

17
APN: 23-290-09

1320-26-002-017

AFFIDAVIT OF DEATH OF CO-TRUSTEE

STATE OF NEVADA)
 : ss.
County of Carson)

I, **JUDY RAE NEWBY**, hereby swear (or affirm) under penalty of perjury that the assertions of this Affidavit are true. I am over the age of 18 years and competent to be a witness as to the matters hereinafter stated.

I am the person named as **JUDY RAE NEWBY**, one of the initial two Co-Trustees designated in **The Don & Judy Newby Family Trust U/D/T 02-06-99**, wherein **DONALD E. NEWBY** and **JUDY RAE NEWBY** were named as Co-Trustees.

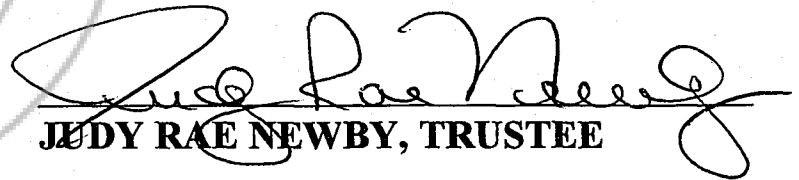
Included in the trust estate of The Don & Judy Newby Family Trust is a certain parcel of real property situate in the County of Douglas, State of Nevada, described as follows:

See Exhibit "A" attached hereto and by this reference incorporated herein.

That **DONALD E. NEWBY** is the identical person as decedent **DONALD EARL NEWBY** named in that certain Certificate of Death, a certified copy of which is attached hereto as Exhibit "B" and made a part hereof, as if set forth in full, verbatim. I am the surviving wife of said decedent, who died on the 16th day of March, 1999.

I am the remaining Co-Trustee of said Trust and I hereby accept the appointment as sole Trustee and I agree to assume and perform all of the fiduciary duties as sole Trustee under said Trust.

Dated this 5th day of August, 2002.

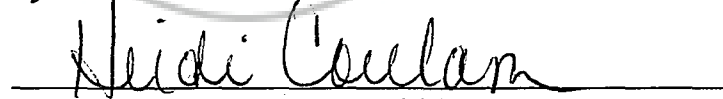

JUDY RAE NEWBY, TRUSTEE

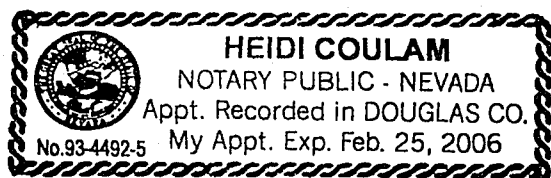
STATE OF NEVADA)
 : ss.
County of Carson)

WHEN RECORDED MAIL TO:

JUDY RAE NEWBY
P.O. BOX 2213
MINDEN, NV 89423-2213

This instrument was acknowledged before me on the 5th day of August, 2002 by **JUDY RAE NEWBY**.


Notary Public



0548810

BK0802PG01461

DESCRIPTION

All that certain lot, piece, or parcel of land situate in the County of Douglas, State of Nevada, described as follows:

PARCEL 1-A, as set forth on that certain Parcel Map for FORGE INC., located in a portion of the Southeast 1/4 of the Southwest 1/4, Section 26, Township 13 North, Range 20 East, M.D.B. & M., Douglas County, Nevada, filed for record in the Office of the County Recorder of Douglas County, Nevada, on October 8, 1985, as Document 125018.

A.P.N. Portion of 23-290-09

Excepting therefrom all minerals, oil, gas and other hydro-carbons now or at any time hereafter situate therein and thereunder and which may be produced therefrom together with the free and unlimited right to mine, drill, bore, operate and remove said minerals from beneath the surface of said land at any level below the surface of said land as granted to STOCK PETROLEUM CO., INC., in Deed recorded March 13, 1980, in Book 380, Page 1351, Document No. 42677, of Official Records.

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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

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

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

PARENTS

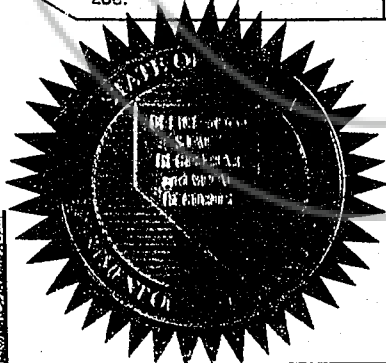
DISPOSITION

CERTIFIER

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

CAUSE OF DEATH

LOCAL FILE NUMBER		STATE FILE NUMBER	
DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)	COUNTY OF DEATH
1. Donald Earl NEWBY		2. March 16, 1999	3a. Douglas
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/Emer. Rm. Inpatient (Specify)
3b. Minden		3c. 1640 Valley Rd. E.	3e. 4. Male
RACE—(e.g., White, Black, American Indian, etc.) (Specify)	Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.	AGE—Last Birthday (Years)	UNDER 1 YEAR MOS : DAYS
5. White	6.	7a. 60	7b. : 7c. :
DATE OF BIRTH (Mo., Day, Yr.)	CITIZEN OF WHAT COUNTRY	Decedent's Education. Specify highest grade completed.	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)
8. July 10, 1938	9b. U.S.A.	10. 17	11. Married
STATE OF BIRTH (If not U.S.A., name country)	Decedent's Education. Specify highest grade completed.	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	SURVIVING SPOUSE (If wife, give maiden name)
9a. California	10. 17	11. Married	12. Judy Oliver
SOCIAL SECURITY NUMBER	USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)	KIND OF BUSINESS OR INDUSTRY	
13. 3195	14a. Electrician	14b. Briggs Electric	
RESIDENCE—STATE	COUNTY	CITY, TOWN, OR LOCATION	STREET AND NUMBER
15a. Nevada	15b. Douglas	15c. Minden	15d. 1640 Valley Rd.
FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last	
16. William Edward Newby		17. Gladys Irene McLellan	
INFORMANT—NAME (Type or Print)		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)	
18a. Judy Newby - Wife		18b. P. O. Box 2213, Minden, Nevada 89423	
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME	LOCATION City or Town State
19a. Burial		19b. Eastside Memorial Park	19c. Minden, Nevada
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER	NAME AND ADDRESS OF FACILITY
20a. Jimmy Jensen		20b. 9	20c. Walton's Douglas County Mortuary
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.		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)		(Signature and Title)	
DATE SIGNED (Mo., Day, Yr.)		HOUR OF DEATH	
21b. 3/16/99		21c. 1845	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		PRONOUNCED DEAD (Mo., Day, Yr.)	
21d.		22d. ON 22e. AT	
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print)		LICENSE NUMBER	
23a. F. Craig Conrath 85 Kimm Suite 40 Reno, NV 89502		23b. NV 5454	
REGISTRAR	DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)	DEATH DUE TO COMMUNICABLE DISEASE	
24a. (Signature) Vera R. Hochamp	24b. March 19, 1999	24c. YES <input type="checkbox"/> NO <input type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a); (b); AND (c).)		Interval between onset and death	
PART I (a) Domestic Circumstances		Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(b)		Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(c)		Interval between onset and death	
PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.		AUTOPSY (Specify Yes or No)	WAS CASE REFERRED TO CORONER (Specify Yes or No)
26. NO		27. Yes	
ACC. SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)	DATE OF INJURY (Mo., Day, Yr.)	HOUR OF INJURY	DESCRIBE HOW INJURY OCCURRED
28a.	28b.	28c. M	28d.
INJURY AT WORK (Specify Yes or No)	PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)	LOCATION.	STREET OR R.F.D. No. CITY OR TOWN STATE
28e.	28f.	28g.	



STATE REGISTRAR

No. 129624

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

Yvonne Sylva
State Registrar

Date Issued: 0548810 MAR 18 1999

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

BK 0802 PGO 1463

COPY

REQUESTED BY
Judy Rae Newby
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2002 AUG -6 PM 12: 21

LINDA SLATER
RECORDER

\$17⁰⁰ PAID K2 DEPUTY

0548810

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