

ATTN: Vicki
Evan Beavers & Assoc
1650 Hwy 395 Ste 101
Minden NV 89423

APN 1220-10-401-006

REQUESTED BY
Evan Beavers & Assoc
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2003 OCT 15 AM 11:12

WERNER CHRISTEN
RECORDER

\$17.00 PAID K Z DEPUTY

WHEN RECORDED PLEASE RETURN TO:

Clifford C. Cate, Esq.
144 North Glendale Avenue, Suite 300
Glendale, California 91206-4903

**AFFIDAVIT OF SURVIVING JOINT TENANT
TERMINATING JOINT TENANCY**

STATE OF CALIFORNIA)
) ss.
COUNTY OF LOS ANGELES)

PATRICIA ANNETTE KERMODE does hereby swear under penalty of perjury that the assertions of this affidavit are true, and declares the following:

1. Affiant is over the age of 21 years and competent to be a witness as to the matters hereinafter stated;
2. Affiant is the surviving spouse of RICHARD H. KERMODE, deceased;
3. RICHARD HENRY KERMODE died in the County of Los Angeles, State of California, on March 21, 2001. A certified copy of the Death Certificate of RICHARD HENRY KERMODE is attached to this Affidavit, marked Exhibit "A";
4. On August 27, 1993, Affiant and RICHARD H. KERMODE acquired title as joint tenants with the right of survivorship to a parcel of real property situated in Douglas County, Nevada, by Joint Tenancy Deed recorded as Document No. 316491 in Book 0893, Page 6404, of the Official Records of Douglas County, Nevada, which property described therein is located in Douglas County, Nevada, commonly known as 1406 Nord Circle, Gardnerville, Nevada. The legal description of the real property is as follows:

0593585
BK 1003PG7053

That portion of the Southwest 1/4 of Section 10,
Township 12 North, Range 20 East, M.D.B.&M., Douglas
County, Nevada more particularly described as follows:

Parcel No. 2, as shown on that certain Parcel Map for
JOHN ROBINSON, filed for record in the office of the
County Recorder of Douglas County, Nevada, on January
24, 1978, Page 1466, Document No. 17005, of Official
Records.

APN 1220-10-401-006

Together with all singular the tenements, hereditaments
and appurtenances thereunto belonging or in anywise
appertaining, and any reversions, remainders, rents,
issues or profits thereof.

(This legal description was previously recorded in Joint Tenancy Deed, document
number 316491, Book 893, page 6404.)

5. At the time of death of RICHARD HENRY KERMODE's title to the real
property described in paragraph 4 above continued to be held by RICHARD H.
KERMODE and PATRICIA A. KERMODE as joint tenants with the right of
survivorship. As a result of the death of RICHARD HENRY KERMODE and the joint
tenancy form of title, the real property described in paragraph 4 above is now owned by
PATRICIA ANNETTE KERMODE.

DATED this 23rd day of September 2003.

Patricia Annette Kermode
PATRICIA ANNETTE KERMODE
Patricia A. Kermode

SUBSCRIBED and SWORN to before me
this 23rd day of September, 2003.

