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Doc Number: **0832401**

10/21/2013 11:32 AM

OFFICIAL RECORDS

Requested By:

MARILYN L SKENDER

APN: 1420-07-110-007

✓ When Recorded Mail to:  
Janus Leta Baez  
2690 Thoroughbred Place  
Arroyo Grande, CA 93420

DOUGLAS COUNTY RECORDERS  
Karen Ellison - Recorder

Page: 1 Of 3 Fee: \$ 16.00

Bk: 1013 Pg: 4189



Deputy: sg

Mail Tax Statements to:  
Janus Leta Baez  
2690 Thoroughbred Place  
Arroyo Grande, CA 93420

**AFFIDAVIT BY SURVIVING JOINT TENANT**

STATE OF CALIFORNIA )  
 ) ss:  
COUNTY OF SAN LUIS OBISPO )

Janus Leta Baez, formerly known as "Janus Leta Johnson" and as "Janus L. Johnson," being first duly sworn, deposes and says:

Affiant is the surviving spouse of Laurence William Johnson, a joint grantee in a deed dated October 22, 1975, wherein Melvin F. Springmeyer and Marjorie J. Springmeyer, husband and wife, and James M. Lentz and Rose A. Lentz, husband and wife, were the Grantors, and Laurence William Johnson and Janus L. Johnson, husband and wife, as joint tenants, were Grantees, conveying real property situate in the County of Douglas, State of Nevada, described as follows:

Lot 7, as shown on the Map of Valley View Subdivision filed in the office of the County Recorder of Douglas County, Nevada, on November 12, 1957, as File No. 13793.

APN: 1420-07-110-007

Such deed was recorded on January 9, 1976, as Document No. 86619, Official Records, Douglas County, Nevada.

Laurence William Johnson died in County of San Luis Obispo, State of California, on February 12, 2012, and is the identical person as Laurence William Johnson named as the deceased in the certified copy of the Certificate of Death

///

attached hereto, marked Exhibit "A", and by this reference made a part hereof. Janus Leta Baez, formerly known as Janus L. Johnson, is the surviving joint tenant with right of survivorship.

Dated this 25<sup>th</sup> day of September 2013.

Janus Leta Baez  
Janus Leta Baez

Subscribed and sworn to before me on this 25<sup>th</sup> day of September, 2013, by Janus Leta Baez, who proved to me on the basis of satisfactory evidence to be the person who appeared before me.

(Seal)

Skyl Christakos  
NOTARY PUBLIC in and for said  
County and State.  
San Luis Obispo County,  
California



