



KAREN ELLISON, RECORDER

Recording Requested By
J. WILMAR JENSEN

Return to
JENSEN & JENSEN
1514 H Street
Modesto, CA 95354

AFFIDAVIT – DEATH OF JOINT TENANT

STATE OF CALIFORNIA)
County of Stanislaus)

TINA HANSEN, also known as, CHRISTINA M. HANSEN, of legal age, being first duly sworn, deposes and says:

That DAVID STEPHEN HANSEN, the decedent mentioned in the attached certified copy of the Certificate of Death is the same person as DAVID S. HANSEN named as one of the parties in that certain Grant, Bargain, Sale Deed dated September 5, 2001, executed by JUSTO JAIMERENA, and MARIA J. JAIMERENA, Trustees of THE JUSTO JAIMERENA AND MARIA J. JAIMERENA, TRUSTEES UNDER DEC OF TRUST dated May 26, 1999, to DAVID S. HANSEN and TINA HANSEN, husband and wife, as Joint Tenants with rights of survivorship, recorded as Instrument No. 0523429, in Book 0901, at Page 5709, on September 24, 2001 of Official Records of Douglas County, State of Nevada, covering the following described real property in the County of Douglas, State of Nevada:

(See Exhibit "A" Attached Hereto)

APN: 1320-33-402-048, 1320-33-402-047; 1320-33-402-046, 1320-33-402-045

DATED: 10/13, 2014 Tina Hansen
TINA HANSEN, also known as
CHRISTINA M. HANSEN,

State of California)
County of Stanislaus)

Subscribed and sworn to (or affirmed) before me, Julie Hasley, on this 13 day of October, 2014, by TINA HANSEN, also known as CHRISTINA M. HANSEN, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Julie Hasley
Notary Public
My Commission Expires: 6-20-17

VERIFICATION

I, the undersigned, say: I am the surviving tenant, the Declarant of the foregoing Affidavit; I have read the foregoing and know the contents thereof; the same is true of my own knowledge.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed 10/13, 2014, at Oakdale, California.

Tina Hansen
TINA HANSEN, also known as
CHRISTINA M. HANSEN,

STATE OF CALIFORNIA)
COUNTY OF STANISLAUS)

On October 13, 2014, before me, Julie Hasley, a Notary Public, personally appeared TINA HANSEN, also known as CHRISTINA M. HANSEN, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/~~are~~ subscribed to the within instrument and acknowledged to me that ~~he~~/~~she~~/~~they~~ executed the same in ~~his~~/~~her~~/~~their~~ authorized capacity(ies), and that by ~~his~~/~~her~~/~~their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Julie Hasley
Notary Public
My Commission Expires: 6-20-17

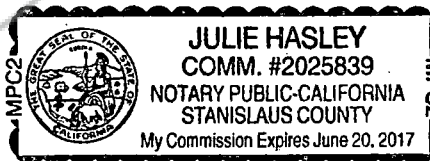


EXHIBIT "A"

All that real property situated in the County of Douglas, State of Nevada, bounded and described as follows:

A parcel of land situated in the Town of Gardnerville, County of Douglas, State of Nevada, being a portion of the Southwest 1/4 of Section 33, Township 13 North, Range 20 East, M.D.B. & M., more particularly described as follows:

Parcels 1, 2, 3 and 4 as set forth on that certain AMBROSINI PARCEL MAP, being Parcel 2 of Parcel Map No. 3 for RICHARD PASCALE, filed for record in the Office of the County Recorder of Douglas County, Nevada, on June 2, 1983, Book 683, Page 107, as Document No. 81112.

Assessor's Parcel Nos. 1320-33-402-049, 1320-33-402-047
1320-33-402-046, 1320-33-402-045

Together with an undivided 4/4 interest in the Common Area as set forth in the here-in-above mentioned subdivision.

Address: 1429 Mission Street, #A, B, C & D
Gardnerville, Nevada

12/04/2006, 20060082990

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

HEALTH SERVICES AGENCY
STANISLAUS COUNTY
PUBLIC HEALTH DIVISION

CERTIFICATE OF DEATH

Form containing personal data, residence, spouse information, funeral details, cause of death, and physician certification.



000330390

This is to certify that this document is a true copy of the official record filed with the Stanislaus County Health Services Agency.

Signature of John Walker, M.D., Local Registrar of Vital Statistics

DATE ISSUED 01-25-2004

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

12/04/2006, 20060082990

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

