AFFIDAVIT - DEATH OF JOINT TENANT

APN: 21-421-23 NOW 1420-33-312-020	
ESTHER NILSON	, of legal age, being first duly sworn, deposes and says:
That GUNNAR NILSON	, the decedent mentioned in the attached certified copy
of Certificate of Death, is the same person as GUNNAR NILSON	
named as one of the parties in that certain GRANT DEED	dated SEPTEMBER 8, 1998
executed by JEFFREY K. KIRBY AND WENDY L. KIRBY, HUSBA	ND AND WIFE
to GUNNAR NILSON AND ESTHER NILSON	
as joint tenants, recorded as Instrument No.0448978	, on <u>SEPTEMBER</u> 8, 1998 , i
Book <u>998</u> , Page <u>1437</u> , of	Official Records of DOUGLAS
County, Nevada, covering the following described property situated LOT 140 AS SET FORTH ON THE FINAL MAP OF WILDHORSE IN THE OFFICE OF THE COUNTY RECORDEROF DOUGLAS OF BOOK 394, AT PAGE 2741, AS DOCUMENT NO. 332336.	E UNIT NO. 6. A PLANNED UNIT DEVELOPMENT FILED
ASSESSOR'S PARCEL NO. 1420-33-312-020	
THIS DOCUMENT IS BEING RECORDED A WITHOUT LIABILITY ON THE PART OF W FOR THE SUFFICIENCY HEREOF OR FO	ESTERN TITLE COMPANY 1510
That the value of all real and personal property owned by said dec described, did not then exceed the sum of \$ <u>-\(\mu\) \(\mu\) \(\mu\) \(\mu\) \(\mu\) \(\mu\)</u>	edent at date of death, including the full value of the property
Dated <u>JULY 2, 2001</u>	
STATE OF NEVADA	Carpor Nilson
COUNTY OF DOUGLAS	S.S. ESTHER NILSON, Surviving Joint Tenant
This instrument was acknowledged before me on JULY 2, 2001 by ESTHER NILSON Notary Public CAROL COSTA Notary Public Rest (March 1988)	
Notary Public - State of Nevada Appointment Recorded in County of Douglas My Appointment Expires Nov. 4, 2004	(This area for official notarial seal)
Title Order No.00000147	Escrow or Loan No.
SPACE BELOW	THIS LINE FOR RECORDER'S USE
RECORDING REQUESTED BY Western Title Company, Inc. AND WHEN RECORDED MAIL TO	
ESTHER NILSON	
itreet 2668 VICKY LANE	
City, State MINDEN, NEVADA 89423	· .

0517639 BK0701PG0368



WASHOE COUNTY DISTRICT HEALTH DEPARTMENT

VITAL STATISTICS Reno, Nevada

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

1. Gunnar N. NILSON 2. March 21, 1999 3a. Was CITY, TOWN OR LOCATION OF DEATH HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number) 3b. Sparks 3c. Tahoe Pacific Hospital 4. Take Pacific Hospital 4. Take Pacific Hospital 3c. Tahoe Pacific Hospital 4. Take Pacific Hospital 5c. Tahoe Pacific Hospital 4. Take Pacific Hospital 4. Take Pacific Hospital 4. Take Pacific Hospital 5c. Tahoe Pacific Hospital 4. Take Pacific Hospital 4. Take Pacific Hospital 5c. Tahoe Pacific Hospital 6c. Tahoe P	LOCAL FILE NUMBER						ATE FILE NUMBER
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Sparks Sparks Those Tance Pacific Hospital Sparks							
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25. IMMEDIATE CAUSE (BYTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) PART (a) DUE TO, OR AS A CONSEQUENCE OF: (b) DUE TO, OR AS A CONSEQUENCE OF: (c) PART OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part 1. AUTOPSY, Yes or Not) ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. Specify 28b. PLACE OF INJURY—At nome, tarm, street, factory, office building, etc., (Specify) 28d. STATE REGISTRAR This is to certify that the above is a frue and legal copy of the certificate on file in this office. APR 0 1 1995 Deputy Registrar. Date:	REGISTRAR	1000	7%	and the second second	RAR (Mo., Day, Yr.) DEATI		ABLE DISEASE
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STATE REGISTRAR This is to certify that the above is a free and legal copy of the certificate on file in this office APR 0 1 1995 Deputy Registrar: Date:		PLACE OF INJURY—At home, far		OCATION.	STREET OR R.F.D. No.	CITY OR TO	WN STATE
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REQUESTED BY WESTERN TITLE COMPANY, INC. IN OFFICIAL RECORDS OF DOUGLAS CO., MEVADA

2001 JUL -3 PM 12: 23

LINDA SLATER RECORDER _PAID & DEPUTY

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