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A.P.N. 1220-15-110-076  
A.P.N. 1220-16-810-006

WHEN RECORDED, MAIL TO:

Alan B. Evans, Successor Trustee  
987 Dean Drive  
Gardnerville, Nevada 89410

**CERTIFICATE OF INCUMBENCY AND CERTIFICATION OF TRUST**  
*N.R.S. 164.400*

ALAN B. EVANS, being duly sworn, deposes and says:

1. That ALAN B. EVANS and LOUISE CLARA EVANS created a revocable living trust entitled THE ALAN B. EVANS AND LOUISE CLARA EVANS FAMILY TRUST dated March 4, 1991, and on August 17, 1998, ALAN B. EVANS and LOUISE CLARA EVANS created a first amendment to said trust.
2. That by the terms of THE ALAN B. EVANS AND LOUISE CLARA EVANS FAMILY TRUST, and first amendment thereto, ALAN B. EVANS and LOUISE CLARA EVANS were designated as Co-Trustees.
3. That LOUISE CLARA EVANS died on July 22, 2002. A true and correct copy of her Certificate of Death is attached hereto as Exhibit "A."
4. That ALAN B. EVANS is named as Successor Trustee of THE ALAN B. EVANS AND LOUISE CLARA EVANS FAMILY TRUST dated March 4, 1991, as amended.
5. That the form in which title to assets of the trust is to be taken is:  
  
"ALAN B. EVANS, Successor Trustee of THE ALAN B. EVANS AND LOUISE CLARA EVANS FAMILY TRUST dated March 4, 1991, as amended."

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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		DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
1. Louise Clara EVANS		2. July 22, 2002		3a. Douglas		COUNTY OF DEATH	
3b. Gardnerville		3c. 987 Dean Dr		3e. Female		4. Female	
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. 72		7b. : 7c. :	
DATE OF BIRTH (Mo., Day, Yr.)		8. January 16, 1930		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)		SURVIVING SPOUSE (If wife, give maiden name)	
9a. California		9b. U.S.A.		10. 12		11. Married 12. Alan Evans	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)		KIND OF BUSINESS OR INDUSTRY			
13. ██████████ 5187		14a. Bookkeeper		14b. Restaurant			
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		STREET AND NUMBER	
15a. Nevada		15b. Douglas		15c. Gardnerville		15d. 987 Dean Dr.	
INSIDE CITY LIMITS (Specify Yes or No)		15e. Yes					
FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last					
16. Filippo Trani		17. Anna Palumbo					
INFORMANT—NAME (Type or Print)		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)					
18a. Alan Evans, Husband		18b. 987 Dean Dr. Gardnerville, Nevada 89410					
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State			
19a. Burial		19b. Mottsville Cemetery		19c. Mottsville Nevada			
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY			
20a. <i>[Signature]</i>		20b. 217		20c. Home 1380 Hwy 395 Gardnerville, Nevada 89410			
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.		21b. <i>[Signature]</i>		21c. 0610		21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)	
21b. 7/23/02		21c. 0610		21d. David S. Hoskins, MD. P.O. Box 2200 Minden, Nevada 89423		21e. LICENSE NUMBER	
21e. 4628		21f. REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		DEATH DUE TO COMMUNICABLE DISEASE	
21f. <i>[Signature]</i>		21g. July 23, 2002		21h. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		PART I (a) Nonsmall Cell Lung Cancer with Multiple Metastasis (Adenocarcinoma)		Interval between onset and death			
PART I (b) Long term Tobacco Use.		PART I (c) GERD, COPD		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. 224090

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

Date Issued: JUL 23 2002 0554999

*[Signature]*  
Sylvia  
State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

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EXHIBIT "A"

**EXHIBIT "B"**

All that real property located at 987 Dean Drive, Gardnerville, Douglas County, Nevada, more particularly described as follows:

Lot 20, as shown on the map of Gardnerville Ranchos Unit No. 2, filed for record in the Office of the County Recorder of Douglas County, State of Nevada, on June 1, 1965, in Book 31, Page 686, as Document No. 28309, and Amended Title Sheet recorded on June 4, 1965, in Book 31, Page 797, as Document No. 28377.

