

DOC # 795380  
01/05/2012 02:37PM Deputy: GB  
OFFICIAL RECORD  
Requested By:  
Anderson, Dorn, & Rader, L.  
Douglas County - NV  
Karen Ellison - Recorder  
Page: 1 of 4 Fee: \$17.00  
BK-112 PG-529 RPTT: 0.00



*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)*

  
Lauren Gregorek  
ANDERSON, DORN & RADER, LTD.

APN: 1320-36-002-055

**RECORDING REQUESTED BY:**

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

**WHEN RECORDED MAIL TO:**

Ruth Rouse  
1466 Rabbitbrush Drive  
Gardnerville, NV 89410

**MAIL TAX STATEMENTS TO:**

Ruth Rouse  
1466 Rabbitbrush Drive  
Gardnerville, NV 89410

**AFFIDAVIT OF DEATH OF TRUSTEE**

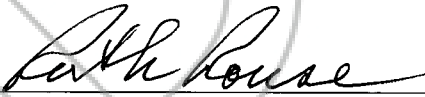
I, Ruth Rouse, the undersigned, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

- (1) By instrument dated April 22, 1997, ROGER C. DENNIS and RUTH ROUSE executed the ROUSE DENNIS FAMILY TRUST ("Trust").
- (2) Said trust appointed RUTH ROUSE to serve as sole Trustee upon the death or incapacity of ROGER C. DENNIS.
- (3) ROGER C. DENNIS died on June 9, 2011 at Gardnerville, Nevada, a resident of Douglas County, Nevada. Attached hereto as Exhibit "A" is a certified copy of the death certificate of said ROGER C. DENNIS.
- (4) Pursuant to the terms of the Trust, I have assumed the responsibilities of sole Trustee.



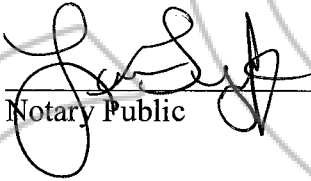
- (5) The following described real property is part of the trust estate: See Exhibit "B" attached.
- (6) I am authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as the Successor Trustee with respect to the trust's interest in the described property.
- (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 20 of December, 2011, at Reno, Nevada.

  
 \_\_\_\_\_  
 RUTH ROUSE, Trustee

STATE OF NEVADA                    )  
   ) ss:  
 COUNTY OF WASHOE                )

SUBSCRIBED AND SWORN TO before me this 20 day of December, 2011, by RUTH ROUSE.

  
 \_\_\_\_\_  
 Notary Public



CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH

VITAL STATISTICS

CERTIFICATE OF DEATH

2011009277

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEASED

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) <b>Roger Currie DENNIS</b>		2. DATE OF DEATH (Mo/Day/Year) <b>June 09, 2011</b>		3a. COUNTY OF DEATH <b>Douglas</b>	
3b. CITY, TOWN, OR LOCATION OF DEATH <b>Gardnerville</b>		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and number) <b>1466 Rabbitbrush Drive</b>		3e. If Hosp. or Inst. Indicate DOA,OP/Emer. Rm; Inpatient(Specify) <b>Home</b>	
3d. SEX <b>Male</b>		7a. AGE-Last birthday (Years) <b>67</b>		8. DATE OF BIRTH (Mo/Day/Yr) <b>January 18, 1944</b>	
5. RACE White (Specify)		6. Hispanic Origin? Specify No - Non-Hispanic		7b. UNDER 1 YEAR MOS   DAYS   HOURS   MINS	
7c. UNDER 1 DAY HOURS   MINS		9a. STATE OF BIRTH (if not U.S.A., name country) <b>Florida</b>		9b. CITIZEN OF WHAT COUNTRY <b>United States</b>	
10. EDUCATION <b>17</b>		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) <b>Ruth ROUSE</b>	
13. SOCIAL SECURITY NUMBER <b>4452</b>		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life; Even If Retired) <b>Business And Consulting</b>		14b. KIND OF BUSINESS OR INDUSTRY <b>Defense</b>	
15a. RESIDENCE - STATE <b>Nevada</b>		15b. COUNTY <b>Douglas</b>		15c. CITY, TOWN OR LOCATION <b>Gardnerville</b>	
15d. STREET AND NUMBER <b>1466 Rabbitbrush Drive</b>		15e. INSIDE CITY LIMITS (Specify Yes or No) <b>Yes</b>		Ever in US Armed Forces? <b>Yes</b>	
16. FATHER/PARENT - NAME (First Middle Last Suffix) <b>Robert DENNIS</b>			17. MOTHER/PARENT - NAME (First Middle Last Suffix) <b>Patricia CURRIE</b>		
18a. INFORMANT- NAME (Type or Print) <b>Ruth ROUSE</b>		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) <b>1466 Rabbitbrush Drive Gardnerville, Nevada 89410</b>			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) <b>Cremation</b>		19b. CEMETERY OR CREMATORY - NAME <b>Fitzhenry's Crematory</b>		19c. LOCATION City or Town State <b>Carson City Nevada 89701</b>	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) <b>JAMES SMOLENSKI</b> <i>SIGNATURE AUTHENTICATED</i>		20b. FUNERAL DIRECTOR LICENSE <b>217</b>		20c. NAME AND ADDRESS OF FACILITY <b>FitzHenry's Carson Valley Funeral Home</b> <b>1380 Highway 395 N Gardnerville NV 89410</b>	
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) <b>KELLE BROGAN M.D.</b> <i>SIGNATURE AUTHENTICATED</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) stated. (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) <b>June 13, 2011</b>		21c. HOUR OF DEATH <b>08:40</b>		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) <b>Kelle Brogan M.D. 429 Elm Street Reno, NV 89503</b>			
23b. LICENSE NUMBER <b>6000</b>		24a. REGISTRAR (Signature) <b>JENELLE ENGLISH</b> <i>SIGNATURE AUTHENTICATED</i>			
24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) <b>June 16, 2011</b>		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) <b>Acute Myelogenous Leukemia</b>				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(b)				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(c)				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(d)				Interval between onset and death	
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) <b>No</b>	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) <b>No</b>					
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 112  
PG-531

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VRS-Rev.20110104

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CERTIFIED COPY OF VITAL RECORDS

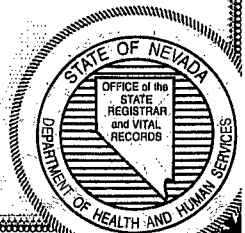
This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED: 06/17/2011

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



*Patricia Currie*  
STATE REGISTRAR  
*SIGNATURE AUTHENTICATED*





## **EXHIBIT "B"**

### **Legal Description:**

A portion of Parcel 8-C and 8-D, as set forth on Parcel Map No. 2 for K.W. Emerson, Inc., filed in the office of the Douglas County Recorder on February 27, 1990 in Book 290, Page 3907 as Document No. 220873 of Official Records as further describes as follows:

Parcel 1 and 2 as set forth on Parcel Map LDA 01-072 for Rouse Living Trust and David T. and Debra L. McNeil filed in the office of the Douglas County Recorder on January 30, 2002 in Book 0102, Page 8892, as Document No. 533508 of Official Records

**APN:** 1320-36-002-055

**Property Address:** 1466 Rabbitbrush Drive, Gardnerville, NV 89410

