

-19-

APN# 1424-00-002-001

OFFICIAL RECORD

Requested By:

MAUPIN, COX & LEGOY

Recording Requested by:

Name: Maupin, Cox & LeGoy

Address: 4785 Caughlin Parkway

City/State/Zip: Reno, NV 89519

Douglas County - NV
Karen Ellison - Recorder

Page: 1 OF 6 Fee: 19.00

BK-0811 PG- 4461 RPTT: 0.00



When Recorded Mail to:

Name: Cheryl R. Boskie, Co-Trustee

Address: 2110 Denio Drive

City/State/Zip: Reno, NV 89509

(for Recorder's use only)

Mail Tax Statement to:

Name: Cheryl R. Boskie

Address: 2110 Denio Drive

City/State/Zip: Reno, NV 89509

AFFIDAVIT - DEATH OF TRUSTEES
SUCCESSION OF SUCCESSOR TRUSTEES

(Title of Document)

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the personal information of any person or persons.
(Per NRS 239B.030)

-OR-

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the personal information of a person or persons as required by law: 440.380(1)(A) & 40.525.(5)
(State specific law)

Melissa D. Johnson
Signature Title

Melissa D. Johnson, Esq.
Printed Name

This page added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

This cover page must be typed or printed in black ink.

(Additional recording fee applies)

Recordation requested by:
Maupin, Cox & LeGoy

After recordation, return Affidavit to
the following address:
Cheryl R. Boskie, Co-Trustee
2110 Denio Drive
Reno, Nevada 89509

AFFIDAVIT - DEATH OF TRUSTEES
SUCCESSION OF SUCCESSOR TRUSTEES

STATE OF NEVADA)
)
COUNTY OF WASHOE)

Cheryl R. Boskie and Sidney N. Russell, of Reno, Nevada, being first duly sworn, do hereby swear under penalties of perjury under the laws of the State of Nevada, that the following statements are true:

1. Our father and mother, Delbert D. Russell and Marion A. Russell, the decedents mentioned in the attached certified copies of certificates of death, are the same persons named as parties in The Russell Family Trust Agreement dated February 11, 1981, as amended, as the Grantors and Co-Trustees of The Russell Family Trust.

2. We, Cheryl R. Boskie and Sidney N. Russell, the children of Delbert D. Russell and Marion A. Russell, are appointed pursuant to the terms of The Russell Family Trust Agreement, as amended, to serve as the successor Co-Trustees of The Russell Family Trust, and of the subtrusts that were established pursuant to the terms of the Trust Agreement following the death of our father, Delbert D. Russell, which are Trust A and Trust B.

3. We, Cheryl R. Boskie and Sidney N. Russell, have been serving as the successor Co-Trustees under The Russell Family Trust Agreement dated February 11, 1981, and of Trust A and Trust B, since the date that Marion A. Russell resigned as Trustee and appointed us as the successor Trustees on January 23, 2007.

4. At the time of the demise of the decedents, Delbert D. Russell and Marion A. Russell, they were the record owners, as Trustees under The Russell Family Trust Agreement dated February 11, 1981, of the patented and unpatented mining claims situated in the County of Douglas, State of Nevada, which are described in the Quitclaim Deed executed on February 11, 1981, and recorded on February 24, 1981, in Official Records of Douglas County, Nevada, as more particularly described on in Exhibit A, which is attached hereto and incorporated herein by reference.

5. This Affidavit is for the protection and benefit of all persons hereafter acquiring an interest in or dealing with the above-described mining claims and any other mining claims or real property of the trust located in Douglas County, Nevada.

Dated this 27th day of July, 2011.

Cheryl R. Boskie
Cheryl R. Boskie

Sidney N. Russell
Sidney N. Russell

STATE OF NEVADA)
) ss.
COUNTY OF WASHOE)

This Affidavit - Death of Trustees Succession of Successor Trustees was acknowledged before me on July 27, 2011, by Cheryl R. Boskie.



Jan Olivero
Notary Public

STATE OF NEVADA)
) ss.
COUNTY OF WASHOE)

This Affidavit - Death of Trustees Succession of Successor Trustees was acknowledged before me on July 27, 2011, by Sidney N. Russell.



