

DOC # 0677521
06/19/2006 01:55 PM Deputy: GB
OFFICIAL RECORD
Requested By:
LENDERS FIRST CHOICE

RETURN TO:
Lenders First Choice
3850 Royal Ave
Simi Valley, CA 93063
61-08021356

Douglas County - NV
Werner Christen - Recorder
Page: 1 of 3 Fee: 16.00
BK-0606 PG- 6054 RPTT: 0.00



RECORDING REQUESTED BY:
Alliance Title - Reverse Mortgage
3005 Douglas Blvd Ste 200
Roseville, CA 95661
Phone: (800) 542-4113

AND WHEN RECORDED MAIL TAX STATEMENTS
PARSONS/CARNATION MARIE
121 DAGGETT WAY
STATELINE, NV 89449

Deal No.: 8021356

APN: 1318-26-101-073

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA)) SS.
COUNTY OF DOUGLAS)

PARSONS/CARNATION MARIE of legal age, being first duly sworn, deposes and says:

Burton Wilmer Parsons is the decedent mentioned in the attached certified copy of Certificate of Death, and is the same person as Burton Wilmer Parsons, named as one of the parties in that certain deed dated April 11, 2005, executed by Connie Lufrano AKA Carnation Marie Parsons, a married woman to Burton Wilmer Parsons and Carnation Marie Parsons, husband and wife as joint tenants, recorded on April 19, 2005, as Instrument No. 0642159, Official Records of DOUGLAS County, NEVADA describing the following real property:

Legal Description Attached Hereto as Exhibit "A"

Most Commonly Known As: 121 DAGGETT WAY, STATELINE, NV 89449

Dated: 4-24-2006

Carnation M Parsons
CARNATION MARIE PARSONS

SUBSCRIBED AND SWORN TO before me, the undersigned, a Notary Public in and for said State,

this 24 day of April, 2006

Signature *Shirley M Love*



775-219-5211

(This area for notary stamp)

ATTACH CERTIFIED COPY OF DEATH CERTIFICATE

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		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
1. Burton Wilmer PARSONS		2. January 5, 2006		3a. Douglas			
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/Emr. Rm. Inpatient (Specify)		SEX	
3b. Stateline		3c. 121 Daggett Way		3a. Male		4. Male	
RACE—(e.g., White, Black, American Indian, etc.) (Specify)		Was Decedent of Hispanic Origin? Specify Yes or No. If Yes, specify Mexican, Cuban, Puerto Rican, etc.		AGE—Last Birthday (Years)		DATE OF BIRTH (Mo., Day, Yr.)	
5. White		6. No		7a. 76		8. July 18, 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. Delaware		9b. U.S.A.		9. 9		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		SURVIVING SPOUSE (If wife, give maiden name)	
13. 5942		14a. Switchman		14b. Railroad		12. Carnation M. Brown	
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		STREET AND NUMBER	
15a. Nevada		15b. Douglas		15c. Stateline		15d. 121 Daggett Way	
INSIDE CITY LIMITS (Specify Yes or No)		FATHER—NAME		MOTHER—MAIDEN NAME		15e. NO	
		16. John W. Parsons		17. Alice Burton			
INFORMANT—NAME (Type or Print)		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)					
18a. Carnation M. Parsons		18b. 121 Daggett Way, Stateline, Nevada 89449					
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION		City or Town State	
19a. Cremation		19b. Carson Sierra Crematory		19c. Carson City Nevada			
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY			
20a. Jimmy Bernhardt		20b. 0009		20c. Society 1614 N. Curry St. Carson City, NV 89703			
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)		21b. DATE SIGNED (Mo., Day, Yr.)		21c. HOUR OF DEATH		21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)	
21a. [Signature]		21b. 1/9/06		21c. 00:08		21d. Jorge Perez M.D.	
21e. 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)		21f. DATE SIGNED (Mo., Day, Yr.)		21g. HOUR OF DEATH		21h. PRONOUNCED DEAD (Mo., Day, Yr.)	
21e. [Signature]		21f. [Signature]		21g. [Signature]		21h. [Signature]	
21i. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print)		21j. LICENSE NUMBER		21k. ON		21l. AT	
21i. Jorge Perez M.D. 1000 N. Division St. Suite 104, Carson City, NV 89703		21j. 10108		21k. ON		21l. AT	
REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		DEATH DUE TO COMMUNICABLE DISEASE			
24a. (Signature) Jaimie Ewins		24b. January 9, 2006		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		PART I (a) Non Small-cell lung Cancer		Interval between onset and death			
DUE TO, OR AS A CONSEQUENCE OF:		(b)		Interval between onset and death			
DUE TO, OR AS A CONSEQUENCE OF:		(c)		Interval between onset and death			
PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.		AUTOPSY (Specify Yes or No)		26. No		27. Yes	
26. No		27. Yes					
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED	
28a.		28b.		28c. M		28d.	
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.		28f.		28g.			

STATE REGISTRAR

No. 327816

097840

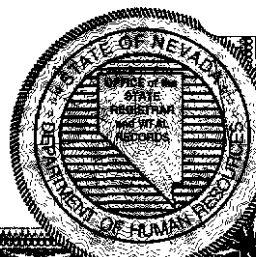
CERTIFIED COPY OF VITAL RECORDS

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: **JAN 09 2006**

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

[Signature]
STATE REGISTRAR



BK- 0606
PG- 6055
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EXHIBIT "A"

ALL THAT REAL PROPERTY SITUATED IN THE COUNTY OF DOUGLAS STATE OF NEVADA, BOUNDED AND DESCRIBED AS FOLLOWS:

THE LAND REFFERRED TO HEREIN IS SITUATED IN THE STATE OF NEVADA, COUNTY OF DOUGLAS, DESCRIBED AS FOLLOWS:

ALL THAT PORTION OF THE NORTHEAST 1/4 OF THE NORTHWEST 1/4 OF SECTION 26, TOWNSHIP 13 NORTH, RANGE 18 EAST, M.B.D. & M., MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCING AT A POINT ON THE SECTION LINE BETWEEN 23 AND 26, TOWNSHIP 13 NORTH, RANGE 18 EAST, M.B.D. & M., WHICH BEARS NORTH 89 DEGREES 46 MINUTES WEST, A DISTANCE OF 163.80 FEET FROM THE 1/4 CORNER BETWEEN AND SECTIONS 23 AND 26; THENCE SOUTH 0 DEGREES 08 MINUTES WEST, A DISTANCE OF 703.53 FEET TO THE TRUE POINT OF BEGINNING; THENCE CONTINUING SOUTH 0 DEGREES 08 MINUTES WEST, A DISTANCE OF 85.00 FEET TO A POINT; THENCE NORTH 89 DEGREES 42 MINUTES WEST, A DISTANCE OF 163.80 FEET TO A POINT; THENCE NORTH 0 DEGREES 08 MINUTES EAST, A DISTANCE OF 85.00 FEET TO A POINT; THENCE SOUTH 89 DEGREES 42 MINUTES EAST, A DISTANCE OF 163.80 FEET TO THE POINT OF BEGINNING.

FOR INFORMATIONAL PURPOSES ONLY: THE APN IS SHOWN BY THE COUNTY ASSESSOR AS 1318-26-101-073; SOURCE OF TITLE IS BOOK 0405, PAGE 7467 (RECORDED 04/19/05)

Per NRS 111.312, this legal description was previously recorded as document # 0642159, book # 0405, page # 7467, on April 19, 2005.

