08/15/2007 09:16 AM OFFICIAL RECORD Requested By: DORANNA GLETTIG

> Douglas County - NV Werner Christen - Recorder

Page: 1 \mathbf{of} 2 Fee:

15.00

BK-0807

PG-04321 RPTT:

0.00



RECORDING REQUESTED BY AND WHEN RECORDED RETURN TO: Doranna Glettig P.O. Box 125 Markleeville, CA 96120-0125

AFFIDAVIT - DEATH OF JOINT TENANT

APN: 1220-21-510-110

STATE OF CALIFORNIA) ss:

COUNTY OF ALPINE

Doranna Glettig, of legal age, being first duly sworn, deposes and says:

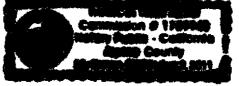
That Sherman Layne Glettig, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Sherman L. Glettig named as the person in that certain Grant Deed, executed by Sherman L. Glettig, Grantor, to Sherman L. Glettig and Doranna Glettig, husband and wife, as joint tenants with rights of survivorship, recorded as Instrument No. 0701263 on May 16, 2007, in the Official Records of Gardnerville, Douglas County, Nevada, covering that certain real property located in Gardnerville, County of Douglas, State of Nevada, commonly known as 762 Linda Drive, more particularly described as follows:

Lot 163 as shown on the map of GARDNERVILLE RANCHOS UNIT NO. 6, filed in the office of the County Recorder of Douglas County, State of Nevada, on May 29, 1973, Document No. 66512.

Dated: August 15, 2007.

SUBSCRIBED AND SWORN TO (or affirmed)

Before me on this 15th day of August, 2007, by Doranna Glettig, personally known to me or proved to me on the basis of satisfactory evidence to be the person who appeared before me.



