RECORDING REQUESTED BY:

Diane Hutton-Potts

AND WHEN RECORDED MAIL TO:

Diane Hutton-Potts

/ 211 Mountain Reach Ct.
Gardnerville, NV 89460

DOC # 0731144
10/07/2008 10:49 AM Deputy: SG
OFFICIAL RECORD
Requested By:
DIANE HUTTON-POTTS

Douglas County - NV Karen Ellison - Recorder

935

ge: 1 Of 3

Fee: 16.00 RPTT: 0.00



SPACE ABOVE THIS LINE FOR RECORDER'S USE

BK-1008

AFFIDAVIT - DEATH OF TRUSTEE

STATE OF NEVADA

COUNTY OF DOUGLAS

) SS.

Diane Hutton-Potts of legal age, being first duly sworn, deposes and says:

- George PC Hutton-Potts is the decedent mentioned in the attached certified copy of Certificate of Death, and is the same person named as Trustee in that certain Declaration of Trust dated September 25, 1989, executed by George P.C. Hutton-Potts and Diane Hutton-Potts as trustor(s).
- At the time of decedent's death, decedent was the owner, as Trustee, of certain real property acquired by a deed recorded on April 17, 2008, as Instrument No. 0721666, in Official Records of Douglas County, Nevada, describing the following real property:

See Exhibit A attached and by reference made a part hereof

 I am the surviving or successor Trustee of the same trust under which said decedent held title as trustee pursuant to the deed described above, and am designated and empowered pursuant to the terms of said trust to serve as Trustee thereof.

Dated October 6, 2008

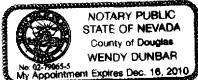
Diane Hutton-Potts

STATE OF NEVADA, COUNTY OF Douglas

Subscribed and sworn to (or affirmed) before me on this 6th day of October, 2008, by Diane Hutton-Potts personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(seal)

