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OFFICIAL RECORD

Requested By:
CARR MCCLELLAN INGERSOLL

ETAL
Douglas County - NV
Werner Christen - Recorder

Page: 1 of 2 Fee: 15.00
BK-0205 PG-8493 RPTT: 0.00



APN B18-15-410-013

When recorded return to:
✓ CARR, McCLELLAN, INGERSOLL, THOMPSON & HORN
Professional Law Corporation
Steven D. Anderson, Esq.
Post Office Box 513
Burlingame, CA 94011-0513

AFFIDAVIT OF SUCCESSOR OF TRUSTEE

STATE OF CALIFORNIA)
) ss.
COUNTY OF SAN MATEO)

I, EDWIN S. TANNER, duly sworn, depose and say:

The MARIE JO TANNER named as the decedent in the attached certified copy of Certificate of Death, attached hereto and incorporated herein by reference, is the same person as MARIE JEPSEN TANNER, named as one of the trustees of THE TANNER FAMILY TRUST dated May 11, 1981, as amended (the "Trust"), which Trust is the owner of that certain real property described in the following deed:

Grant Deed dated May 11, 1981, from MARIE JEPSEN TANNER, also known as MARIE JO TANNER, MARIE JO JEPSEN, MARIE JO JEPSEN TANNER and MARIE JO GEPSON TANNER to EDWIN S. TANNER and MARIE JEPSEN TANNER, or the survivor, as Trustees under that certain Tanner Family Trust dated May 11, 1981, recorded on January 22, 1988, in the County of Douglas, State of Nevada, under Recorder's Serial Number 171259, Book 188, Page 2717 of Official Records, conveying the real property situated in the County of Douglas, State of Nevada, more particularly described as follows:

Lots 15 and 16 according to the Second Amended Plat of the Elks Subdivision; being a portion of Sections 15 and 16, Township 13 North, Range 18 East, M.D.B. & M., Douglas County, Nevada, filed June 5, 1952, as File No. 8537, together with all personal property and improvements located thereon.

Parcel No. 1318-15-410-013
Commonly known as: 432 Elks Avenue, Elk Point, Nevada.

Pursuant to the provisions of the Trust Agreement, as a result of the death of MARIE JEPSEN TANNER, the undersigned, EDWIN S. TANNER, is now the Trustee of the Trust.

Dated: February 2, 2005

Edwin S. Tanner, Trustee
EDWIN S. TANNER, Trustee

Subscribed and sworn to before me this 2nd day of February, 2005, by Edwin S. Tanner, personally known to me or proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Rita Koschnick
Notary Public, State of California



COUNTY of SANTA CLARA

SAN JOSE, CALIFORNIA

CERTIFICATE OF DEATH 04300-001549 496

STATE FILE NUMBER		17A. NAME OF DECEDENT—FIRST		17B. MIDDLE	17C. LAST	LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
		Marie		JO	Tanner	March 2, 1987 1800	
101 DECEDENT PERSONAL DATA	3. SEX	4. RACE/ETHNICITY	5. SPANISH/SPANISH OR MEX	6. DATE OF BIRTH		7. AGE	8. UNDER 1 YEAR MONTHS
	Female	White		Aug. 4, 1933		53 YEARS	IF UNDER 24 HOURS HOURS MINUTES
	8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		9. NAME AND BIRTHPLACE OF FATHER		10. BIRTH NAME AND BIRTHPLACE OF MOTHER		
CA		Hans Jepsen NV		Rachel Lower Korea			
11A. COUNTRY OF WHAT COUNTRY		11B. IF DECEASED WAS EVER IN MILITARY (GIVE DATES OF SERVICE)		12. SOCIAL SECURITY NUMBER	13. MARITAL STATUS	14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER SPHN NAME)	
USA		19 TO 19		4810	Married	Edwin Tanner	
15. PRIMARY OCCUPATION		16. NUMBER OF YEARS THIS OCCUPATION		17. EMPLOYER IF SELF-EMPLOYED, SO STATE		18. KIND OF INDUSTRY OR BUSINESS	
Tour Director		11		Travellers International		Travel	
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)		19B.		19C. CITY OR TOWN			
106 San Benito Ave.				Atherton			
19D. COUNTY		19E. STATE		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP			
San Mateo		CA		Edwin Ted Tanner - Husband 106 San Benito Ave. Atherton, CA 94025			
21A. PLACE OF DEATH		21B. COUNTY					
Stanford Medical Center		Santa Clara					
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION)		21D. CITY OR TOWN					
300 Pasteur Dr.		Palo Alto					
22. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		23. ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C		24. APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH		25. WAS DEATH REPORTED TO CORONER?	
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDER- LYING CAUSE LAST.		(A) CARDIORESPIRATORY ARREST		2 WEEKS		NO	
		(B) UPPER GI BLEEDING				26. WAS BIOPSY PERFORMED?	
		(C) METASTATIC ADENOCARCINOMA OVARY		2 YEARS		YES	
						27. WAS AUTOPSY PERFORMED?	
						NO	
28. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A.		29. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION		30. DATE BORN		31. PHYSICIAN'S LICENSE NUMBER	
1830		LAPAROTOMY		3/3/87		622804	
32A. I CERTIFY THAT DEATH OCCURRED AT THE NORMAL DATE AND PLACE STATED FROM THE CAUSES STATED.		32B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE		32C. DATE BORN		32D. PHYSICIAN'S LICENSE NUMBER	
6/6/58		FB. McDOWELL, M.D.		3/3/87		622804	
33. I ATTENDED DECEDENT SINCE I LAST SAW DECEDENT ALIVE (ENTER MO., DA., YR.)		33B. TYPE PHYSICIAN'S NAME AND ADDRESS					
3/2/87		FB. McDOWELL, 1300 CRANE, MENLO PARK, CA 94025					
34. SPECIFY ACCIDENT, SUICIDE, ETC.		35. PLACE OF INJURY		36. INJURY AT WORK		37. DATE OF INJURY—MONTH, DAY, YEAR	
38. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)		39. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
39A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HAD AN ENQUIRY-INVESTIGATION		39B. CORONER—SIGNATURE AND DEGREE OR TITLE		39C. DATE BORN			
40. DEPOSITION		41. DATE—MONTH, DAY, YEAR		42. NAME AND ADDRESS OF CEMETERY OR CREMATORIUM		43. EMERALD'S LICENSE NUMBER AND SIGNATURE	
Burial		3/6/87		Alta Mesa Memorial Park Palo Alto, CA		N/A	
44A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		44B. LICENSE NO.		45. LOCAL REGISTRAR—SIGNATURE		46. DATE ACCEPTED BY LOCAL REGISTRAR	
Spangler Mortuaries		LA		F-927		Stephen A. Cray M.D. Inc. MAR 4 1987	
47. STATE REGISTRAR		A.		B.		C.	
48-11 (7-88)		D.		E.		F.	



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CERTIFIED COPY OF VITAL RECORD



STATE OF CALIFORNIA }
COUNTY OF SANTA CLARA } SS

I, Brenda Davis, Santa Clara County Clerk-Recorder, do hereby certify that this is a true and exact reproduction of the document officially registered in my office.
Witness my hand and official seal this 28 day of February, 2005

Brenda Davis
BRENDA DAVIS, COUNTY CLERK-RECORDER
By *[Signature]*
Deputy



This copy not valid unless prepared on engraved border displaying seal and signature of Deputy County Clerk-Recorder.