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1270-12-710-042

A.P.N. 023-232-110

ORIGINAL

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF NEVADA)
) ss.
COUNTY OF WASHOE)

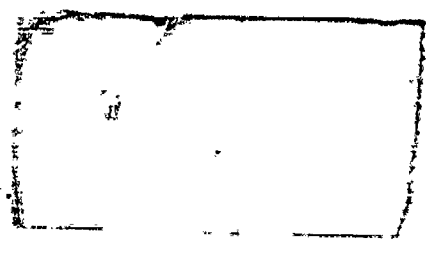
IRIS M. MORRIS, does hereby swear under penalty of perjury that the assertions of this affidavit are true:

1. That affiant is over the age of 21 years and competent to be a witness as to the matters hereinafter stated.

2. That BERNARD P. MORRIS, the decedent mentioned in the attached certified copy of the Certificate of Death is the same person as BERNARD P. MORRIS named as one of the parties in that certain Deed dated December 20, 1990, executed by ANNA M. BLADES and JERRY L. BLADES to BERNARD P. MORRIS and IRIS M. MORRIS, Husband and Wife, as joint tenants, recorded as Instrument No. 241409 on December 20, 1990 in Book 1290, Page 2696 of Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada, at 1058 Tybo Court, Gardnerville, Nevada 89410, more particularly described as:

Lot 21, Block B as set forth on the plat of Pinenut Manor No. 1 and 2, Phase 2, filed for record in the Office of the County Recorder of Douglas County, Nevada

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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		STATE FILE NUMBER	
1. DECEASED—NAME First Middle Last Bernard P. MORRIS		2. DATE OF DEATH (Month, Day, Year) February 23, 1998	3a. COUNTY OF DEATH Carson City
CITY, TOWN, OR LOCATION OF DEATH Carson City		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number) Carson Tahoe Hospital	If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify) Inpatient
3b. Carson City		4. Male	
RACE—(e.g., White, Black, American Indian, etc) (Specify) White		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc. X	AGE—Last Birthday (Years) 70
STATE OF BIRTH (If not U.S.A., name country) Montana		CITIZEN OF WHAT COUNTRY U.S.A.	Decedent's Education. Specify highest grade completed. 12
SOCIAL SECURITY NUMBER -8253		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Chief Engineer	KIND OF BUSINESS OR INDUSTRY Shipping Industry
RESIDENCE—STATE Nevada		COUNTY Douglas	CITY, TOWN, OR LOCATION Gardnerville
FATHER—NAME First Middle Last Thomas Morris		MOTHER—MAIDEN NAME First Middle Last Ethel Lewis	
INFORMANT—NAME (Type or Print) Iris Morris - Wife		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 1058 Tybo Court, Gardnerville, Nevada 89410	
BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		CEMETERY OR CREMATORY—NAME Walton's Carson Sierra Crematory	LOCATION City or Town State Carson City, Nevada
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such) <i>Jimmy Boney</i>		FUNERAL DIRECTOR LICENSE NUMBER 62L	NAME AND ADDRESS OF FACILITY Capitol City Cremation & Burial Society, 1614 N. Curry St., Carson City, NV 89703
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) <i>B. Bottenberg MD</i>		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) <i>B. Bottenberg MD</i>	
DATE SIGNED (Mo., Day, Yr.) 2/24/98		HOUR OF DEATH 0445	
21b. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) Dr. B. Bottenberg		22b. PRONOUNCED DEAD (Mo., Day, Yr.) ON	
21c. HOUR OF DEATH 0445		22c. PRONOUNCED DEAD (Hour) AT	
21d. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print.) Dr. B. Bottenberg, 1540 Hwy 395, Gardnerville, Nevada 89410		22e. LICENSE NUMBER 0109	
REGISTRAR 24a. (Signature) <i>L. M. Laughlin</i>		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) February 26, 1998	DEATH DUE TO COMMUNICABLE DISEASE 24c. 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) respiratory arrest DUE TO, OR AS A CONSEQUENCE OF: (b) aspiration pneumonia DUE TO, OR AS A CONSEQUENCE OF: (c) Cerebral vascular accident		Interval between onset and death Interval between onset and death 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) No	WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) 28a.	DATE OF INJURY (Mo., Day, Yr.) 28b.	HOUR OF INJURY 28c.	DESCRIBE HOW INJURY OCCURRED 28d.
INJURY AT WORK (Specify Yes or No) 28e.	PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify) 28f.	LOCATION. 28g.	STREET OR R.F.D. No. CITY OR TOWN STATE

STATE REGISTRAR

No. 116406

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

Date Issued:

FEB 26 1998

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State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

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on June 16, 1980, in Book 680, Page 1361, as Document Number 45348, and further imposed on that Certificate of Amendment recorded April 18, 1990, in Book 490, of Official Records, as Page 2363, Douglas County, Nevada as Document No. 224125.

Assessor's Parcel Number 23-232-110.

3. That BERNARD P. MORRIS was one of the grantees named in said deed and was the identical person named as BERNARD P. MORRIS, the decedent in that certain Death Certificate, certified copy of which is annexed hereto and made a part hereof, which person died on the 23rd day of February, 1998, in the City of Carson, County of Douglas, State of Nevada.

Dated: 10-14-02 By: Iris M Morris
IRIS M. MORRIS

SUBSCRIBED AND SWORN TO before me, the undersigned a Notary Public in and for the State of Nevada this 14th day of October, 2002.

Witness my hand and official seal.

Signature Tanya M. Swanson

Name (typed or printed) Tanya M. Swanson

Recording requested by:
KARLA K. BUTKO
Attorney at Law
1030 Holcomb Avenue
Reno, Nevada 89502



When recorded please mail to:
 KARLA K. BUTKO
Attorney at Law
1030 Holcomb Avenue
Reno, Nevada 89502

REQUESTED BY
Karla K Butko
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2003 FEB -6 PM 2: 29

WERNER CHRISTEN
RECORDER

\$ 16.00 PAID K2 DEPUTY

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