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Doc Number: **0849442**

09/15/2014 02:27 PM

OFFICIAL RECORDS

Requested By:
GARY WORKMAN

DOUGLAS COUNTY RECORDERS
Karen Ellison - Recorder

Page: 1 of 4 Fee: \$ 17.00
BK: 0914 Pg: 2569



Deputy ke

Assessor's Parcel Number: _____

✓ Recording Requested By:

Name: Gary Workman

Address: 355 Yancy Road

City/State/Zip Madison, AL
35758

Real Property Transfer Tax:

\$ _____

Affidavit of Death of Joint Tenant

(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies)

This cover page must be typed or legibly hand printed.

AFFIDAVIT OF DEATH OF JOINT TENANT

STATE OF California }

SS

COUNTY OF Ventura }

BEFORE ME, the undersigned Notary Public, personally appeared, Gary L. Workman, "Affiant", who upon being duly sworn, deposes and states upon his ~~or her~~ oath or affirmation, the following:

1. My name is Gary L. Workman and I reside at _____.

2. I owned real property as a joint tenant with Carol Y. Workman, such real property located in Douglas County, State of Nevada, described as follows:

See Attached Legal Description.

Title deed is recorded in Book 0195, Page 2494 in the office of the register of deeds in the county and state aforesaid.

3. Carol Y. Workman, my joint tenant identified above, departed this life on the 23rd day of January, 20 13. A copy of the death certificate of Carol Y. Workman is attached.

4. On the date of the death of Carol Y. Workman, the above described real estate was owned by Gary L. Workman and Carol Y. Workman, as joint tenants and the joint tenancy had not been severed by any act of the parties or by operation of law.

5. Affiant is the sole surviving joint tenant of the property described above.

Dated this the 11th day of September, 20 14.

Gary L. Workman
Affiant

SWORN TO AND SUBSCRIBED before me this the 11 day of September,
2014.


NOTARY PUBLIC

My Commission Expires: February 1, 2017



ALABAMA

Center for Health Statistics

ALABAMA CERTIFICATE OF DEATH

State File Number **101 2013-02025**

1. DECEASED LEGAL NAME Carol Ann Workman				2. DATE AND TIME OF DEATH Jan 23, 2013 1130					
3. ALIAS NAME (IF ANY) None Given				4. DATE AND TIME PRONOUNCED DEAD					
5. COUNTY OF DEATH Madison		6. CITY, TOWN OR LOCATION OF DEATH AND ZIP Madison, 35756		7. PLACE OF DEATH 118 Whitworth Court					
8. HISPANIC ORIGIN No		9. RACE White		10. SEX Female		11. SERVED IN ARMED FORCES No			
12. AGE 67	UNDER 1 YEAR MONTHS	UNDER 1 DAY DAYS	HRS	MINS	13. DATE OF BIRTH Dec-12, 1945		14. STATE OF BIRTH Ohio		
15. SOCIAL SECURITY NUMBER ██████████ 8445		16. MARITAL STATUS Married				17. SURVIVING SPOUSE Gary Lee Workman		18. RESIDENCE STATE Alabama	
19. RESIDENCE COUNTY Madison		20. CITY, TOWN OR LOCATION AND ZIP Madison, 35756		21. STREET ADDRESS 118 Whitworth Court					
22. INFORMANT NAME, RELATIONSHIP AND ADDRESS Gary Lee Workman, Relationship: Husband 118 Whitworth Court Madison, Alabama 35756						23. OCCUPATION Software Quality Control		24. BUSINESS OR INDUSTRY Defense Contracting	
25. FATHER'S NAME Paul Yavorsky				26. MOTHER'S MAIDEN NAME Gene Studdard					
27. DISPOSITION OF BODY Cremation		28. DATE OF DISPOSITION Jan 24, 2013		29. CEMETERY OR CREMATORY Laughlin Crematory		30. LOCATION Huntsville, Alabama			
31. FUNERAL HOME NAME AND ADDRESS Laughlin Service Inc, 2320 Bob Wallace Ave Sw, Huntsville, AL 35805							32. LICENSE NUMBER		
33. FUNERAL DIRECTOR Cynthia L Woods				34. LICENSE NUMBER 06116		35. DATE SIGNED Jan 28, 2013			
36. MEDICAL CERTIFICATION: <input checked="" type="checkbox"/> CERTIFYING PHYSICIAN <input type="checkbox"/> MEDICAL EXAMINER <input type="checkbox"/> CORONER									
37. NAME Cynthia Baker MD				38. LICENSE NUMBER 21095		39. DATE SIGNED Jan 24, 2013			
40. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH 2400 John Hawkins Parkway, Hoover, Alabama 35244									
41. REGISTRAR Catherine Molchan Donald						42. DATE FILED Jan 28, 2013			

CAUSE OF DEATH

43. PART I. DISEASES, INJURIES OR COMPLICATIONS THAT CAUSED DEATH					INTERVAL
IMMEDIATE CAUSE	A. Lung Cancer				Unknown
	DUE TO (OR AS A CONSEQUENCE OF):				
UNDERLYING CAUSE	B. DUE TO (OR AS A CONSEQUENCE OF):				
	C. DUE TO (OR AS A CONSEQUENCE OF):				
	D. DUE TO (OR AS A CONSEQUENCE OF):				
44. PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH					
45. MANNER OF DEATH Natural Cause		46. PREGNANCY IN LAST 43 DAYS No	47. AUTOPSY Unk	48. FINDINGS CONSIDERED	49. DATE AND TIME OF INJURY
50. HOW INJURY OCCURRED					
51. INJURY AT WORK		52. PLACE OF INJURY		53. LOCATION OF INJURY	

ADPH HS E2/REV 07-10

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2013-126-777-9

January 28, 2013

Catherine M. Donald
Catherine Molchan Donald
State Registrar of Vital Statistics

OK 0914 9/15/2014
P.6 2572
0849242 Page: 1 of 4