Signaturé



TATE OF NEVADA

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CERTIFICATE OF DEATH

2008008898

TYPE OR						STATE FILE NUMBER			
的 PRINT IN	1a. DECEASED-NAME (FIRST,MID	DLE,LAST,SUFFIX)			2. DATE OF DEATH	i (Mo/Day/Year)	3a. COUNTY OF D	EATH	
PERMANENT	George PC H	IUTTON-POTTS			June 04	2008	Doug	ilac	
BLACK INK					1	1	1 1	·	
E	3b. CITY, TOWN, OR LOCATION OF	F DEATH [3c, HOSPITA [and number]	# OK OTHER INSTITUTION -	Name(If not either, giv	e street 3e.if Hosp Inpatient(S	i, or Inst, indicate DC Speciful:	A,OP/Emer. Rm.	4. SEX	
BEAFAFF	Gardnerville	- Janu Humber)	211 Mountain Rea	ch Court	Impatients	-pocus)	1	Male	
DECEDENT	5. RACE White	le l	dispanic Origin? Specify	7a. AGE-Last	Th LINDER 1 VEAR	17c UNDER 1 DAY	8. DATE OF BIRTH	I (Mo(Day/Yr)	
Ē	(Specify)		i - Non-Hispanic	birthday (Years)	MOS I DAYS	HOURS I MINS	1		
Ē	<u> </u>	.	Tan I I I I I I I I I I I I I I I I I I I	73	""= " -"""		October 1	•	
IF DEATH	9a. STATE OF BIRTH (If not U.S.A.,	9b. CITIZEN OF W	HAT COUNTRY 10 EDUCATI	ON 11, MARRIED, N	EVER MARRIED, WI	DOWED, 12. SI	JRVIVING SPOUSE	(if wife, give	
OCCURRED IN	name country) England	United		DIVORCED (Spe			n nanBlane PIN		
INSTITUTION ESEE HANDBOOK	13. SOCIAL SECURITY NUMBER		JPATION (Give Kind of Work [Done During Most of	145 KIND OF BL	JSINESS OR INDUS	TRY Ever	n US Armed	
REGARDING	2976	Working Life, Ever	I Contracti	•	2	The state of the s		s? Yes	
COMPLETION OF RESIDENCE			Account Ex			surance Compa	1117	NSIDE CITY	
ITEMS	15a. RESIDENCE - STATE 15b.	COUNTY	15c. CITY, TOWN OR LO	OCATION 15d.	STREET AND NUMB	SER	LIMIT	NSIDE CITY S (Specify Yes	
<u> </u>	Nevada /	Douglas	Gardnervi	ille 211	Mountain Read	ch Court	or No	Yes	
	16. FATHER - NAME (First Middle	Y		12 11071170	NAME (First Middle				
PARENTS			OTTO * C T	42) - 12 W		lanet WILKE	7		
Ē									
	18a. INFORMANT- NAME (Type or Print) 18b. MAILING ADDRESS (Street or R.E.D. No, City or Town, State, Zip) Diane HUTTON-POTTS 211 Mountain Reach Court Gardnerville, Nevada 89460								
Ē ·		DN-POTIS	organis (1981) se di paditi					- 1	
	19a. BURIAL, CREMATION, REMOV	/AL, OTHER (Specify) 1	19b. CEMETERY OR CREMAT	ORY NAME		19c. LOCATION	City or Town	State	
DISPOSITION	Cremation		Walton	s Sierra Cremato	orv 11 m	Carso	n City Nevada 8	39706	
	20a. FUNERAL DIRECTOR - SIGNA	TURE (Or Person Action					,	\ /	
		NOEL 7	DIRECTOR LIC	ENSE	Walt	ton's Chapel of	the Valley	~~	
	1	200				Roop Carson Ci			
	TRADE CALL - NAME AND ADDRES	E AUTHENTICATED	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		120114	1700b Carson Ci	ty 117 05700		
KADE CALL	TRADE CALE - NAME AND ADDRES	58 · · · · · · · · · · · · · · · · · · ·				5 ² % = =	·		
Ē	21a. To the best of my knowle due to the cause(s) state(s) (s) (s) (ELLE 21b. DATE SIGNED (Mo/Day June 09, 2008	edge, death occurred at	the time, date and place and	全世 22a Onth	e basis of examination	on and/or investigation	on, in my opinion de:	ath occurred at	
È	O due to the cadee(s) stated. ((SIGNATURA SIGN	NATURE AUTHENTICATE	in 12 7 menue, c	iate and place and ut	ie in nie cănse(s) su	ilea. (Signature & Ti	110)	
CERTIFIER	E 21b. DATE SIGNED (Mo/Day	W) \ 21a-H	AR M.D.		E SIGNED (Mô/Day/)	(r) 10 1220	HOUR OF DEATH		
	S June 09 2008 @	1117 En 19 (210,110)	11.45	. S & 220. DAT	E SIGNED (MODAN)	11) 220.	HOUR OF BEATH	/	
	214 NAME OF ATTENDING		11.45	b g =			PRONOUNCED DE	AD AT (Heres)	
ŧ	21d. NAME OF ATTENDING (Type or Print)	PHYSICIAN IF OTHER	THAN CERTIFIER	22d, PRC	NOUNCED DEAD (N	Ao/Day/Yr)), 22e.	PRONCONCED DE	AD AT (HOUR)	
			· sansign of months of				· '		
Ė	23a. NAME AND ADDRESS OF CER	RTIFIER (PHYSICIAN, A	TTENDING PHYSICIAN, MED	ICAL EXAMINER, OR	CORONER) (Type o		3b. LICENSE NUME		
علم الم	Kelle Lynn Brogan M.D.: 18653 Wedge Pkwy Reno, NV: 89511: 6000								
REGISTRAR	TRAR 248. REGISTRAR (Signature) SARAH KOERNER 246. DATE RECEIVED BY REGISTRAR 246. DEATH DUE TO COMMUNIC (Mo/Day/Yr) June 11, 2008 YES NO								
ૄ '~		SIGNATURE AUTI		(Morciayarr) (2.9.1	une 11, 2008	\~ YE5	S∐ NO [X	
CAUSE OF	25. IMMEDIATE CAUSE ? (E	NTER ONLY ONE CAL	ISE PER LINE FOR (a), (b), Ai	ND (c).)	20 mg - 11 7 1 1	· · · · · · · · · · · · · · · · · · ·	interval between o	nset and death	
DEATH	Lover Circhopial of Liver DT Henefitie D 1122 (1921)								
,	(9)	CONSEQUENCE OF	* * * * * * * * * * * * * * * * * * *			- 1	Interval between o	neet and don't	
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CONDITIONS IF				/ /					
GAVE RISE TO	DUE TO, OR AS A	CONSEQUENCE OF	Santasi ng Malia Lala	It	1	<i>(* 1</i>	Interval between o	nset and death	
E IMMEDIATE CAUSE ->	(c)	7.00			A Company	7			
STATING THE		CONSEQUENCE OF:		and the second			Interval between	onset and death	
UNDERLYING CAUSE LAST	(4)	278	**************************************	/ /				-	
E //	(d)	* * * * * * * * * * * * * * * * * * *		<u> </u>		lea Auro		A 4 0 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
/	PART II	- 1 A		1	للمستخبا والمستحب والمستحب	26. AUTO (Specify Y		CASE REFERRED ONER (Specify Yes	
E / /	<i>y</i>		- संश		•	· (Specity 1	No or No)	No	
[/ /	28a. ACC., SUICIDE, HOM., UNDET. 28	b. DATE OF INJURY (Mo/Da	ay/Yr) 28c. HOUR OF INJU	RY 28d. DESCRIBE	HOW INJURY OCCURR	ED			
E / /	OR PENDING INVEST. (Specify)			FT 1		4			
	28e. INJURY AT WORK (Specify 28	AL DI ACE DE INTURV	At home, farm, street, factory, o	office 28g. LOCATIO	N CTREET OF	R R.F.D. No. Cl	TY OR TOWN	STATE	
	l	ilding, etc. (Specify)	randome, ranni, street, ractory, t	Anice IZOG, LOCATR	JIN SIKEELU!	K K.J .D. 140. UJ	/ / / / / / /	SINIE	
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VRS-Rev-2008T/



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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.

JUN 18 2008

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





EXHIBIT A - LEGAL DESCRIPTION

Tax ID Number(s): 1219-03-002-006

Land situated in the County of Douglas in the State of NV

ALL THAT CERTAIN LOT, PIECE OR PARCEL OF LAND SITUATE IN SECTION 3, TOWNSHIP 12 NORTH, RANGE 19 EAST M.D.B. AND M. COUNTY OF DOUGLAS, STATE OF NEVADA, DESCRIBED AS FOLLOWS;

PARCEL 4D-2, AS SET FORTH ON PARCEL MAP NO. 2 FOR JOE M. EDWARDS, ETAL, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA ON MARCH 15, 1993, IN BOOK 393, PAGE 3042, AS DOCUMENT NO. 302061.

Commonly known as: 211 Mountain Reach Court, Gardnerville, NV 89460

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