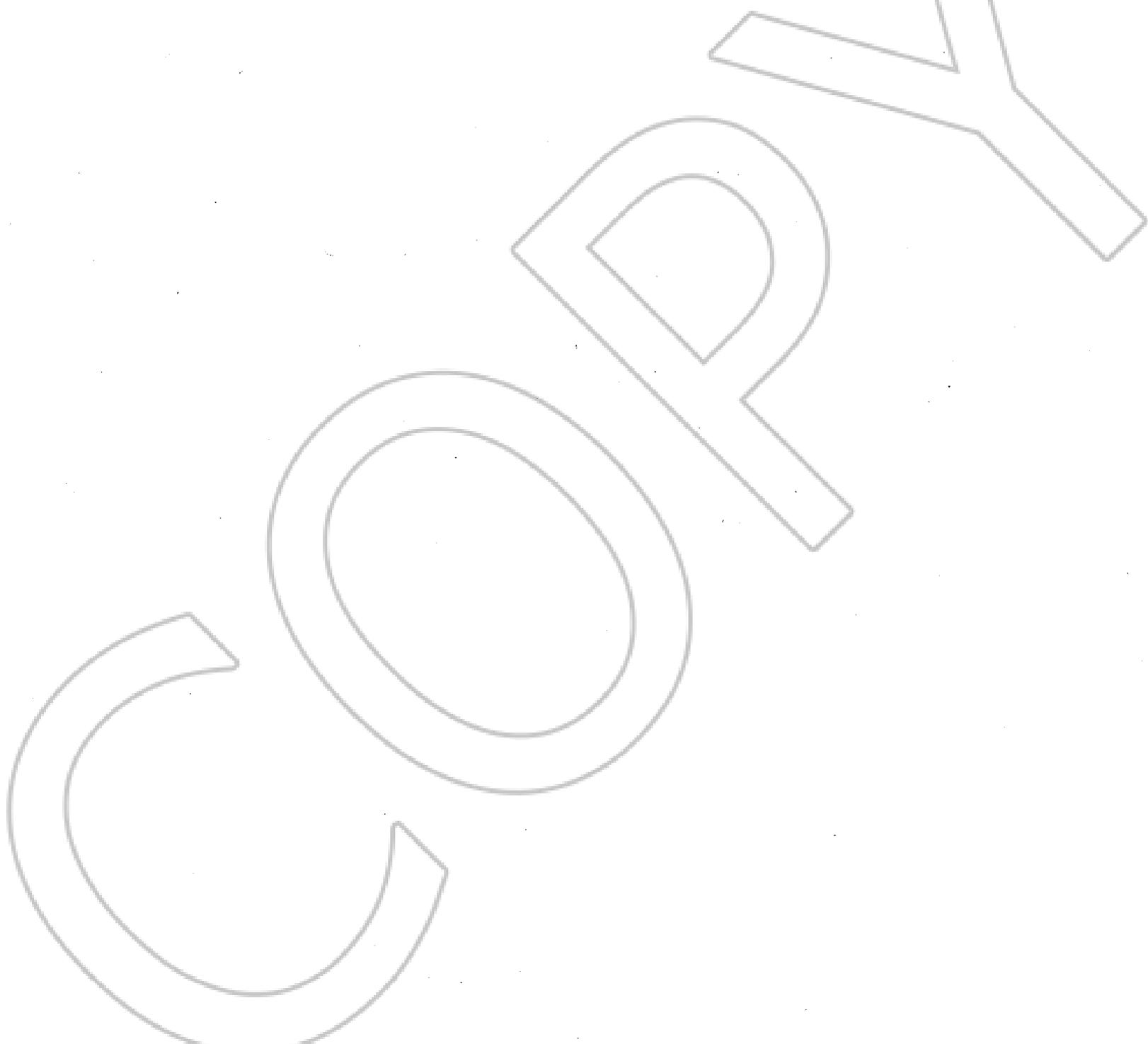
A.P.N. 1220-15-110-076

**EXHIBIT "C"**

All that real property located at 1319 Muir Drive, Gardnerville, Douglas County, Nevada, more particularly described as follows:

Lot 6, in Block E, as said lot and block are shown on the map of GARDNERVILLE RANCHOS UNIT NO. 4, filed in the Office of the County Recorder of Douglas County, State of Nevada, on April 10, 1967, in Map Book 1, page 055, Filing No. 35914.

A.P.N. 1220-16-810-006



COPY

REQUESTED BY  
James m O'Reilly  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

2002 OCT 16 AM 11:38

LINDA SLATER  
RECORDER

\$19<sup>00</sup> PAID kg DEPUTY

0554999

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