

A.P.N. # 1318-22-002-030
ESCROW NO. 030202955
RECORDING REQUESTED BY:
STEWART TITLE COMPANY

REQUESTED BY
Stewart Title of Douglas County

IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2003 SEP 23 PM 3:40

WERNER CHRISTEN
RECORDER

s/lc PAID *KZ* DEPUTY

WHEN RECORDED MAIL TO:

MRS. WEDIN
P.O. BOX 11745
ZEPHYR COVE, NV 89448

(Space Above For Recorder's Use Only)

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA }
 } ss.
COUNTY OF Douglas }

MARY WEDIN /EUGENE, of legal age, being first duly sworn, deposes and says: That DOUGLAS E. WEDIN, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as DOUGLAS E. WEDIN named as one of the parties in that certain Grant DEED dated May 14, 1993 executed by Douglas E. Wedin and Mary L. Wedin, * to Douglas E. Wedin and Mary L. Wedin, ** as joint tenants, recorded as Instrument No. 307582 on May 19, 1993 in Book 0593 Page 3734, of Official Records of Douglas County, Nevada, covering the following described property situated in Douglas County, State of Nevada:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF
*husband and wife, Laurie E. Wedin, an unmarried woman,
Thomas R. Utzig, an unmarried man
**husband and wife and Laurie E. Wedin, an unmarried woman as joint tenants as to an undivided 3/4 interest and Thomas R. Utzig, an unmarried man as to the remaining 1/4 interest

DATE: September 16, 2003

Mary L. Wedin
MARY L. WEDIN

STATE OF Nevada }
 } ss.
COUNTY OF Douglas }



MARY H. KELSH
Notary Public - State of Nevada
Appointment Recorded in Douglas County
No: 98-49567-5 - Expires November 5, 2006

This instrument was acknowledged before me on 9-17-03
by, MARY L. WEDIN

Signature *Mary H. Kelsh*

Notary Public (One Inch Margin on all sides of Document for Recorder's Use Only)

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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	
1. DECEASED—NAME First Middle Last Douglas Eugene WEDIN		2. DATE OF DEATH (Month, Day, Year) December 7, 2002	
3b. Zephyr Cove		3a. Douglas	
3c. 155 A Kahle		4. Male	
RACE—(e.g., White, Black, American Indian, etc.) (Specify) 5. White		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc. 6.	
STATE OF BIRTH (If not U.S.A., name country) 9a. Wisconsin		CITIZEN OF WHAT COUNTRY 9b. U.S.A.	
SOCIAL SECURITY NUMBER 13. ██████████-7187		Decedent's Education. Specify highest grade completed. 10. 12	
RESIDENCE—STATE 15a. Nevada		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) 11. Married	
COUNTY 15b. Douglas		SURVIVING SPOUSE (If wife, give maiden name) 12. Mary Davis	
CITY, TOWN, OR LOCATION 15c. Zephyr Cove		KIND OF BUSINESS OR INDUSTRY 14b. Airplane Manufacturing	
STREET AND NUMBER 15d. 155 A Kahle		INSIDE CITY LIMITS (Specify Yes or No) 15e. No	
FATHER—NAME First Middle Last 16. Emil J. Wedin		MOTHER—MAIDEN NAME First Middle Last 17. Ruth Elizabeth Quarfoot	
INFORMANT—NAME (Type or Print) 18a. Mary Wedin		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 18b. P.O. Box 11745, Zephyr Cove, NV 89448	
BURIAL, CREMATION, REMOVAL, OTHER (Specify) 19a. Cremation		CEMETERY OR CREMATORY—NAME 19b. Walton's Sierra Crematory	
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such) 20a. <i>[Signature]</i>		LOCATION City or Town State 19c. Carson City, NV	
FUNERAL DIRECTOR LICENSE NUMBER 20b. 9		NAME AND ADDRESS OF FACILITY 20c. Walton's Douglas County Mortuary	
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>	
DATE SIGNED (Mo., Day, Yr.) 21b. 12/10/02		HOUR OF DEATH 21c. 1110	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) 21d.		DATE SIGNED (Mo., Day, Yr.) 22b.	
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print.) 23a. Steven L. Brooks, M.D., P.O. Box 5370, Stateline, NV 89449		HOUR OF DEATH 22c.	
REGISTRAR 24a. (Signature) <i>[Signature]</i>		PRONOUNCED DEAD (Mo., Day, Yr.) 22d. ON	
DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) 24b. December 10, 2002		PRONOUNCED DEAD (Hour) 22e. AT	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		DEATH DUE TO COMMUNICABLE DISEASE 24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
PART I (a) Lung Cancer DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death : 11 mos.	
(b) Metastasis of Tumor/Cancer DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death : 11 mos.	
(c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part 1.		Interval between onset and death :	
PART II		AUTOPSY (Specify Yes or No) 26. No	
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) 28a.		WAS CASE REFERRED TO CORONER (Specify Yes or No) 27. No	
DATE OF INJURY (Mo., Day, Yr.) 28b.		DESCRIBE HOW INJURY OCCURRED 28d.	
HOUR OF INJURY 28c. M		INJURY AT WORK (Specify Yes or No) 28e.	
PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify) 28f.		LOCATION. STREET OR R.F.D. No. CITY OR TOWN STATE 28g.	



