

OFFICIAL RECORD

Requested By:  
DEBRA VANEGAS

Douglas County - NV  
Werner Christen - Recorder

Page: 1 Of 3 Fee: 16.00  
BK-0106 PG- 6436 RPTT: 0.00



APN: 1320-32-210-002  
Recording requested by and mail documents and  
tax statements to:

✓ Name: Charles W. Gillies  
Address: PO Box 579  
City/State/Zip: Minden, NV 89423-0579

AFF111  
Nevada Legal Forms & Books, Inc. (702) 870-8977  
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## AFFIDAVIT-TERMINATION OF JOINT TENANT

### Death of a Joint Tenant

I, Charles W. Gillies, a married man

the Affiant, being of legal age, and being first duly sworn, deposes and says:

That Ruby M. Gillies, an unmarried woman

the Decedent mentioned in the attached certified copy Certificate of Death, is the same person as,

Ruby M. Gillies

named as one of the parties in that certain (type of deed) Individual Grant Deed

dated on the 19th day of August, 1993, and executed by \_\_\_\_\_

Ruby M. Gillies and Debra D. Vanegas

known as Grantor(s), to Ruby M. Gillies and Charles W. Gillies

known as Grantees, as joint tenants, and recorded as instrument number 315469

on the 19th day of August, \_\_\_\_\_, in Book 0893 pg. 3748 of Official

Records of Douglas County, Nevada, covering the following described

property situated in the City of Minden, County of Douglas

State of Nevada. (Set forth legal description and commonly known address)

Lot 3, in Block 1, as shown on the map of WILDROSE SUBDIVISION NO. 2,  
filed for record in the office of the County Recorder of Douglas County,  
State of Nevada, on December 5, 1966. in Book 46, Page 286, as Document  
No. 34825.

A.P.N. 25-241-11 changed to A.P.N. 1320-32-210-002

Commonly known as 1549 Wildrose Drive, Minden, Nevada

**WARNING: THE COUNTY RECORDER MAY CHARGE AN ADDITIONAL FEE IF YOU  
WRITE WITHIN THE 1" MARGINS OF THIS DOCUMENT OR VIOLATE ANY OTHER  
RECORDING REQUIREMENTS IMPOSED BY YOUR COUNTY RECORDER.**

STATE OF NEVADA

CERTIFICATION OF VITAL RECORD

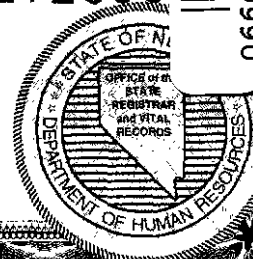
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH
VITAL STATISTICS

STATE OF NEVADA - DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH - SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH

Form with fields for DECEASED NAME (Ruby Madeleine GILLIES), DATE OF DEATH (January 2, 2005), COUNTY OF DEATH (Douglas), RACE (White), BIRTH DATE (December 14, 1915), CITIZENSHIP (U.S.A.), OCCUPATION (Teacher), and SIGNATURES of certifier and registrar.

TYPE OR PRINT IN PERMANENT BLACK INK
DECEDENT
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF PRECEDENCE ITEMS
RELATIVES
POSITION
CERTIFIER
CONDITIONS WHICH GAVE RISE TO IMMEDIATE CAUSE BEING THE UNDERLYING CAUSE LAST
CAUSE OF DEATH

BK- 0106
PG- 6437
0666037 Page: 2 of 3 01/19/2006



STATE REGISTRAR
33882
No. 272055
CERTIFIED COPY OF VITAL RECORDS
DATE ISSUED: JAN - 4 2005
STATE REGISTRAR

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.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

In Witness Whereof, I/We have hereunto set my/our hand(s) this 19th day of January, 2006.

[Signature]  
Signature

Signature

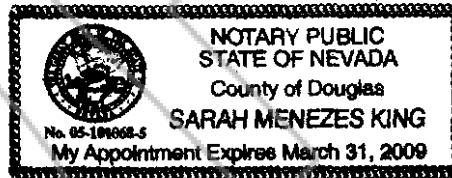
Charles W. Gillies  
Print or type name here

Print or type name here

STATE OF Nevada  
COUNTY OF Douglas  
On this 19 day of January, 20 06, personally appeared  
before me, a Notary Public, Charles W. Gillies

personally known to me OR  proved to me on the basis of satisfactory evidence to be the person(s) described in and who executed the foregoing instrument in the capacity set forth therein, who acknowledged to me that they executed the same freely and voluntarily and for the uses and purposes therein mentioned. Witness my hand and official seal.

Sarah Menezes King  
Notary Public



My commission expires: 03-31-2009

Consult an attorney if you doubt this forms fitness for your purpose.

