

APN 1220-15-110-083

RECORDING REQUESTED BY AND  
AFTER RECORDING MAIL THIS DEED TO:

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

Douglas County - NV  
Werner Christen - Recorder  
Page: 1 Of 3 Fee: 16.00  
BK-0407 PG- 5364 RPTT: 0.00



MAIL TAX STATEMENTS TO:

Norma J. Bickmore  
966 Dresslerville Road  
Gardnerville, NV 89460

I the undersigned hereby affirm that this document submitted for recording contains the social security number of a person or persons as required by law. *[Per NRS 440.380(1)(a) and 40.525(5)]*

**AFFIDAVIT OF DEATH OF COMMUNITY PROPERTY**  
**JOINT OWNER**

I, NORMA J. BICKMORE, being duly sworn say:

1.) I am 18 years of age, or over. The decedent Edward Clifton Bickmore, Jr. described in the attached certified copy of the Certificate of Death is the same person as Edward C. Bickmore Jr. who is named with me as one of the parties in the deed dated March 5, 2002, executed by Jasper Martini and Rosalia Martini, Husband and Wife as Joint Tenants, and granted to EDWARD C. BICKMORE JR. and NORMA J. BICKMORE, HUSBAND AND WIFE AS COMMUNITY PROPERTY WITH RIGHT OF SURVIVORSHIP, recorded as Instrument No. 0536278 on March 5, 2002, in Book 0302, Page 01749, in Official Records of Douglas County, Nevada, covering the following described property situated in the said County, State of Nevada:

the real property in the County of Douglas, State of Nevada described as:

Lot 13, as shown on the map of GARDNERVILLE RANCHOS UNIT NO. 2, filed in the office of the County Recorder of Douglas County, State of Nevada, on June 1, 1965, in Book 31, Page 686, as Document No. 28309, and Amended Title Sheet recorded on June 4, 1965, in Book 31, Page 797, as Document No. 28377.

Together with all tenements, hereditaments and appurtenances, including easements and water rights, if any thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

APN 1220-15-110-083

2.) As a result of the death of my husband, Edward C. Bickmore Jr., I affirm and declare under penalty of perjury under the laws of the State of Nevada, that as the sole remaining surviving community property owner, I am now the sole owner of the above-described real property, and possess one hundred percent (100%) ownership over such property.

IN WITNESS WHEREOF, dated: April 16, 2007.

*Norma J. Bickmore*  
NORMA J. BICKMORE

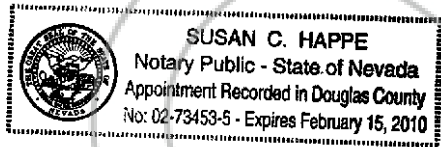
JURAT

State of Nevada )  
County of Douglas )

Signed and Sworn to before me on April 16, 2007 by NORMA J. BICKMORE.

WITNESS my hand and official seal.

*Susan C. Happe*  
NOTARY PUBLIC



**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**

20030005082

TYPE OR PRINT IN PERMANENT BLACK INK	LOCAL FILE NUMBER			STATE FILE NUMBER		
	DECEASED—NAME First Middle Last			DATE OF DEATH (Month, Day, Year)		
PRECEDENT	1. Edward Clifton BICKMORE, Jr.			2. April 9, 2003		
	CITY, TOWN OR LOCATION OF DEATH			COUNTY OF DEATH		
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	3b. Gardnerville			3a. Douglas		
	3c. 966 Dresslerville Rd.			3e. Male		
PRECEDENT	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)	
	5. White		6. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7a. 73	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	STATE OF BIRTH (If not U.S.A., name country)		CITIZEN OF WHAT COUNTRY		Decedent's Education. Specify highest grade completed.	
	9a. California		9b. U.S.A.		10. 16	
PRECEDENT	SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	
	13. [REDACTED]		14a. Military		11. Married	
PRECEDENT	RESIDENCE—STATE		CITY, TOWN, OR LOCATION		STREET AND NUMBER	
	15a. Nevada		15c. Gardnerville		15d. 966 Dresslerville Rd.	
PRECEDENT	FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last		SURVIVING SPOUSE (If wife, give maiden name)	
	16. Edward Clifton Bickmore, Sr.		17. Vira Jean Sechrist		12. Norma Kent	
PRECEDENT	INFORMANT—NAME (Type or Print)			MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)		
	18a. Norma Bickmore - Wife			18b. 966 Dresslerville Rd., Gardnerville, NV 89460		
PRECEDENT	BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State	
	19a. Removal/Burial		19b. Mt. Vernon Memorial Park		19c. Sacramento, California	
PRECEDENT	FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY	
	20a. [Signature]		20b. 217		20c. Home, 1380 Hwy 395, Gardnerville, NV 89410 48	
PRECEDENT	21. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.			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.		
	21b. 4/9/03			22b. [Signature]		
PRECEDENT	21c. 0400			22c. HOUR OF DEATH		
	21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			22d. PRONOUNCED DEAD (Mo., Day, Yr.)		
PRECEDENT	21e. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print)			22e. PRONOUNCED DEAD (Hour)		
	23a. James A. Cunningham, M.D., 412 W. John St. #1B, Carson City, NV			22e. AT		
PRECEDENT	REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		DEATH DUE TO COMMUNICABLE DISEASE	
	24a. [Signature]		24b. April 11, 2003		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
PRECEDENT	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
	PART I (a) Cardio pulmonary failure					
PRECEDENT	PART I (b) Metastatic Bladder Cancer					
	PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.					
PRECEDENT	ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY	
	28a. [REDACTED]		28b. [REDACTED]		28c. M	
PRECEDENT	INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)		LOCATION	
	28e. [REDACTED]		28f. [REDACTED]		28g. [REDACTED]	

STATE REGISTRAR

No.248314

119374

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: JUN 01 2006

[Signature]

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



BK- 0407  
PG- 5366  
Page: 3 of 3 04/18/2007