

APN: 1420-18-301-007

RECORDING REQUESTED BY AND AFTER
RECORDING MAIL THIS DOCUMENT TO:

✓ Rachelle J. Nicolle
Attorney at Law
1662 Highway 395, Suite 214
Minden, NV 89423

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 4 Fee: 17.00
BK-0405 PG- 2750 RPTT: 0.00



MAIL TAX STATEMENTS TO:

Charles Leo Morton, Trustee
CHARLES LEO MORTON AND
JANET LEE MORTON FAMILY TRUST
3262 Plymouth Drive
Carson City, NV 89702

**NOTICE
OF DEATH OF CO-TRUSTEE FOR THE
CHARLES LEO MORTON AND JANET LEE
MORTON FAMILY TRUST
DATED NOVEMBER 25, 1997**

CHARLES LEO MORTON, being of legal age, being first duly sworn,
deposes and says:

1. That on November 25, 1997 Charles Leo Morton and Janet Lee Morton executed a Declaration of Trust entitled the CHARLES LEO MORTON AND JANET LEE MORTON FAMILY TRUST. The terms of the Charles Leo Morton and Janet Lee Morton Family Trust empower me, the sole surviving Co-Trustee, to act as the sole Trustee for the Trust whenever Janet Lee Morton is no longer serving.
2. That I, Charles Leo Morton, am the sole surviving Co-Trustee of the CHARLES LEO MORTON AND JANET LEE MORTON FAMILY TRUST Dated November 25, 1997. I hereby affirm my intention to continue to act as the sole remaining Co-Trustee.

3. That the terms of this Trust empower me to act as the sole Trustee for the Trust after the death of Janet Lee Morton.
4. That I hereby declare and affirm that co-trustee Janet Lee Morton died October 24, 1004. I also declare and affirm that Janet Lee Morton, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Janet Lee Morton, Co-Trustee of the CHARLES LEO MORTON AND JANET LEE MORTON FAMILY TRUST Dated November 25, 1997.
5. Janet Lee Morton is one of the named Co-Trustee parties in that certain QuitClaim Deed dated November 25, 1997 to Charles Leo Morton and Janet Lee Morton, Co-Trustees of the CHARLES LEO MORTON AND JANET LEE MORTON FAMILY TRUST Dated November 25, 1997 and recorded on December 8, 1997, in Book 1297, Page 1535, Document No. 0427929 of the official records of Douglas County, Nevada covering the property commonly known as 3262 Plymouth Drive. Carson City, Douglas County, Nevada 89702 and described below:

A parcel of land located in the Northeast Quarter of the Southwest Quarter of Section 18, Township 14 North, Range 20 East. M D B &M and more particularly described as follows

COMMENCING at the North Quarter corner of said Section 18, proceed South 0° 02' 46" West 3505 49 feet, along the Quarter Section line and South 89° 55' 34" West, 60 00 feet to the true point of beginning, thence South 0° 02' 46" West, 139 01 feet, to the Southeast corner of the parcel, thence South 89° 55' 34" West 313 35 feet, to the southwest corner of the parcel, thence North 0° 02' 46" East, 139 01 feet to the Northwest corner of the parcel, thence North 89° 55' 34" East 313 35 feet to the true point of beginning.

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6. That pursuant to the terms of the Trust, I have power to grant Power of Attorney to handle the above-described real estate to Charles Wayne Morton.



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7. I make this affirmation under penalty of perjury in the County of Douglas, Nevada, on dated March 30, 2005.

Charles Leo Morton

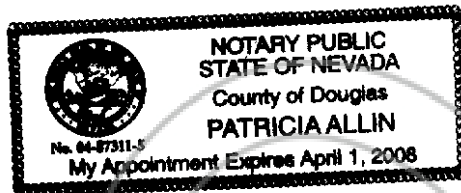
Charles Leo Morton, Trustee
CHARLES LEO MORTON AND JANET
LEE MORTON FAMILY TRUST Dated
November 25, 1997

CERTIFICATE OF NOTARY PUBLIC

State of Nevada)

County of Douglas)

Signed and sworn to before me on March 30, 2005 by Charles Leo Morton.



Patricia S. Allin
NOTARY PUBLIC



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STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

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	
DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)	
1. Janet Lee MORTON		2. October 24, 2004	
CITY, TOWN OR LOCATION OF DEATH		COUNTY OF DEATH	
3b. Carson City		3a. Douglas	
HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)		SEX	
3c. 3262 Plymouth Dr.		4. Female	
RACE—(e.g., White, Black, American Indian, etc.) (Specify)		DATE OF BIRTH (Mo., Day, Yr.)	
5. White		October 4, 1930	
STATE OF BIRTH (If not U.S.A., name country)		CITY OF WHAT COUNTRY	
9a. California		9b. U.S.A.	
SOCIAL SECURITY NUMBER		DECEDENT'S EDUCATION—Specify highest grade completed.	
13. ██████████ 5973		10. 12	
USUAL OCCUPATION (Give kind of work done during most of Working Life, Even if Retired)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	
14a. Telephone Operator		11. Married	
RESIDENCE—STATE		SURVIVING SPOUSE (If wife, give maiden name)	
15a. Nevada		12. Charles Morton	
CITY, TOWN, OR LOCATION		KIND OF BUSINESS OR INDUSTRY	
15b. Douglas		14b. Communications	
FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last	
16. Grant Bair		17. Wilhamina Leitzman	
INFORMANT—NAME (Type or Print)		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)	
18a. Charles Morton		18b. 3262 Plymouth Dr., Carson City, Nevada 89705	
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CENETERY OR CREMATORY—NAME	
19a. Cremation		19b. Walton's Sierra Crematory	
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		LOCATION City or Town State	
20a. <i>Jimmy Desmond</i>		19c. Carson City, Nevada	
FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY	
20b. 99		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)		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)	
DATE SIGNED (Mo., Day, Yr.)		DATE SIGNED (Mo., Day, Yr.)	
21b. 10/27/04		22b. 10/27/04	
HOUR OF DEATH		HOUR OF DEATH	
21c. 1247		22c. 1247	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		PRONOUNCED DEAD (Mo., Day, Yr.)	
21d. Jeffrey Basa, M.D., 2874 N. Carson St. #200, Carson City, NV 89706		22d. ON	
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print)		LICENSE NUMBER	
23a. Jeffrey Basa, M.D., 2874 N. Carson St. #200, Carson City, NV 89706		23b. 8079	
REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)	
24a. (Signature) <i>Vera R. Kochamp</i>		24b. October 28, 2004	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		DEATH DUE TO COMMUNICABLE DISEASE	
PART 1 (a) Congestive Heart Failure		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(b) CAD		Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(c)		Interval between onset and death	
PART 3 OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part 1.		AUTOPSY (Specify Yes or No)	
28. No		27. Yes	
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)	
28a. 28b.		28c.	
HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED	
28d. M		28d.	
INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)	
28e. 28f.		28g.	
LOCATION.		STREET OR R.F.D. No.	
28g.		CITY OR TOWN STATE	

TYPE OR PRINT IN PERMANENT INK
 PRECEDENT
 IF DEATH OCCURRED IN INSTITUTION OR HOSPITAL, CHECK BOX INDICATING COMPLETION OF MEDICAL RECORDS
 PRESENTS
 POSITION
 TIFIER
 CONDITIONS ANY OTHER CAUSE TO IMMEDIATE CAUSE INCLUDING THE FOLLOWING THE LAST
 CAUSE OF DEATH

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CERTIFIED COPY OF VITAL RECORDS

No. 274009

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED:

OCT 28 2004

Advent
 STATE REGISTRAR

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE