



APN: 1220-28-510-049

RECORDING REQUESTED BY  
Lenders First Choice  
AND WHEN RECORDED MAIL TO

Name: IRVING D. COLEMAN  
Street Address: 1375 RANCHO ROAD  
City, State Zip: GARDNERVILLE, NV 89460-8443  
Order No. 81-00845520

SPACE ABOVE THIS LINE FOR RECORDER'S USE

**AFFIDAVIT - DEATH OF JOINT TENANT**

STATE OF NEVADA  
COUNTY OF DOUGLAS S.S.

DALE COLEMAN, SR. of legal age, being first duly sworn, deposes and says:

That TIMOTHY DALE COLEMAN, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as TIMOTHY DALE COLEMAN

named as one of the parties in that certain QUITCLAIM DEED dated MARCH 28<sup>TH</sup>, 2005 executed by CASSONDRA COLEMAN, A SINGLE WOMAN AND TIMOTHY DALE COLEMAN, A SINGLE MAN

to CASSONDRA COLEMAN, A SINGLE WOMAN AND TIMOTHY DALE COLEMAN, A SINGLE MAN, AND DALE COLEMAN, SR., A WIDOWER, AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP

recorded as Instrument No. 0641828 on APRIL 15<sup>TH</sup>, 2005, in Book 0405, Page 8104, of Official Records of DOUGLAS

County, NEVADA, covering the following described property situated in the CITY OF GARDNERVILLE County of DOUGLAS, State of NEVADA:

LOT 1085, AS SHOWN ON THE MAP GARDNERVILLE RANCHOS UNIT NO. 7, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON MARCH 27, 1974, IN BOOK 374, PAGES 676, AS FILE NO. 72456.

APN 1220-28-510-049

Dated: April 4<sup>th</sup>, 2008

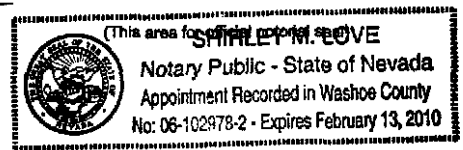
State of NEVADA  
County of DOUGLAS  
SUBSCRIBED AND SWORN TO (or affirmed) before me on this  
25 day of April, 2008, by  
DALE COLEMAN, SR.

Dale Coleman, SR.  
S.S. DALE COLEMAN, SR.

Personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me

WITNESS my hand and official seal.

Signature [Handwritten Signature]



775-313-3688

**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   |   | STATE FILE NUMBER  |  |
| DECEASED—NAME First Middle Last   |   | DATE OF DEATH (Month, Day, Year)   | COUNTY OF DEATH                                  |
| 1. Timothy Dale COLEMAN   |   | 2. July 22, 2006   | 3a. Douglas                                      |
| CITY, TOWN OR LOCATION OF DEATH   |   | HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)   | SEX  |
| 3b. Zephyr Cove   |   | 3c. Zephyr Cove Beach  | 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. 19   | 8. September 25, 1986                            |
| 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         |
| 9a. California  | 9b. U.S.A.  | 11. 13 Years   | 12. Never 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. [REDACTED]-9426   | 13a. Student  | 14a. Education   |  |
| RESIDENCE—STATE   | COUNTY  | CITY, TOWN, OR LOCATION  | STREET AND NUMBER                                |
| 15a. Nevada   | 15b. Douglas  | 15c. Gardnerville  | 15d. 1375 Rancho Rd.                             |
| INSIDE CITY LIMITS (Specify Yes or No)  |   | 15e. Yes   |  |
| FATHER—NAME First Middle Last   | MOTHER—MAIDEN NAME First Middle Last  |  |  |
| 16. Dale Coleman  | 17. Marilyn Morrison  |  |  |
| INFORMANT—NAME (Type or Print)  |   | MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)   |  |
| 18a. Dale Coleman - Father  |   | 18b. 1375 Rancho Rd. Gardnerville, Nevada 89460  |  |
| BURIAL, CREMATION, REMOVAL, OTHER (Specify)   | CEMETERY OR CREMATORY—NAME  | LOCATION—City or Town State  |  |
| 19a. Cremation  | 19b. FitzHenry's Crematory  | 19c. Carson City, Nevada   |  |
| FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)   | FUNERAL DIRECTOR LICENSE NUMBER   | NAME AND ADDRESS OF FACILITY   |  |
| 20a. [Signature]  | 20b. 217  | FitzHenry's Carson Valley Funeral Home, 1380 Hwy 395, Gardnerville, NV 89410   |  |
| 21a. To the best of my knowledge, death occurred at the time, date, and place and due to the cause(s) stated:<br>(Signature and Title) [Signature]<br>DATE SIGNED (Mo., Day, Yr.) |   | 22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, place and date and due to the cause(s) and manner stated:<br>(Signature and Title) [Signature]<br>DATE SIGNED (Mo., Day, Yr.) |  |
| 21b. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)  |   | 22b. PRONOUNCED DEAD (Mo., Day, Yr.)   |  |
| 21c. HOUR OF DEATH  |   | 22c. PRONOUNCED DEAD (Hour)  |  |
| 21d. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print)   |   | 22d. ON 7-22-06  |  |
| 23a. Ron Valdespino, Deputy/Coroner, P.O. Box 218, Minden, NV 89423   |   | 22e. AT 1308   |  |
| 23b. LICENSE NUMBER   |   | 23c. 403   |  |
| REGISTRAR   | DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)  | DEATH DUE TO COMMUNICABLE DISEASE  |  |
| 24a. [Signature]  | 24b. October 19, 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))   |   | Interval between onset and death   |  |
| PART I (a) Acute Methadone Intoxication   |   | Interval between onset and death   |  |
| DUE TO, OR AS A CONSEQUENCE OF:   |   | Interval between onset and death   |  |
| (b)   |   | Interval between onset and death   |  |
| DUE TO, OR AS A CONSEQUENCE OF:   |   | Interval between onset and death   |  |
| (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)  | WAS CASE REFERRED TO CORONER (Specify Yes or No) |
|   |   | 26. Yes  | 27. Yes  |
| ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)   | DATE OF INJURY (Mo., Day, Yr.)  | HOUR OF INJURY   | DESCRIBE HOW INJURY OCCURRED                     |
| 28a. Accident   | 28b. 7-22-06  | 28c. 1308  | 28d. Ingested Prescription Medication            |
| 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. Zephyr Cove Beach  | 28g. Zephyr Cove Beach, Zephyr Cove, Nevada  |  |

STATE REGISTRAR

No. 341398

140777

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:

OCT 23 2006

STATE REGISTRAR

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



EXHIBIT "A"

THE FOLLOWING DESCRIBED REAL PROPERTY IN THE CITY OF  
GARDNERVILLE, COUNTY OF DOUGLAS STATE OF NEVADA:

LOT 1085, AS SHOWN ON THE MAP GARDNERVILLE RANCHOS UNIT NO. 7,  
FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS  
COUNTY, NEVADA, ON MARCH 27, 1974, IN BOOK 374, PAGES 676, AS  
FILE NO. 72456.

FOR INFORMATIONAL PURPOSES ONLY: THE APN IS SHOWN BY THE COUNTY  
ASSESSOR AS 1220-28-510-049; SOURCE OF TITLE IS BOOK 0405, PAGE  
6104 (RECORDED 04/15/05)



BK-508  
PG-7981