Linda M. Hackelton
NOTARY PUBLIC

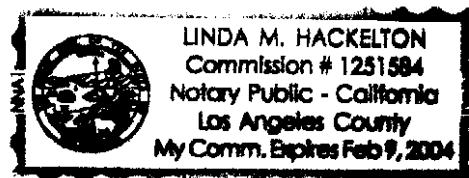




EXHIBIT A

0593585

BK1003PG7055

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

CERTIFICATE OF DEATH

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 1/00)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) RICHARD		2. MIDDLE HENRY		3. LAST (FAMILY) KERMODE			
4. DATE OF BIRTH M/M/D/D/C/C/Y 10/04/1929		5. AGE YRS. 71		6. SEX M		7. DATE OF DEATH M/M/D/D/C/C/Y 03/21/2001	
9. STATE OF BIRTH CALIFORNIA		10. SOCIAL SECURITY NO. 1890		11. MILITARY SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS MARRIED	
14. RACE CAUCASIAN		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER CAL TRANS		13. EDUCATION—YEARS COMPLETED 18	
17. OCCUPATION CIVIL ENGINEER		18. KIND OF BUSINESS TRANSPORTATION		19. YEARS IN OCCUPATION 45			
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) 1603 RAMONA AVE							
21. CITY GLENDALE		22. COUNTY LOS ANGELES		23. ZIP CODE 91208		24. YRS IN COUNTY 71	
25. STATE OR FOREIGN COUNTRY CA		26. NAME, RELATIONSHIP PATRICIA A KERMODE - WIFE					
27. ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 1603 RAMONA AVE GLENDALE CA 91208		28. NAME OF SURVIVING SPOUSE—FIRST PATRICIA					
29. MIDDLE ANNETTE		30. LAST (MAIDEN NAME) COLGROVE				34. BIRTH STATE MICHIGAN	
31. NAME OF FATHER—FIRST HENRY		32. MIDDLE STEPHEN		33. LAST KERMODE		35. BIRTH STATE ENGLAND	
36. NAME OF MOTHER—FIRST GWEN		37. MIDDLE M		38. LAST (MAIDEN) KENT		39. BIRTH STATE ENGLAND	
39. DATE M/M/D/D/C/C/Y 04/02/2001		40. PLACE OF FINAL DISPOSITION FOREST LAWN MEMORIAL PARK - 6300 FOREST LAWN DR LOS ANGELES CA 90068					
41. TYPE OF DISPOSITION BURIAL		42. SIGNATURE OF EMPLOYEE <i>James Arce</i>		43. LICENSE NO. 8377			
44. NAME OF FUNERAL DIRECTOR FOREST LAWN HOLLYWOOD HILLS		45. LICENSE NO. FD 904		46. SIGNATURE OF LOCAL REGISTRAR <i>Mark ...</i>		47. DATE M/M/D/D/C/C/Y 03/23/2001	
101. PLACE OF DEATH VERDUGO VISTA CONV HOSP		102. IF HOSPITAL, SPECIFY CHG. <input type="checkbox"/> IP <input type="checkbox"/> LEVOP <input type="checkbox"/> POA		103. FACILITY OTHER THAN HOSPITAL <input checked="" type="checkbox"/> CONV. HOSP. <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER		104. COUNTY LOS ANGELES	
105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) 3050 MONTROSE AVE		106. CITY LA CRESCENTA				107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D) (A) CARDIORESPIRATORY ARREST	
108. IMMEDIATE CAUSE (B) METASTATIC ADENOCARCINOMA		109. TIME INTERVAL BETWEEN ONSET AND DEATH HRS		110. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
109. DUE TO (C) SUPERFICIAL MALIGNANT MELANOMA ON BACK		110. TIME INTERVAL BETWEEN ONSET AND DEATH 3 WKS		111. MOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
110. DUE TO (D)		110. TIME INTERVAL BETWEEN ONSET AND DEATH 2 MOB		112. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
111. DUE TO		111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 SPONTANEOUS PATHOLOGICAL HIP FRACTURE SECONDARY TO OSTEOPOROSIS			
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. HIP REPLACEMENT 11/27/2000, MELANOMA REMOVAL 01/12/2001							
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CLINICAL RECORDS. DECEDENT ATTENDED SINCE M/M/D/D/C/C/Y 11/27/1990		115. SIGNATURE AND TITLE OF CERTIFIER <i>Nasreen Sabir MD</i>		116. LICENSE NO. A051753		117. DATE M/M/D/D/C/C/Y 3/21/01	
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP NASREEN SABIR, MD 1808 VERDUGO BLVD, #305, GLENDALE, CA 91208		120. INJURY AT WORK? (ST. INJURY DATE M/M/D/D/C/C/Y) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		122. HOUR		123. PLACE OF INJURY	
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)							
126. SIGNATURE OF CORONER OR DEPUTY CORONER <i>1769</i>				127. DATE M/M/D/D/C/C/Y		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	
STATE REGISTRAR		A B C D E F G H		FAX AUTH. # 273/21302		CENSUS TRACT 090426586	

BK 1003P67056
0593585

This is a true certified copy of the record filed in the County of Los Angeles Department of Health Services if it bears the Registrar's signature in purple ink.

Director of Health Services and Registrar

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