Jan Olivero
Notary Public

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT

VITAL STATISTICS

Reno, Nevada

STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH — SECTION OF VITAL STATISTICS CERTIFICATE OF DEATH

ROLL 89 IMAGE 562
 LOCAL FILE NUMBER 2718

STATE FILE NUMBER
 COUNTY OF DEATH

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

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

PARENTS

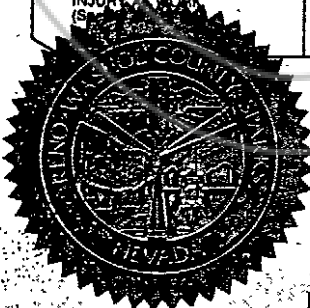
DISPOSITION

CERTIFIER

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

CAUSE OF DEATH

DECEASED—NAME First Middle Last 1. Delbert Dill RUSSELL			DATE OF DEATH (Month, Day, Year) 2. December 21, 1996		STATE FILE NUMBER
CITY, TOWN, OR LOCATION OF DEATH 3b. Reno			HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number) 3c. 800 Tamarack Drive		SEX 4. Male
RACE—(e.g., White, Black, American Indian, etc.) (Specify) 5. White		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) 7a. 74	UNDER 1 YEAR MOS : DAYS 7b. :
STATE OF BIRTH (If not U.S.A., name country) 9a. Alabama		CITIZEN OF WHAT COUNTRY 9b. USA		Decedent's Education. Specify highest grade completed. 10. 12	
SOCIAL SECURITY NUMBER 13. ██████████ 9564		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) 14a. Carpenter		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) 11. Married	
RESIDENCE—STATE 15a. Nevada		COUNTY 15b. Washoe		CITY, TOWN, OR LOCATION 15c. Reno	
FATHER—NAME First Middle Last 16. Sidney W. Russell		MOTHER—MAIDEN NAME First Middle Last Mary Freeman		STREET AND NUMBER 15d. 800 Tamarack Dr.	
INFORMANT—NAME (Type or Print) 18a. Marion Russell		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 15b. 800 Tamarack Drive, Reno, Nevada 89509		INSIDE CITY LIMITS (Specify Yes or No) 15e. Yes	
BURIAL, CREMATION, REMOVAL, OTHER (Specify) 19a. Cremation		CEMETERY OR CREMATORY—NAME 19b. Sierra Crematory		LOCATION—City or Town State 19c. Reno Nevada	
FUNERAL DIRECTOR—SIGNATURE (Or person acting as such) <i>[Signature]</i>		FUNERAL DIRECTOR'S NAME AND ADDRESS OF FACILITY 20a. Walton Funeral Home		LICENSE NUMBER 20b. 1601	
21a. To the best of my knowledge, death occurred at the time, date, and place and due to the cause(s) stated (Signature and Title) <i>[Signature]</i>		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 and Title) <i>[Signature]</i>		DATE SIGNED (Mo., Day, Yr.) December 27, 1996	
DATE SIGNED (Mo., Day, Yr.) 21b. :		HOUR OF DEATH 21c. :		HOUR OF DEATH 22c. 0130	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) 21d. Vernon O. McCarty, Coroner		PRONOUNCED DEAD (Mo., Day, Yr.) December 21, 1996		PRONOUNCED DEAD (Hour) 22e. 0130	
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print) 23a. Vernon O. McCarty, Coroner, P.O. Box VII130, Reno, Nevada 89520		LICENSE NUMBER 23b. WCC S. 35			
REGISTRAR <i>[Signature]</i>		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) 24b. December 27, 1996		DEATH DUE TO COMMUNICABLE DISEASE 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 I (a) Metastatic carcinoma of liver, lung and bone		DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(b)		DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
(c)		DUE TO, OR AS A CONSEQUENCE OF:		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 26. No		(Specify Yes or No) 27. Yes	
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify) 28a. :		DATE OF INJURY (Mo., Day, Yr.) 28b. :		HOUR OF INJURY 28c. M	
INJURY AT WORK (Specify)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify) 28f. :		DESCRIBE HOW INJURY OCCURRED 28d. :	
STREET OR R.F.D. No.		CITY OR TOWN		STATE	
28g. :		28e. :			



STATE REGISTRAR

No. 103833

This is to certify that the above is a true and legal copy of the certificate on file in this office.

Deputy Registrar *[Signature]*

Date: JAN 6 1997

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

WASHOE COUNTY HEALTH DISTRICT
VITAL STATISTICS - RENO, NEVADA
CERTIFICATE OF DEATH

2011008374
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 THE UNDERLYING CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) Marion A. RUSSELL		2. DATE OF DEATH (Mo/Day/Year) May 22, 2011		3a. COUNTY OF DEATH Washoe	
3b. CITY, TOWN, OR LOCATION OF DEATH Reno		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and number) Emeritus of Reno		3e. If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient(Specify) Residential Care Facility	
4 SEX Female		5 RACE White (Specify)		6 Hispanic Origin? Specify No - Non-Hispanic	
7a. AGE-Last birthday (Years) 88		7b. UNDER 1 YEAR MOS .DAYS		7c. UNDER 1 DAY HOURS MINS	
8. DATE OF BIRTH (Mo/Day/Yr) November 07, 1922		9a. STATE OF BIRTH (If not U.S.A. name country) Nevada		9b. CITIZEN OF WHAT COUNTRY United States	
10 EDUCATION 14		11 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Widowed		12. SURVIVING SPOUSE (if wife, give maiden name)	
13 SOCIAL SECURITY NUMBER 5447		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Homemaker		14b. KIND OF BUSINESS OR INDUSTRY Own Home	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Washoe		15c. CITY, TOWN OR LOCATION Reno	
15d. STREET AND NUMBER 2110 Denio Drive		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes		16. FATHER/PARENT - NAME (First Middle Last Suffix) Lucian Neal ANDERSON	
17 MOTHER/PARENT - NAME (First Middle Last Suffix) Lenora Henrietta JESSEN		18a. INFORMANT - NAME (Type or Print) Cheryl BOSKIE		18b. MAILING ADDRESS - (Street or R.F.D. No, City or Town, State, Zip) 2110 Denio Drive Reno, Nevada 89509	
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Sierra Crematory		19c. LOCATION City or Town State Reno Nevada 89501	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) BLAKE HOWE <i>SIGNATURE AUTHENTICATED</i>		20b. FUNERAL DIRECTOR LICENSE 622		20c. NAME AND ADDRESS OF FACILITY Walton's Funeral Home, Reno 875 West Second St Reno NV 89503	
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) SIGNATURE AUTHENTICATED DENVER JOEL MILLER JR. 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) stated (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) May 25, 2011		21c. HOUR OF DEATH 06:30		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		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) Denver Joel Miller Jr. M.D. 50 Kirman Ave #205 Reno, NV 89502		23b. LICENSE NUMBER 7330	
24a. REGISTRAR (Signature) BRIDGES SANDI <i>SIGNATURE AUTHENTICATED</i>		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) June 02, 2011		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				Interval between onset and death	
(a) Acute cardiopulmonary arrest				Minutes	
(b) Coronary artery disease				Interval between onset and death	
(c) Chronic obstructive pulmonary disease				Months	
(d) Dementia of alzheimers type				Interval between onset and death	
				Months	
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1.				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



0788495 Page: 5 Of 6 08/24/2011

BK- 0811
PG- 4465

VRS-Rev 20110104

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.

06/02/2011

DEPUTY REGISTRAR

May A R
SIGNATURE AUTHENTICATED

DATE ISSUED:
VENC0 (Rev) 12/09

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

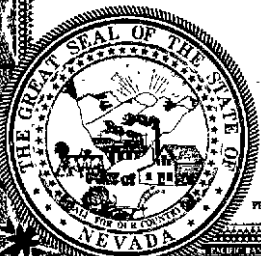


EXHIBIT A

PARCEL 1

The Minnesota Patented Mining Claim, Patent No. 46365, U.S. Survey No. 2543, situated in Section 19, T. 14 N., R. 24 E., M.D.B.&M.

PARCEL 2

Unpatented Mining Claim Minnesota Combination No. 1, Buckskin Mining District, Douglas County, as recorded August 20, 1951, Book P, Mining Records, Page 344, Douglas County, Nevada.

PARCEL 3

Unpatented Mining Claim Minnesota Combination No. 2, Buckskin Mining District, Douglas County, as recorded August 20, 1951, Book P, Mining Records, Page 344, Douglas County, Nevada.

PARCEL 4

Unpatented Mining Claim Minnesota Combination No. 3, Buckskin Mining District, Douglas County, as recorded August 20, 1951, Book P, Mining Records, Page 345, Douglas County, Nevada.

PARCEL 5

Unpatented Mining Claim Minnesota Combination No. 4, Buckskin Mining District, Douglas County, as recorded August 20, 1951, Book P, Mining Records, Page 345, Douglas County, Nevada.

PARCEL 6

Unpatented Mining Claim Minnesota Combination No. 5, Buckskin Mining District, Douglas County, as recorded October 22, 1951, Book P, Mining Records, Page 358, Douglas County, Nevada.

PARCEL 7

Unpatented Mining Claim Minnesota Extension, Buckskin Mining District, Douglas County, as recorded February 4, 1957, Book Q, Mining Records, Page 492, Douglas County, Nevada. Amended location recorded March 20, 1957, Book Q, Page 503, Mining Records.

Claims Nos. 1, 2, 3, 4 and 5 Amended location recorded December 7, 1954, Book Q, Pages 24, 25, 26 and 28 Mining Records.

All of the above unpatented claims being adjacent and contiguous to the Minnesota patented claim hereinabove referred to as Parcel No. 1 and all being situated in Section 19, T. 14 N., R. 24 E., M.D.B.&M., in what is known as the Buckskin Mining District.