. DeFriez, 809 North Plaza St., Carson City, NV 89703	
23b. 5067		24a. [Signature]		24b. May 3, 1999		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		(a) Cardiopulmonary Arrest		Interval between onset and death		10 minutes	
(b) Lung Cancer		Interval between onset and death		3 months		Interval between onset and death	
(c)		26. No		27. Yes		28a. ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)	
28b.		28c.		28d.		28e. INJURY AT WORK (Specify Yes or No)	
28f.		28g.		28h.		28i.	

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

CERTIFIER

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

CAUSE OF DEATH

STATE REGISTRAR

No. 145222

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

Date Issued: MAY 03 1999

0474878 State Registrar

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REQUESTED BY
~~STEWART TITLE~~ of DOUGLAS COUNTY
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA

1999 AUG 19 PM 2: 53

LINDA SLATER
RECORDER

\$10.00 PAID AL DEPUTY

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