**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF SAN LUIS OBISPO**  
 SAN LUIS OBISPO, CALIFORNIA

3052012029008

**CERTIFICATE OF DEATH**

3201240000263

1. NAME OF DECEASED - FIRST (Given) <b>LAURENCE</b>		2. MIDDLE <b>WILLIAM</b>		3. LAST (Family) <b>JOHNSON</b>	
4. DATE OF BIRTH mm/dd/yyyy <b>03/31/1920</b>					
5. AGE YRS. <b>91</b>		6. PLACES ONE YEAR States Days		7. SEX <b>M</b>	
9. BIRTH STATE/FOREIGN COUNTRY <b>NM</b>		10. SOCIAL SECURITY NUMBER <b>8570</b>		11. EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LINK	
12. MARITAL STATUS (Date of Dec'd)		13. DATE OF DEATH mm/dd/yyyy <b>02/12/2012</b>		14. HOUR (24 Hours) <b>1900</b>	
15. DECEASED'S RACE - Up to 3 races may be listed (see worksheet on back) <b>CAUCASIAN</b>					
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED. <b>AEROSPACE ENGINEER</b>				18. KIND OF BUSINESS OR INDUSTRY (e.g. grocery store, road construction, employment agency, etc.) <b>AEROSPACE</b>	
19. YEARS IN OCCUPATION <b>40</b>					
20. DECEASED'S RESIDENCE (Street and number, or nearest) <b>2890 THOROUGHbred PL.</b>					
21. CITY <b>ARROYO GRANDE</b>		22. COUNTY/PROVINCE <b>SAN LUIS OBISPO</b>		23. ZIP CODE <b>93420</b>	
24. YEARS IN COUNTY <b>24</b>		25. STATE/FOREIGN COUNTRY <b>CA</b>			
26. INFORMANT'S NAME, RELATIONSHIP <b>JANUS JOHNSON, WIFE</b>					
27. INFORMANT'S MAILING ADDRESS (Street and number, or nearest, city or town, state and zip) <b>2890 THOROUGHbred PL., ARROYO GRANDE, CA 93420</b>					
28. NAME OF SURVIVING SPOUSE (Last, First, Middle) <b>JANUS</b>		29. MIDDLE <b>LETA</b>		30. LAST (BIRTH NAME) <b>BAEZ</b>	
31. NAME OF FATHER/PARENT-FIRST <b>THOMAS</b>		32. MIDDLE <b>HOUSTON</b>		33. LAST <b>JOHNSON</b>	
34. BIRTH STATE <b>AL</b>		35. NAME OF MOTHER/PARENT-FIRST <b>ETHEL</b>			
36. MIDDLE <b>F.</b>		37. LAST (BIRTH NAME) <b>BLACK</b>		38. BIRTH STATE <b>TX</b>	
39. DEPOSITION DATE mm/dd/yyyy <b>03/09/2012</b>					
40. PLACE OF FINAL DISPOSITION <b>DUNCAN VALLEY CEMETERY FOURTH ST. &amp; TIPTON TRAIL, DUNCAN, AZ 85534</b>					
41. TYPE OF DISPOSITION <b>TR/BU</b>					
42. SIGNATURE OF EXAMINER <b>ARTHUR J. SPOO</b>					
43. LICENSE NUMBER <b>5789</b>					
44. NAME OF FUNERAL ESTABLISHMENT <b>MARSHALL-SPOO SUNSET FUNERAL CH</b>					
45. LICENSE NUMBER <b>FD-985</b>					
46. SIGNATURE OF LOCAL REGISTRAR <b>PENNY BORENSTEIN, MD</b>					
47. DATE mm/dd/yyyy <b>02/16/2012</b>					
101. PLACE OF DEATH <b>ARROYO GRANDE CARE CENTER</b>					
102. CITY <b>SAN LUIS OBISPO</b>		103. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>1212 FARROLL AVENUE</b>		104. CITY <b>ARROYO GRANDE</b>	
105. CAUSE OF DEATH Enter the cause of events - external, internal, or composite - that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or Ventricular fibrillation without also giving the etiology. DO NOT ABBREVIATE. <b>RESPIRATORY ARREST</b>					
106. IMMEDIATE CAUSE Final disease or condition resulting in death <b>ASPIRATION PNEUMONIA</b>		107. LONG TERM CAUSE Underlying cause (disease or injury that initiated the events resulting in death) LAST <b>DEBILITY-POOR ORAL INTAKE</b>		108. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>METASTATIC PROSTATE CANCER</b>	
109. TIME OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 108 (If yes, last type of operation and date)					
110. IF PEOPLE FREQUENTLY IN CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LINK					
114. CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE SHOWN ON THIS CERTIFICATE Deceased Reported By Date mm/dd/yyyy <b>02/01/2012</b>		115. SIGNATURE AND TITLE OF CERTIFIER The Type, Address, or Office's Name, License Number, Zip Code <b>BALA KRISHNA BHAT M.D.</b> <b>336 SOUTH HALCYON, ARROYO GRANDE, CA 93420</b>		116. LICENSE NUMBER <b>A43451</b>	
117. DATE mm/dd/yyyy <b>02/12/2012</b>		118. CERTIFY THAT EMPLOYMENT OCCURRED AT THE HOUR, DATE, AND PLACE SHOWN IN THE CAUSE OF DEATH MANNER OF DEATH: <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined			
119. EMPLOYER'S NAME (If applicable) <b>02/12/2012</b>		120. EMPLOYER'S ADDRESS (If applicable) <b>02/12/2012</b>		121. HOURS OF WORK <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LINK	
122. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)					
123. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
124. LOCATION OF INJURY (Street and number, or location, and city, and zip)					
125. SIGNATURE OF CORONER / DEPUTY CORONER					
126. DATE mm/dd/yyyy		127. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER			
STATE REGISTRAR					

BK 1013  
PG 4191  
10/21/2013

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CERTIFIED COPY OF VITAL RECORDS  
 STATE OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SAN LUIS OBISPO COUNTY CLERK-RECORDER.



DATE ISSUED:

OCT 03 2013

*Julie L. Rodewald*  
 JULIE L. RODEWALD, CLERK-RECORDER

This copy not valid unless prepared on engraved border displaying date, seal and signature of the County Clerk-Recorder.



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE