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**RECORDING REQUESTED BY
AND WHEN RECORDED MAIL TO:**

✓ W. Charlene Kallas,
1374 Branden Lane
Gardnerville, NV 89410

Doc Number: **0820212**

03/19/2013 09:19 AM
OFFICIAL RECORDS
Requested By
FERRUZZO & FERRUZZO

DOUGLAS COUNTY RECORDERS
Karen Ellison - Recorder

Page: 1 of 3 Fee: \$ 16.00
Bk: 0313 Pg: 4656



Deputy gb

APN: 1220-16-411-014

AFFIDAVIT – DEATH OF JOINT TENANT

STATE OF CALIFORNIA)
COUNTY OF ORANGE)

W. CHARLENE KALLAS, being of legal age, and being first duly sworn, deposes and says:

That **JAMES ALEX KALLAS**, the deceased, mentioned in the attached certified copy of Certificate of Death, is the same person as **JAMES A. KALLAS**, named as one of the parties in that certain GRANT, BARGAIN, SALE DEED, executed by **RAY M. PARRISH** and **BARBARA A. PARRISH**, TRUSTEES OF THE PARRISH FAMILY TRUST DATED APRIL 7, 1993, to **JAMES A. KALLAS** and **W. CHARLENE KALLAS**, HUSBAND AND WIFE AS JOINT TENANTS, recorded on July 15, 2003, as Document Number 0583300, of Official Records in the Office of the County Recorder of Dogulas, Nevada, to that certain property commonly known as 1293 Alicia Circle, #1 & #2, Gardnerville, Nevada, legally described as follows:

Lot 4, Block B, as shown on the Final Map of MOUNTAIN SHADOWS APARTMENTS, recorded February 5, 1992, in Book 292, Page 472, Document No. 270423, Official Records of Douglas County, State of Nevada.

Dated: Feb 28, 2013 2013

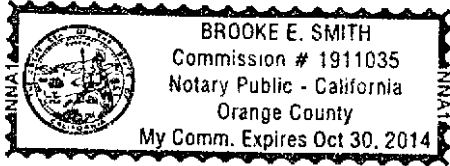

W. CHARLENE KALLAS

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STATE OF CALIFORNIA)
COUNTY OF ORANGE)

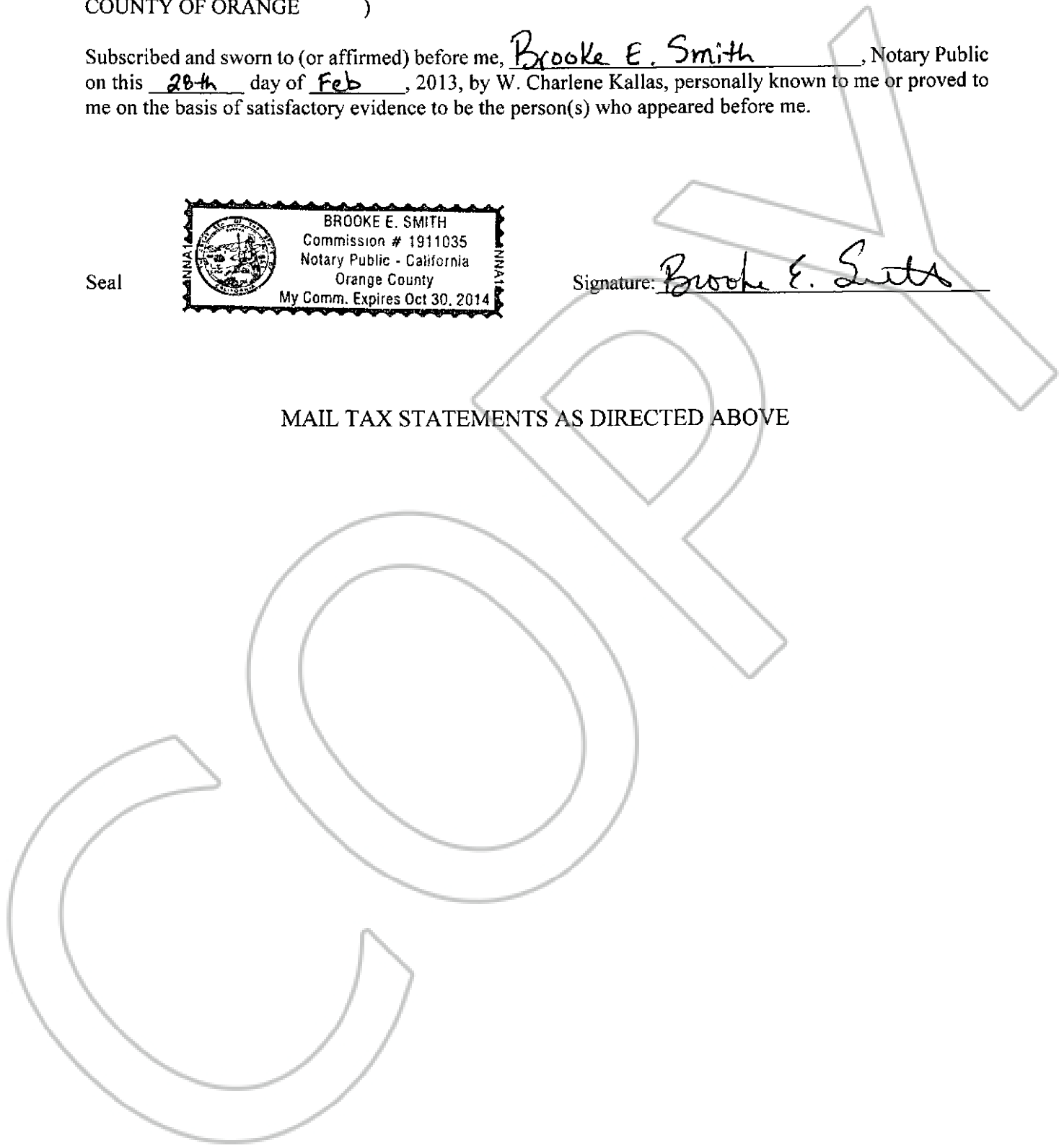
Subscribed and sworn to (or affirmed) before me, Brooke E. Smith, Notary Public on this 20th day of Feb, 2013, by W. Charlene Kallas, personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Seal



Signature: Brooke E. Smith

MAIL TAX STATEMENTS AS DIRECTED ABOVE



STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF ORANGE HEALTH CARE AGENCY

1200 N. MAIN STREET, SUITE 100-A SANTA ANA, CA 92701

3052012187031

CERTIFICATE OF DEATH

3201230014868

Form with sections: DECEASED'S PERSONAL DATA, USUAL RESIDENCE, SPOUSE(S) AND MARITAL INFORMATION, FINAL DISPOSITION, PLACE OF DEATH, CAUSE OF DEATH, PHYSICIAN'S CERTIFICATION, CORONER'S USE ONLY. Includes fields for name, date of birth, sex, marital status, occupation, residence, and cause of death.

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003181385

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA } COUNTY OF ORANGE

DATE ISSUED OCT 26 2012

This is a true and exact reproduction of the document officially registered and placed on file in the office of the VITAL RECORDS SECTION, ORANGE COUNTY HEALTH CARE AGENCY.

Signature of Eric G. Handler, M.D., Health Officer, Orange County, California.

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE