



This document includes a certified death certificate as required by NRS 40.525 (5) which contains a social security number as required by NRS 440.380(1)(a).


Brandi Ballingham, Paralegal
ANDERSON, DORN & RADER, LTD.

APN: 1219-10-001-032 and 1320-29-118-013

RECORDING REQUESTED BY:

Bryce L. Rader, Esq.
Anderson, Dorn & Rader, Ltd.
500 Damonte Ranch Parkway, Ste, 860
Reno, Nevada 89521

WHEN RECORDED MAIL TO:

MARGARET JOAN MEAGHER
1176 Cary Creek Court
Gardnerville, Nevada 89460

MAIL TAX STATEMENTS TO:

MARGARET JOAN MEAGHER
1176 Cary Creek Court
Gardnerville, Nevada 89460

AFFIDAVIT OF DEATH OF TRUSTEE

I, Margaret Joan Meagher, the undersigned, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

- (1) By instrument dated October 29, 2007, Allan R. Thomas executed the Thomas Living Trust ("Trust").
- (2) Said trust appointed Margaret Joan Meagher to serve as Successor Trustee upon the death or incapacity of Allan R. Thomas.
- (3) Allan R. Thomas died on May 17, 2009 at Gardnerville, Nevada, a resident of Douglas County, Nevada. Attached hereto as Exhibit "A" is a certified copy of the death certificate of said Allan R. Thomas.
- (4) Pursuant to the terms of the Trust, I have assumed the responsibilities of sole Successor Trustee.

- (5) The following described real property is part of the trust estate: See Exhibit "B" attached.
- (6) I am authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as the Successor Trustee with respect to the trust's interest in the described property.
- (7) No other person has a right to the interest of the Trust in the described property.
- (8) The described property shall be transferred to me as Successor Trustee.

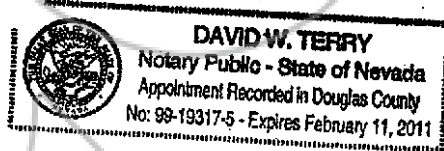
Executed on this 15 of June, 2009, at Gardnerville, Nevada.

Margaret Joan Meagher
 Margaret Joan Meagher, Successor Trustee

STATE OF NEVADA)
) ss:
 COUNTY OF DOUGLAS)

SUBSCRIBED AND SWORN TO before me this 15th day of June, 2009,
 by Margaret Joan Meagher.

David W. Terry
 Notary Public



BK-609
 PG-4897

**STATE OF NEVADA
CERTIFICATION OF VITAL RECORD**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH
VITAL STATISTICS
CERTIFICATE OF DEATH**

2009007350
STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

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

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) Allan Richard THOMAS		2. DATE OF DEATH (Mo/Day/Year) May 17, 2009		3a. COUNTY OF DEATH Douglas	
3b. CITY, TOWN, OR LOCATION OF DEATH Gardnerville		3c. HOSPITAL OR OTHER INSTITUTION -Name (if not either, give street and number) 1176 Cary Creek Court		3e. If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify) Male	
5. RACE (Specify) White		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday (Years) 78	
9a. STATE OF BIRTH (if not U.S.A., name country) California		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 12	
11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Divorced		12. SURVIVING SPOUSE (if wife, give maiden name)		13. SOCIAL SECURITY NUMBER 5253	
14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Builder		14b. KIND OF BUSINESS OR INDUSTRY Construction		15a. INSIDE CITY LIMITS (Specify Yes or No) Yes	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Gardnerville	
15d. STREET AND NUMBER 1176 Cary Creek Court		16. FATHER- NAME (First Middle Last Suffix) Gifford William THOMAS		17. MOTHER- NAME (First Middle Last Suffix) Winifred STONER	
18a. INFORMANT- NAME (Type or Print) Margaret Joan MEAGHER		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 1176 Cary Creek Court Gardnerville, Nevada 89460			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Walton's Sierra Crematory		19c. LOCATION City or Town State Carson City Nevada 89706	
20a. FUNERAL DIRECTOR - SIGNATURE (Of Person Acting as Such) RICK NOEL <i>SIGNATURE AUTHENTICATED</i>		20b. FUNERAL DIRECTOR LICENSE 620		20c. NAME AND ADDRESS OF FACILITY Walton's Douglas County Mortuary 1478 4th Street Minden NV 89423	
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) <i>SIGNATURE AUTHENTICATED</i> STEPHEN J HEWITT DO					
21b. DATE SIGNED (Mo/Day/Yr) May 21, 2009		21c. HOUR OF DEATH 18:00			
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		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) stated. (Signature & Title)			
22b. DATE SIGNED (Mo/Day/Yr)		22c. HOUR OF DEATH			
22d. PRONOUNCED DEAD (Mo/Day/Yr)		22e. PRONOUNCED DEAD AT (Hour)			
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Dr. Stephen J Hewitt DO 1090 3rd Street #1 South Lake Tahoe, CA 96150				23b. LICENSE NUMBER 1107	
24a. REGISTRAR (Signature) JENELLE BALDWIN <i>SIGNATURE AUTHENTICATED</i>		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) May 26, 2009		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))					
PART I		(a) Cardiopulmonary Arrest		Interval between onset and death Minutes	
		(b) Melanoma		Interval between onset and death Years	
		(c)		Interval between onset and death	
		(d)		Interval between onset and death	
PART II				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No		28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)			
28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY		28d. DESCRIBE HOW INJURY OCCURRED	
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	

STATE REGISTRAR



BK-609
PG-4898

VRS-Rev-2008T

274193 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:

05/28/2009

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

FORM NO. (REV.) 11/05

Rod White
STATE REGISTRAR
SIGNATURE AUTHENTICATED



EXHIBIT "B"

Legal Description for APN: 1219-10-001-032:

Lot 15, as shown on the Official Plat of CARY CREEK ESTATES, filed for record in the office of the County Recorder of Douglas County, Nevada, on May 25, 1977, as Document No. 09494.

Legal Description for APN: 1320-29-118-013:

Lot 135, as shown on the Official Plat of WINHAVEN, UNIT NO. 4, PHASE B, filed for record in the office of the County Recorder, recorded August 19, 1993, in Book 893 of Official Records, at Page 3899, Douglas County, State of Nevada, as Document No. 315527.

