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DOC # 0653231
08/25/2005 08:04 AM Deputy: KLJ
OFFICIAL RECORD
Requested By:
MARK A MARSH ESQ

Assessor's Parcel Number: 1420-18-510-030

Recording Requested By:

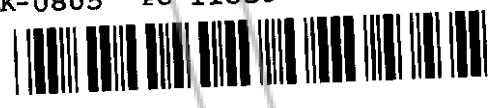
✓ Name: MARK Marsh

Address: PO Box 3934

City/State/Zip CARSON City, NV 89702-
3934

Real Property Transfer Tax: _____

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 5 Fee: 18.00
BK-0805 PG-11839 RPTT: 0.00



Affidavit

(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies)

This cover page must be typed or legibly hand printed.

1 **AFFIDAVIT TERMINATING COMMUNITY PROPERTY TITLE**

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3
4 STATE OF NEVADA)
5 SS:
6 CARSON CITY)

7
8 WANITA GRACE DISNEY does hereby swear under penalty of perjury that the assertions of
9 this Affidavit are true, and declares the following:

- 10 1. WANITA GRACE DISNEY is the surviving spouse of ROBERT W. DISNEY,
11 deceased.
- 12 2. ROBERT W. DISNEY died in Carson City, State of Nevada, on October 23, 2004. A
13 certified copy of the Certificate of Death is attached to this Affidavit, marked Exhibit
14 "A."
- 15 3. On October 11, 2001, the undersigned and ROBERT W. DISNEY acquired title
16 community property with right of survivorship, to a parcel of real property situated in
17 Douglas County, Nevada, by Grant, Bargain, Sale, Deed recorded as Document No.
18 394289 of the official records of Douglas County, Nevada. The legal description of the
19 real property is as follows:

20
21 Lot 2, in Block N, as set forth on that certain Final Map of SUNRIDGE HEIGHTS,
22 PHASES 7B and 9, a Planned Unit Development, recorded in the office of the
23 Douglas County Recorder on September 5, 1995 in Book 995, page 410, as
24 Document No. 369825, and by Certificate of Amendment recorded August 14, 1996,
25 in Book 896, Page 2588, as Document No. 394289.

26 A.P.N. 21-531-02

- 27 4. At the time of Death of ROBERT W. DISNEY, title to the real property described in
28 paragraph 3, above continued to be held by ROBERT W. DISNEY and WANITA
GRACE DISNEY, as community property. As a result of the death of ROBERT W.
DISNEY and the community property with right of survivorship form of title, the real



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property described in paragraph 3, above is now owned by WANITA GRACE
DISNEY.

DATED this 5th day of Aug, 2005.

WA Disney
Wanita Disney
WANITA GRACE DISNEY
938 RANCHVIEW CIRCLE
CARSON CITY, NV 89705

SUBSCRIBED and SWORN to before me
This 5th day of August, 2005.

Krista L Heald

NOTARY PUBLIC



KRISTA L. HEALD
NOTARY PUBLIC
STATE OF NEVADA
Date Appointment Exp: 03-11-2009
Certificate No: 05-95265-3



EXHIBIT

“A”



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		DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
1. Robert William DISNEY D.V.M.		2. October 23, 2004		3. Carson City		COUNTY OF DEATH	
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)		If Hosp. or Inst. Indicate DOA, OP, Emer. Rm. Inpatient (Specify)		SEX	
3b. Carson City		3c. Carson-Tahoe Hospital		3e. Emergency Rm.		4. Male	
RACE—(e.g., White, Black, American Indian, etc.) (Specify)		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, specify Mexican, Cuban, Puerto Rican, etc.		AGE—Last Birthday (Years)		DATE OF BIRTH (Mo., Day, Yr.)	
5. White		6.		7a. 75		8. August 3, 1929	
STATE OF BIRTH (If not U.S.A., name country)		CITIZEN OF WHAT COUNTRY		Decedent's Education. Specify highest grade completed.		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	
9a. Kansas		9b. U.S.A.		10. 20		11. Married	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)		KIND OF BUSINESS OR INDUSTRY			
13. ██████████ 5709		14a. Veterinarian		14b. Animal Hospital			
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		STREET AND NUMBER	
15a. Nevada		15b. Douglas		15c. Carson City		15d. 938 Ranchview Cir.	
INSIDE CITY LIMITS (Specify Yes or No)		FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last		15e. Yes	
16. Robert Disney		17. Mayne Nelson		INFORMANT—NAME (Type or Print)			
18a. Wanita Disney		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)					
18b. 938 Ranchview Circle, Carson City, Nevada 89705		BURIAL, CREMATION, REMOVAL, OTHER (Specify)					
19a. Cremation		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State		19c. Carson City, Nevada	
FUNERAL DIRECTOR—SIGNATURE (Of Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY			
20a. <i>[Signature]</i>		09		20b. 1281 N. Roop St., Carson City, Nevada 89706			
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.		21b. DATE SIGNED (Mo., Day, Yr.)		21c. HOUR OF DEATH		21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)	
21a. <i>[Signature]</i>		21b. 10/16/04		21c. 10:15-04		21d. Ruth Beseler, Deputy Coroner, 897 E. Musser Ln., Carson City, NV	
22a. On the basis of examination prior or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated.		22b. DATE SIGNED (Mo., Day, Yr.)		22c. HOUR OF DEATH		22d. ON 10/23/04	
22a. <i>[Signature]</i>		22b. 10/16/04		22c. 2005		22d. AT 2005	
23a. Ruth Beseler, Deputy Coroner, 897 E. Musser Ln., Carson City, NV		23b. 9307		LICENSE NUMBER			
REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		DEATH DUE TO COMMUNICABLE DISEASE			
24a. <i>[Signature]</i>		24b. November 3, 2004		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		Interval between onset and death					
PART (a) Anoxic Brain Injury		Interval between onset and death					
DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death					
(b) Attempted Hanging.		Interval between onset and death					
DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death					
(c)		Interval between onset and death					
PART 1 OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part 1.		AUTOPSY (Specify Yes or No)		27. WAS CASE REFERRED TO CORONER (Specify Yes or No)			
26. Yes		27. Yes		ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST.			
28a. Suicide		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED	
28a. 10/23/04		28b. 2005		28c. 2005		28d. Hung self with oxygen tubing.	
INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)		LOCATION		STREET OR R.F.D. No. CITY OR TOWN STATE	
28e. No		28f. At hospital.		28g. 775 Fleischmann Ave., Carson City, Nevada			

TYPE OR PRINT IN PERMANENT BLACK INK

PRECEDENT

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

STATE REGISTRAR

No. 274019

23248

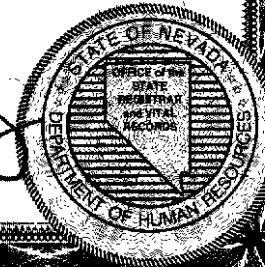
CERTIFIED COPY OF VITAL RECORDS.

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: NOV 03 2004

This copy is not valid unless prepr

[Signature]
STATE REGISTRAR



BK- 0805
PG- 11843