Doc Number: **0838621** 

02/21/2014 03:53 PM OFFICIAL RECORDS Requested By

TAMMIANE HURSON

DOUGLAS COUNTY RECORDERS Karen Ellison - Recorder

Page: 1 0f 4

Fee: \$ 17.00

Bk: 0214 Pg: 3653

A.P.N.:

1220-24-601-051

File No:

When Recorded return to, and mail Tax Statements to:

Tammiane Hurson 1966 Arabian Lane Gardnerville, NV 89460

## **AFFIDAVIT - TERMINATING JOINT TENANCY**

Tammiane Hurson, of legal age, being first duly sworn, deposes and says:

That Robert F. Hurson, the decedent mentioned in the attached certified copy of Certificate of Death is the same person as Robert F. Hurson named as one of the parties in that certain Grant, Bargain and Sale Deed dated 8-11-11 executed by WElls Fargo Bank. N/A, successor by merger with Machovia Mortgage FSB, to Robert F. Hurson and Tammiane Hurson as joint tenants, recorded as Document No. 788754 on 8-29-11 in Book 811 Page 5623 of Official Records of Douglas County, Nevada covering the following described property situated in the County of Douglas, State of Nevada:

See attached legal description

**Tammiane Hurson** 

Date

STATE OF

NEVADA

) :ss. )

COUNTY OF

DOUGLAS

This instrument was acknowledged before me on

2-21-14 by

(My commission expires:





Parcel 2, as shown on the Parcel Map for ALLEN BENSON BEAUCHAMP AND JANE BEAUCHAMP, recorded July 7, 1978, in Book 778, Page 257, as Document No. 22739, Official Records, Douglas County, Nevada..



File No.:

### **NOTARY INFORMATION**

NOTARY PUBLIC: PLEASE PROVIDE US WITH THE FOLLOWING INFORMATION:
Your Name: (NOTARY) (NNTHA FAIDA Address: 1185 WATSUN CT, GAMPHENILLE NU 8941C
Address: 1785 WATSUN CT, GAMPHENILLE NU 8941C
Daytime Phone Number: 115-181-4406
State: NEWADA  County: DOUGLAS
In the event , a(n) Corporation comes across a problem with the Notary section I,
(notary public) authorizes , a(n) Corporation to
make changes to the notary section only.
Notary Public s/gnature  Reproduced by First American Title Insurance 1/2001



**DEPARTMENT OF HEALTH AND HUMAN SERVICES** 

DIVISION OF HEALTH VITAL STATISTICS

18 DECEASED NAME (FIRST MIDDL	CERTIFIC		ं इस	STATE FILE NUMBER
Robert Francis			2. DATE OF DEATH (Mo/Day/	Year) 3a COUNTY OF DEATH
	HURSON DEATH 3C HOSPITAL OR OTHER INST		January 23, 2014	
_	and number)		e street   3e.if Hosp, or Inst. in Inpatient(Specify)	dicate DOA OP/Emer, Rm. 4. SEX
Reno 5 RACE White	Renown Rec	gional Medical Center	Intensive	Care Unit (ICU)
(Specify)	6. Hispanic Ongin? Sp No - Non-Hispanic	becify 7a, AGE-Last birthday (Years)	76 UNDER 1 YEAR 7c. UND	R 1 DAY 8. DATE OF BIRTH (Mo/Da
9a. STATE OF BIRTH (If not U.S.A.	'	44		MINS October 14, 196
name country) Washington	9b. CITIZEN OF WHAT COUNTRY 10 United States	DEDUCATION 11 MARRIED, NE	VER MARRIED, WIDOWED,	12 SURVIVING SPOUSE (If wife, oil
13 SOCIAL SECURITY NUMBER	14a: USUAL OCCUPATION (Give Kin	14 DIVORCED (Spec		maiden name) Tammiane KAVAI
3213	of Working Life, Even if Retired)	Programmer	14b. KIND OF BUSINESS O	Jaron III OO AI
15a RESIDENCE - STATE 15b C	OUNTY 15c, CITY, TO		"Audio & \	/ideo Forces? No
Nevada	<u> </u>			LIMITS (Specify
16. FATHER/PARENT - NAME (First A	Hiddle Last Suffix)		6 Arabian Lane	or No.) Yes
Will	iam HURSON 🧺 🤼	A TANDITHE OF	ARENT - NAME (First Middle	ACUPED ***
18a, INFORMANT-NAME (Type or Prin		LING ADDRESS (Street or R.I		
Tammy HUF	OUN / / NOW	1000 America	an Lane Gardnerville, N	evada 89410
19a. BURIAL, CREMATION, REMOVAL	OTHER (Specify) 19b. CEMETERY OF	R CREMATORY NAME		CATION City or Town State
bunai	7/7. ***********************************	Genoa Cemetery	1 7/1/A	Genoa Nevada
20a FUNERAL DIRECTOR - SIGNATU		FUNERAL \ 1	E AND ADDRESS OF FACILIT	
CURT KO		CTOR LICENSE	Walton's Funera	als and Cremations
TRADE CALL - NAME AND ADDRESS	UTHENTICATED	823 \ \ \   / / / / /	1521 Church Street	Gardnerville NV 89410
		1 × 1×.		
5 3 21s. To the best of my knowledge	a death occurred at the time date and	lace and 22a. On the		
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BK 02 14 PG : 3656 2/2 1/20 14

VRS-Rev-20120523e



# 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:

SIGNATURE AUTHENTICATED



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