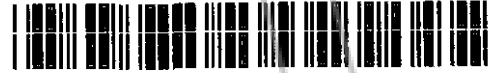


DOC # 0733182
11/17/2008 12:16 PM Deputy: SD
OFFICIAL RECORD
Requested By:
LILLIAN WRESH

APN: 1022-09-002-017

Douglas County - NV
Karen Ellison - Recorder
Page: 1 Of 4 Fee: 17.00
BK-1108 PG- 3124 RPTT: 0.00



FOR RECORDER'S USE ONLY

TITLE OF DOCUMENT: Affidavit of Death

The undersigned hereby affirms that this document submitted for recording contains a Social Security number as required by law:

State Law: NRS 40.525 Sec. 5 - Death Certificates Attached to Affidavit Death of Joint Tenant
State Law: NRS 440.380 Sec. 1.(a) - Medical Certificate of Death; Contents

NORTHERN NEVADA TITLE COMPANY

Signed By:

A handwritten signature in cursive script that reads "Lillian Wresh".

Print Name/Title: Lillian Wresh

WHEN RECORDED MAIL TO:

✓ Lillian Wresh
685 Long Valley Road
Gardnerville, NV 89460

A.P.N. 1022-09-002-017

RECORDING REQUESTED BY:

Lillian Wresh

AND WHEN RECORDED, MAIL TO:

Lillian Wresh

685 Long Valley Road

Gardnerville, NV 89460

THIS SPACE FOR RECORDER'S USE ONLY

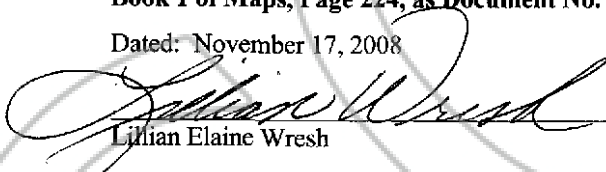
AFFIDAVIT - DEATH OF A JOINT TENANT

Lillian Elaine Wresh (who acquired title as Lillian Elaine Christopher), of legal age, being duly sworn, deposes and says

That **Larry D. Wresh**, the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as **Larry D. Wresh** named as one of the parties in that certain **Grant, Bargain and Sale Deed** dated **November 3, 1993**, executed by **Larry D. Wresh, an unmarried man and Lillian Elaine Christopher, an unmarried woman as joint tenants with right of survivorship**, recorded as Instrument No. **322965**, on **November 18, 1993**, in Book **1193**, Page **3688**, of Official Records of **Douglas County, Nevada**, covering the following described property situated in the County of, State of Nevada.

Lot 1, in Block N, as shown on the map of TOPAZ RANCH ESTATES UNIT NO. 4, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on November 16, 1970, in Book 1 of Maps, Page 224, as Document No. 50212.

Dated: November 17, 2008

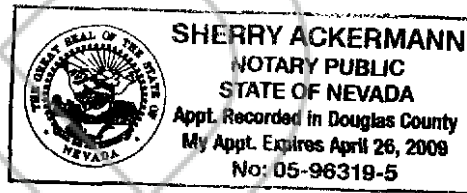

Lillian Elaine Wresh

STATE OF NEVADA)
)
) SS.
COUNTY OF Douglas)

On November 17, 2008 before me, the undersigned, a Notary Public in and for said State and County, personally appeared Lillian Elaine Wresh

known to me to be the person whose name subscribed to the within instrument and acknowledge that executed the same.

Signature 
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

LOCAL FILE NUMBER

STATE FILE NUMBER

1. **Larry D. WRESH** 2. **March 6, 2005** 3a. **Douglas**

3b. **Gardnerville** 3c. **Carson Valley Medical Center** 3e. **Emergency Room** 4. **Male**

5. **White** 6. Yes No 7a. **70** 7b. **:** 7c. **:** 8. **March 30, 1934**

9a. **Pennsylvania** 9b. **U.S.A.** 10. **14 Years** 11. **Married** 12. **Lillian Lawrence**

13. **2128** 14a. **Facilities Tech** 14b. **Bentley Nevada**

15a. **Nevada** 15b. **Douglas** 15c. **Gardnerville** 15d. **Long Valley Rd. 685** 15e. **Yes**

16. **Lillian Wresh - Wife** 17. **Jewelle Schmidt**

18a. **Lillian Wresh - Wife** 18b. **685 Long Valley Rd. Gardnerville, NV 89460**

19a. **Cremation** 19b. **FitzHenry's Crematory** 19c. **Carson City, Nevada**

20a. **[Signature]** 20b. **217** 20c. **Home, 1380 Hwy 395, Gardnerville, NV 89410**

21. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. **Ralph Herbig, D.O.**

21b. **3/8/2005** 21c. **1300** 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. **[Signature]**

21d. **[Signature]** 22b. **[Signature]** 22c. **[Signature]**

23a. **Ralph Herbig D.O., 1540 Hwy 395, Gardnerville, NV 89410** 23b. **984**

24a. **[Signature]** 24b. **March 10, 2005** 24c. **YES** **NO**

25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))

PART I (a) **Cardiac arrest** Interval between onset and death

(b) **Hypoxia** Interval between onset and death

(c) **Pneumonia** 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. 26. **No** 27. **Yes**

28a. **[Signature]** 28b. **[Signature]** 28c. **[Signature]** 28d. **[Signature]**

28e. **[Signature]** 28f. **[Signature]** 28g. **[Signature]**

STATE REGISTRAR

No. 283680

52933

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:

MAR 10 2005

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

TYPE OR PRINT IN PERMANENT BLACK INK

PRECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF CERTIFICATE ITEMS

RENTS

POSITION

TIFIER

CONDITIONS ANY THAT GAVE RISE TO IMMEDIATE CAUSE OF DEATH

USE OF DEATH



BK- 1108
PG- 3127
Page: 4 of 4
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