

OFFICIAL RECORD

Requested By:
JOSEPH W. TILLSON

Document Transfer Tax - \$0 - #3
Assessor's Parcel No. 1420-18-214-081

Douglas County - NV
Karen Ellison - Recorder

Page: 1 Of 3 Fee: 16.00
BK-0210 PG- 1896 RPTT: 0.00

WHEN RECORDED AND
MAIL TAX STATEMENTS TO:

EDNA J. DUNN, Trustee
✓ 1359 Pine Valley Road
South Lake Tahoe, CA 96150



The grantor declares:
Documentary transfer tax is \$ -0-
[x] computed on full value of property conveyed,

AFFIDAVIT--DEATH OF GRANTOR , TRUSTEE AND BENEFICIARY

EDNA J. DUNN , of legal age, being first duly sworn, deposes and says:

That ROBERT EDWARD DUNN , the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as is named as the party in that certain Grant, Bargain and Sale Deed dated December 5, 2001, executed by STEVEN R. LARSEN and DONNA R. LARSEN, husband and wife, wherein the decedent is a Grantor of the ROBERT E. DUNN AND EDNA J. DUNN FAMILY TRUST dated February 4, 1999, as well as a beneficiary and co-trustee under said trust; it being further acknowledged that EDNA J. DUNN is the surviving trustee and beneficiary under said declaration of trust on the death of ROBERT E. DUNN .

The original Grant, Bargain and Sale Deed aforementioned is recorded as Document No.0530145 at Book 1201 Page 4871, on December 14, 2001, in the Official Records of Douglas County, State of Nevada, covering the following described property situated in the County of Douglas, State of Nevada:

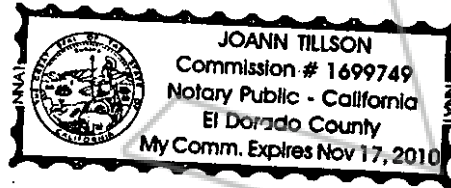
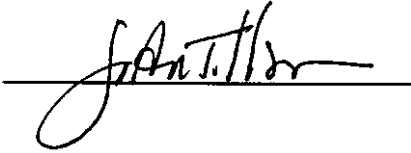
Lot 85, in Block F, as shown on the Official Map of SILVERADO HEIGHTS SUBDIVISION, filed for record in the office of the County Recorder of Douglas County, Nevada, on September 18, 1978 in Book 978, Page 1176, as Document No. 25326 and Certificate of Amendment of the final plat of said subdivision, recorded August 23, 1979, in Book 879 of Official Records, at Page 1725, as Document No. 35885, and Certificate of Amendment of the final plat of said subdivision recorded October 12, 1979 , in Book 1079, at Page 1039, as Document No. 37638, Official Records, Douglas County, Nevada.

Dated: 11/17/09

Edna J. Dunn
EDNA J. DUNN

STATE OF CALIFORNIA
COUNTY OF EL DORADO

Subscribed and sworn to (or affirmed) before me on this 17th day of NOVEMBER 2009, by EDNA J. DUNN, proved to me on the basis of satisfactory evidence to be the person who appeared before me.



AFFIDAVIT--DEATH OF GRANTOR , TRUSTEE AND BENEFICIARY
Assessor's Parcel No. 1420-18-214-081

COPY

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

2005 0003217

LOCAL FILE NUMBER		DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
1. Robert Edward DUNN		2. February 25, 2006		3a. Carson City		COUNTY OF DEATH	
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)		If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify)		SEX	
3b. Carson City		3c. Carson Tahoe Regional Medical Center		3e. Inpatient		4. Male	
RACE—(e.g., White, Black, American Indian, etc.) (Specify)		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input 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. 81		8. August 25, 1924	
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 (Specify)	
9a. California		9b. U.S.A.		10. 15 years		12. June Wyble	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)		KIND OF BUSINESS OR INDUSTRY		SURVIVING SPOUSE (If wife, give maiden name)	
13. ████████-6947		14a. PRX Installer		14b. Communications			
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		STREET AND NUMBER	
15a. California		15b. El Dorado		15c. South Lake Tahoe		15d. 1359 Pine Valley Rd	
FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last		INSIDE CITY LIMITS (Specify Yes or No)		15e. yes	
16. Ed Dunn		17. Magdalene Brehm					
INFORMANT—NAME (Type or Print)		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)					
18a. June E. Dunn, - Wife		18b. 1359 Pine Valley Road, South Lake Tahoe, CA 96150					
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State			
19a. Cremation		19b. FitzHenry's Crematory		19c. Carson City, NV			
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY			
20a. <i>[Signature]</i>		20b. 217		20c. 833 N. Edmonds Drive, Carson City, NV 89701			
21a. I, the best of my knowledge, deem that the time, date and place of death are due to the cause(s) stated.		21b. DATE SIGNED (Mo., Day, Yr.)		21c. HOUR OF DEATH		21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)	
<i>[Signature]</i>		21b. 2/28/06		21c. 2055		21d. Aguirre, Jose M.D.	
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.		22b. DATE SIGNED (Mo., Day, Yr.)		22c. HOUR OF DEATH		22d. PRONOUNCED DEAD (Mo., Day, Yr.)	
<i>[Signature]</i>		22b.		22c.		22d. ON	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print)		23b. LICENSE NUMBER		23c. DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)			
23a. Jose Aguirre, M.D., 1600 Medical Parkway, Carson City, NV		23b. 11479		23c. February 28, 2006		23d. DEATH DUE TO COMMUNICABLE DISEASE	
24a. REGISTRAR (Signature)		24b. DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
24a. <i>[Signature]</i>		24b. February 28, 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).)		PART (a)		PART (b)		PART (c)	
25. Myocardial Infarction / Cardiac Arrest		DUE TO, OR AS A CONSEQUENCE OF:		DUE TO, OR AS A CONSEQUENCE OF:		DUE TO, OR AS A CONSEQUENCE OF:	
OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part 1.		AUTOPSY (Specify Yes or No)		WAS CASE REFERRED TO CORONER (Specify Yes or No)			
25. Mesothelioma - COPD		26. no		27. yes			
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED	
28a.		28b.		28c. M		28d.	
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.		28f.		28g.			

TYPE PRINT IN PERMANENT BLACK INK

PRECEDENT

IF DEATH OCCURRED IN INSTITUTION, HANDBOOK REGARDING COMPLETION OF DEATH CERTIFICATE

MENTS

POSITION

CERTIFIER

DITIONS ANY WHICH GAVE REASON TO IMMEDIATE CAUSE OF THE EARLY DEATH

USE OF DEATH

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144056 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: NOV 08 2006

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

[Signature]
STATE REGISTRAR



No. 335770