

A.P.N. # 1420-33-212-014
ESCROW NO. 030801300

RECORDING REQUESTED BY:
STEWART TITLE COMPANY
WHEN RECORDED MAIL TO:

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA }
 } ss.
COUNTY OF DOUGLAS }

JEROLD A. FINDERS, of legal age, being first duly sworn, deposes and says:
That DIANE FINDERS, the decedent mentioned in the attached certified copy
of Certificate of Death, is the same person as DIANE FINDERS
named as one of the parties in that certain INDIVIDUAL GRANT DEED dated September 02, 1992
executed by VIRGIL PATRICK BUFKIN, A MARRIED MAN AS HIS SOLE AND SEPARATE PROPE

to _____
as joint tenants, recorded as Instrument No. 290863, on October 15, 2092
in Book 1092, Page 2645, of Official Records of DOUGLAS
County, Nevada, covering the following described property situated in the DOUGLAS
County, State of Nevada:

**Lot 140, Block B, as shown on the Final Map of WILDHORSE UNIT 4,
A PLANNED UNIT DEVELOPMENT, filed for record in the office of
the County Recorder of Douglas County, State of Nevada, on
December 12, 1990 in Book 1290, Page 3944, as Document No.
241974.**

Assessors Parcel No. 1420-33-212-014

DATE: April 05, 2003

Jerold A Finders

JEROLD A. FINDERS

STATE OF Nevada }
 } ss.
COUNTY OF DOUGLAS }

This instrument was acknowledged before me on April 10, 2003,
by, JEROLD A. FINDERS

Signature *Traci E Adams*

Notary Public
TRACI E. ADAMS
NOTARY PUBLIC
STATE OF NEVADA
Appt. Recorded in Douglas County
My Appt. Expires January 5, 2007
No: 89-1891-5

0574623

BK0403PG12092

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT

VITAL STATISTICS

Reno, Nevada

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

ROLL 103 IMAGE 859

1468

STATE FILE NUMBER

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

1. DECEASED—NAME First Middle Last Diane FINDERS			2. DATE OF DEATH (Month, Day, Year) June 13, 2001		3a. COUNTY OF DEATH Washoe	
3b. CITY, TOWN OR LOCATION OF DEATH Reno		3c. HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number) Washoe Medical Center		3e. Inpatient		4. SEX Female
5. RACE —(e.g., White, Black, American Indian, etc.) (Specify) White		6. Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.		7a. AGE—Last Birthday (Years) 66	7b. UNDER 1 YEAR MOS : DAYS	7c. UNDER 1 DAY HOURS : MINS
8. DATE OF BIRTH (Mo., Day, Yr.) April 30, 1935		9a. STATE OF BIRTH (If not U.S.A., name country) Illinois		9b. CITIZEN OF WHAT COUNTRY U.S.A.	10. Decedent's Education. Specify highest grade completed. 15	11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married
12. SURVIVING SPOUSE (If wife, give maiden name) Jerold A. Finders		13. SOCIAL SECURITY NUMBER ██████-2487		14a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Realtor		14b. KIND OF BUSINESS OR INDUSTRY Real Estate
15a. RESIDENCE—STATE Nevada		15b. COUNTY Douglas	15c. CITY, TOWN, OR LOCATION Minden		15d. STREET AND NUMBER 1285 Halter Ct.	15e. INSIDE CITY LIMITS (Specify Yes or No) Yes
16. FATHER—NAME First Middle Last Vergil C. Bufkin			17. MOTHER—MAIDEN NAME First Middle Last Edith C. Abbott			
18a. INFORMANT—NAME (Type or Print) Jerold A. Finders			18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 1285 Halter Ct., Minden, Nevada 89423			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		19b. CEMETERY OR CREMATORY—NAME Eastside Memorial Park		19c. LOCATION City or Town State Minden, Nevada		
20a. FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such) <i>[Signature]</i>		20b. FUNERAL DIRECTOR LICENSE NUMBER 217	20c. NAME AND ADDRESS OF FACILITY FitzHenry's Carson Valley Funeral 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. (Signature and Title) <i>[Signature]</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>[Signature]</i>			
21b. DATE SIGNED (Mo., Day, Yr.)		21c. HOUR OF DEATH		22b. DATE SIGNED (Mo., Day, Yr.) June 18, 2001	22c. HOUR OF DEATH 1320	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			22d. PRONOUNCED DEAD (Mo., Day, Yr.) ON June 13, 2001		22e. PRONOUNCED DEAD (Hour) AT 1320	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print.) Vernon O. McCarty, Coroner, P.O. Box 11130, Reno, Nevada 89520					23b. LICENSE NUMBER WCC S. 35	
24a. REGISTRAR (Signature) <i>[Signature]</i> Dep.		24b. DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) June 18, 2001		24c. DEATH DUE TO COMMUNICABLE DISEASE 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) Atherosclerotic and valvular heart disease				Interval between onset and death		
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death		
(b) DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death		
(c) DUE TO, OR AS A CONSEQUENCE OF:				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. Hypertension; Parkinson's disease				26. AUTOPSY (Specify Yes or No) No	27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes	
28a. ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)	28b. DATE OF INJURY (Mo., Day, Yr.)	28c. HOUR OF INJURY	28d. DESCRIBE HOW INJURY OCCURRED			
28e. INJURY AT WORK (Specify Yes or No)	28f. PLACE OF INJURY —At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION.	28h. STREET OR R.F.D. No.	28i. CITY OR TOWN	
					28j. STATE	

No.169138

STATE REGISTRAR

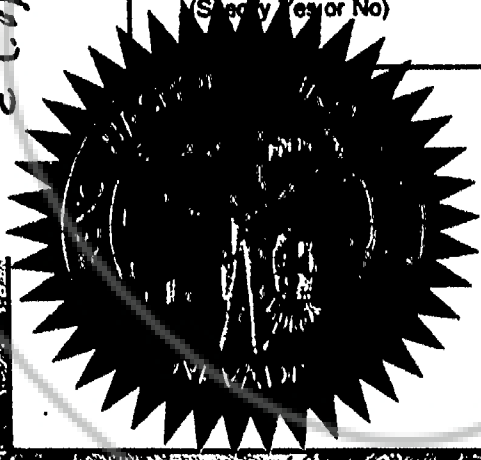
This is to certify that the above is a true and legal copy of the certificate on file in this office.

Deputy Registrar: *[Signature]*

Date: **JUN 27 2001**

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

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COPY

REQUESTED BY
Stewart Title of Douglas County
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2003 APR 25 AM 10: 57

WERNER CHRISTEN
RECORDER

\$ 16.00 PAID B2 DEPUTY

0574623

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