STATE REGISTRAR

No. 230423

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

[Signature]
Sylvia

Date Issued: DEC 10 2002 0590986 State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

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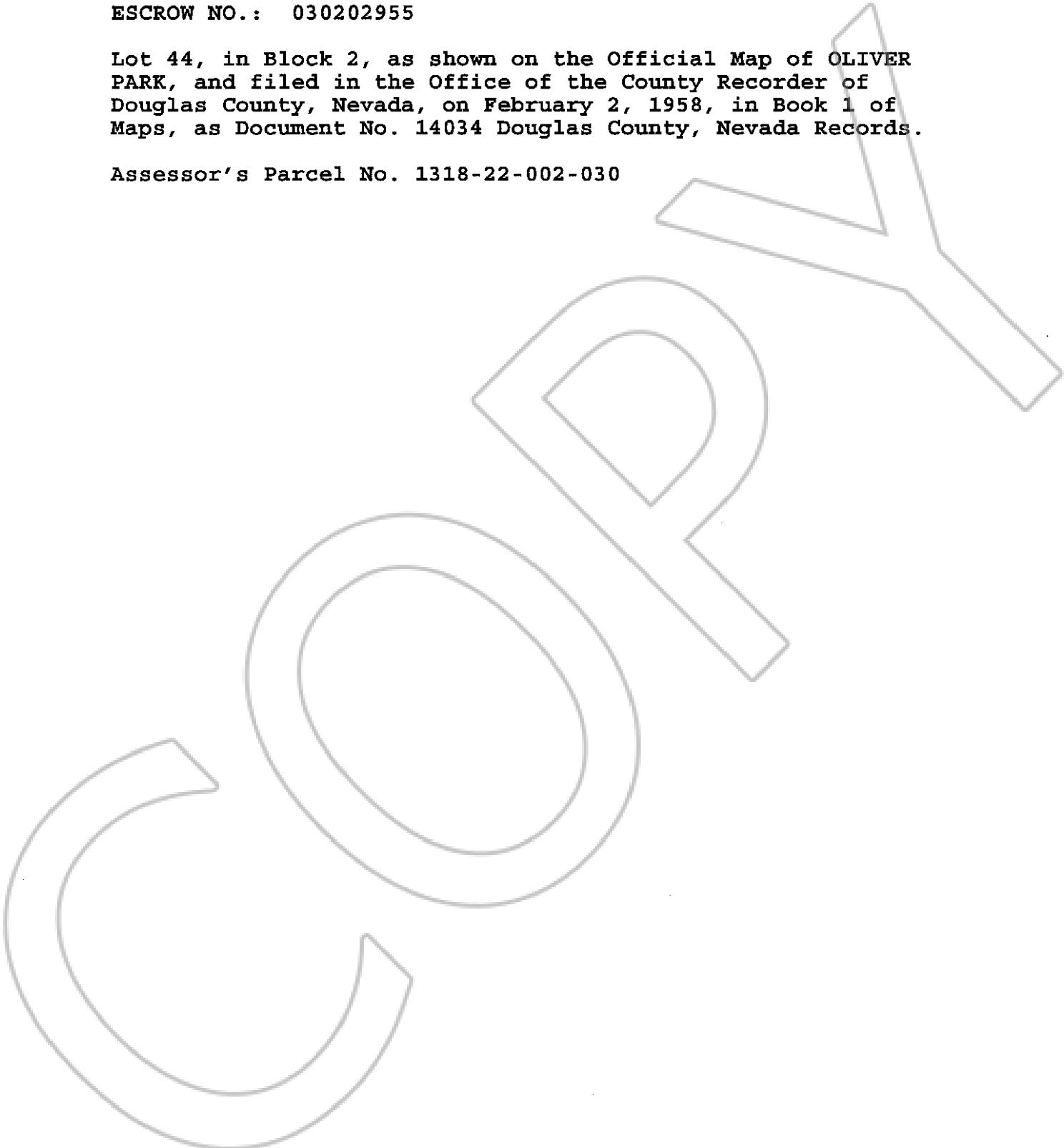
EXHIBIT "A"

LEGAL DESCRIPTION

ESCROW NO.: 030202955

Lot 44, in Block 2, as shown on the Official Map of OLIVER PARK, and filed in the Office of the County Recorder of Douglas County, Nevada, on February 2, 1958, in Book 1 of Maps, as Document No. 14034 Douglas County, Nevada Records.

Assessor's Parcel No. 1318-22-002-030



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