SIMPLE CALABORDISMICA

CERTIFICATION OF VITAL RECORD

COUNTY of ALPINE

MARKLEEVILLE, CALIFORNIA

	J. 4 4 M. J.	. "\		E OF DEATH	3200	70200004		[. <u></u>	
·	1, NAME OF DECEDENT-FIRST (C	BER Luci (12 MODLE	RES, WHITEOLITS OR ALTERATIONS REV 3/06)	ASIT (Parriet)	LOCAL REGISTRATIO	NUMBER NUMBER		
PERSONAL DATA	SHERMAN LAYNE			GLETTIG					
	AKA. ALSO IONOWN AS - Include for	R AKA (PIRST; NIDOLE, LAST)		4. DATE OF BIRTH men/d	d/ooyy 5. AGE Yrs.	FUNDER ONE YEAR I	FUNDER 24 HOURS 8. 5	SEX	
	9. BIRTH STATE/FOREIGN COUNTR	W 10. SOCIAL SECURITY NU	. (1) (1)	01/25/194			sticew / 8, HOUR / 64	М	
	CA **	IL SCEDE SECONITY NO	HEREN 11, EMER IN U.S. ARIÚS YES V NO			07/27/2007		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
¥.		14/15, WAS DECEDENT HISPANICAL			SRACE - Up to 3 races		on back)	777	
9	HS GRADUATE	⅓ YES	<u></u>	X NO WHITE		- 3°5 €	12.19AK 24	0.15g	
8	17. USUAL OCCUPATION - Type of a	3 fr	·	JSINESS CIA INDUSTRY (e.g., g	rocery store, road consti	action, employment agency, et	11111. 1 1112 1	2 11/45	
- 1 . N.	COPY MACHINE 1		REPAII	R_SERVICE		· <u></u>	20/20/2	(
USUAL -	606 PLEASANT VALLEY ROAD							\$4	
	21. CITY 22. COUNTY/PROVINCE 23. 22P. CODE 24. YEARS IN COUNTY 25. STATE FOREIGN DOUNTRY								
- Z	MARKLEEVILLE		PINE 19	96120	23	CA's	21 1 1, 24 21 24 2 2 23		
MAN	DORANNA GLETTIG - SPOUSE P.O. BOX 125, MARKLEEVILLE, CA. 96120								
SPOUSESRDP AND PARENT MITORIMATION	SE MANEET SHOWING GROUSESSON FREET. 38 MODEL 32 LAST GROWN HAVES								
	DORANNA	1 1 W 1	10ACE		RTSON	4	The Court !	<u></u> -:	
	S1: NAME OF FATHER PAPERIT - SHE HERMAN	1 / A 1	SE INDOLE	33.UAST	TTIG	4	av sam stan	ŢE J	
	35 NAME OF MOTHER/PARENTH	· 产 ^	38. MODLE 1. (2-17)		KUH MANE)	***		TE ,	
	OHEMIDORITIES AND A	5.00	Mary x	MCD	OWELL	1	MIN.	59%	
UNERAL DERECTORY LOCAL REGISTRAR	39: DISPOSITION DATE IMPRISORY		CEMETERY, 130	POOMSTIT. DD	BOUNDT	CECOTION CA	(A)	*****	
	41. TYPE OF DISPOSITION (S) //	. TRADICION SOUR	AS SIGNATURE OF EX	BALMER WALLEY KIN	· · · · · · · · · · · · · · · · · · ·	CKSBURG, CA	13 TICKNOE MANDEL	Ry Y	
	CR/BU		NOT EM				10000	11	
	44, NAME OF FUNERAL ESTABLISH		N. LICENSE NUMBER	720	Enc	Man &	CONTE MARKETON	×-1-	
PLACE OF DEATH	MC FARLANE MOI	LIUARI	FD1180	402, IF HOSPITAL SPI	SCIENTINES 1102	FOTHER THAN BESTROOM	SECRETORE !	- -	
	RESIDENCE		and the grant	السمالة المتحاركة	иог () вод () <u>г</u>	Hospice Nursing	Correction Home	Other	
	164, COUNTY	郷 劉本: - お"で" (7)	REDICTION WHERE FOUND SHORE	and number, or locations	6	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	學,中國	7	
- 11	ALPINE 107 CAUSE OF DEATH	6 506 PLEASAN	T VALLEY ROAD	rectly catased death. DO NOT enter	r terminal evento such &	The Married Between	EVILLE - (25)	OHORER	
CAUSE OF DEATH	MIMEDIATE CAUSE (A)	To compact across compacting ones	st, in verticular fibrillature pathous accuse	ng the eticlogy CONCT ABBREV	MIE 'N	IVE. SEATON AND COMMENT OF THE COMMENT	**************************************] 	
	Final diameter or condition resulting	OPERICARDIUM		J & 24.		MNS	07-846	F	
	Sequentially, flat	THE MANAGEMENT		A STATE OF THE STA	Transaction and	and the second	100. BIOPEY PERFORME	No.	
	on Line A. Enter	PTURED MYOCARDI	AL INFARCTION	The state of the s	y.	MNS	110 AUTOPSY PERFORM		
	UNDEFLYING CAUSE (discesse or	§ 1 1 1		1. 1. 1. H.	OF 71	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	yes /		
	initiated the events (D) neutring in death) LAST					- m	III. USS ROCIBIONANO	CAUSET ?	
	112, OTHER SIGNIFICANT CONDITION	SHE CONTRIBUTING TO DEATH BUT	T NOT RESULTING IN THE UNDERLY	NO CAUSE GIVEN IN 107	- ye Van - year ye	and the second	Barrier West	- Survey	
- -	ATHEROSCERO	TIC CARDIOVASCE	LAR AND HYPERT	ENSIVE DISEAS	E C				
	113, WAS OPERATION PERFORMED	FOR ANY DONORIGN IN ITEM 107	CR 1127 (Eyes, list type of operation	and date.	24 ZH []		FRIMAL PREDMATRICA		
PHYSICIANYS ERTHICATION	NO THE DESIGN OF HE	KHOWLEDGE OF THE OCCUPANED 145	SIGNATURE AND TITLE OF CERTIF	ier	ا الله الله الله الله الله الله الله ال	* 116, LICENSE NUME	ـ بيمان ٢٠٠ فيبسا	18.6	
	AT THE HOUR, DATE, AND PLACE STATED Decorders Attention Since	Decertant Last Serio Albert	The second of the second	The state of the s	"有为数	V 27 7"		Ġ.	
	(A) ram/dd/coyy /; (B)	remidic/copy 118	TYPE ATTENDING PHYSICIAN'S N	ME, MAILING ADDRESS, DIP C	.oo€	and a second	`\		
CORONER'S USE ONLY CE	HE I CENTRY THAT IN MY OPINION SEA	UTH OCCURRED AT THE HOUR, DATE, AN	DPLACE STATED FROM THE CAUSES STA	The warmer of the	RED XT WORK?	121. INJURY DATE (mived/coy 122 HOUR G	Zd Hours	
	MAVENER OF DEATH X Netural		Suitairie Pending	Could not be VE	A LOSA III III PARA		7/4		
	123. PLACE OF MUNITY ING., home.	corvenuction sile, wooded area, etc.	1 5		7				
	124, DESCRIBE HOW INJURY OOD	CERT Shirts when anyther to be			/	*	· <u>, </u>	_	
			~" . ∫ ⊒ख	-	#			<u> </u>	
	125, LOCATION OF INJURY (Street a	and number, or location, and city, and	t ztp)	-		16	De la companya de la	94	
	128. SIGNATURE & COSSESS / D		74 . 127. DATE	- Cine Proc V	: (1) F 700 P 00 0000	NER) DÉPUTY CORONER	<u> </u>		
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STA	TE B	O O		- • •		FAX AUTHU	CENSUS	TRACT	
REGRA	TRAR .	<u> </u>			<u> </u>	1 // / /			
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CAROL McELROY Alpine County Recorder

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