

RECORDING REQUESTED BY

First American Title Insurance
Company Mortgage Services
Division-NTP of Nevada

**AND WHEN RECORDED
RETURN TO AND MAIL TAX
STATEMENTS TO:**

Maria Margaret Huarte
1450 Edlesborough Cir
Gardnerville, NV 89410

Space Above This Line for
Recorder's Use Only

A.P.N. 1320-33-312-014

File No.: 8425248n (KO)

Affidavit - Death of Trustee

State of Nevada)

)ss.

County of Douglas)

Maria Margaret Huarte ("Declarant") is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

1. **Martin Jose Huarte** ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on **March 28, 2014** at **Gardnerville, NV** (city and state of death).
2. Decedent is the same person named as the trustee named in that certain Declaration of Trust dated **November 12, 2004** executed by **MARTIN JOSE HUARTE AND MARIA MARGARET HUARTE, TRUSTEES OF THE HUARTE FAMILY TRUST DATED NOVEMBER 12, 2004** as trustor(s) (the "Trust").
3. Decedent as a trustee is the same person who was named as a grantee in that certain dated which was recorded as Instrument No. **0699108** in Book **0407**, Page **4043**, of Official Records of **Douglas** County, Nevada as legally described as follows:

LOT 9, IN BLOCK A, AS SET FORTH ON FINAL SUBDIVISION MAP FSM #1006-3 OF CHICHESTER ESTATES, PHASE 3, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON SEPTEMBER 11, 1997 IN BOOK 997, AT PAGE 2121, AS DOCUMENT NO. 421409, OFFICIAL RECORDS

4. Declarant is the successor trustee under the Trust. The Trust was in effect at the date of the death of the Decedent and has not been revoked. Declarant has consented to act as trustee under the Trust.

Dated:

DECLARANT:

Maria Margaret Huarte
Maria Margaret Huarte

State of NV)
)ss
County of Douglas)

SUBSCRIBED AND SWORN TO (or affirmed) before me the undersigned, a Notary Public in and for said County Douglas and State Nevada, this 1st day of December, 2014 by Maria Margaret Huarte, personally know to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me..

WITNESS my hand and official seal.

Signature Cara L Johnson

My Commission Expires: 9-22-15

Notary Name: Cara L. Johnson Notary Phone: 775-771-0138

Notary Registration Number: 03840142 County of Principal Place of Business Washoe

This area for official notarial seal



STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH
VITAL STATISTICS

CERTIFICATE OF DEATH

2014004921

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

1a. DECEASED NAME (FIRST, MIDDLE, LAST, SUFFIX) Martin Jose HUARTE		2. DATE OF DEATH (Mo/Day/Year) March 28, 2014		3a. COUNTY OF DEATH Douglas	
3b. CITY, TOWN, OR LOCATION OF DEATH Gardnerville		3c. HOSPITAL OR OTHER INSTITUTION - Name (if not either, give street and number) 1223 Pleasantview Dr.		3d. If Hosp. or Inst. indicate DOA, OP/Emer. Rm. (inpatient) (Specify) Home	
4. SEX Male		7a. AGE-Last birthday (Years) 73		7b. UNDER 1 YEAR MOS DAYS	
5. RACE, White (Specify) White		6. Hispanic Origin? Specify Yes - SPANISH BASQUE		7c. UNDER 1 DAY HOURS MINS	
8. DATE OF BIRTH (Mo/Day/Yr) August 20, 1940		9a. STATE OF BIRTH (If not U.S.A., name country) Spain		9b. CITIZEN OF WHAT COUNTRY United States	
10. EDUCATION 5		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) Maria TORO	
13. SOCIAL SECURITY NUMBER 4275		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired) Landscaper/gardner		14b. KIND OF BUSINESS OR INDUSTRY Landscaping	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Gardnerville	
15d. STREET AND NUMBER 1223 Pleasantview Dr.		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes			
16. FATHER/PARENT - NAME (First, Middle, Last, Suffix) Pedro HUARTE			17. MOTHER/PARENT - NAME (First, Middle, Last, Suffix) Maria VILLANUEVA		
18a. INFORMANT - NAME (Type or Print) Maria HUARTE			18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 1223 Pleasantview Dr. Gardnerville, Nevada 89460		
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Walton's Sierra Crematory		19c. LOCATION - City or Town - State Carson City Nevada 89706	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) CURT KOESTLER SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE 823		20c. NAME AND ADDRESS OF FACILITY Walton's Funerals and Cremations 1521 Church Street Gardnerville NV 89410	
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) JONATHAN MCCALED MD SIGNATURE AUTHENTICATED			22a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) March 31, 2014		21c. HOUR OF DEATH 16:40		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			22d. PRONOUNCED DEAD (Mo/Day/Yr)		22e. PRONOUNCED DEAD AT (Hour)
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Jonathan McCaleb MD 5538 Longley Lane Ste. B Reno, NV 89511				23b. LICENSE NUMBER 14163	
24a. REGISTRAR (Signature) NICOLE SHORE SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) April 01, 2014		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
PART I					
(a) Congestive Heart Failure Interval between onset and death					
(b) Dilated Ischemic Cardiomyopathy Interval between onset and death					
(c) Coronary Artery Disease Interval between onset and death					
(d) Atherosclerosis Interval between onset and death					
PART II - OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part I.				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes					
28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY	
28d. DESCRIBE HOW INJURY OCCURRED					
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY- At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	

STATE REGISTRAR

525962

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.

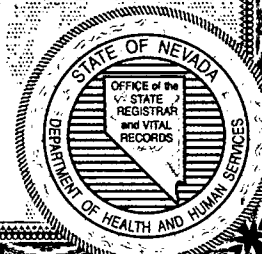
DATE ISSUED:

04/03/2014

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

STATE REGISTRAR
R. W. White
SIGNATURE AUTHENTICATED

VRS-Rev-20120523a



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Exhibit "A"

- Real property in the City of **GARDNERVILLE**, County of **DOUGLAS**, State of **NEVADA**, described as follows:

LOT 9, IN BLOCK A, AS SET FORTH ON FINAL SUBDIVISION MAP FSM #1006-3 OF CHICHESTER ESTATES, PHASE 3, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON SEPTEMBER 11, 1997 IN BOOK 997, AT PAGE 2121, AS DOCUMENT NO. 421409, OFFICIAL RECORDS.

Being all of that certain property conveyed to MARTIN JOSE HUARTE AND MARIA MARGARET HUARTE, TRUSTEES OF THE HUARTE FAMILY TRUST DATED NOVEMBER 12, 2004 from MARTIN JOSE HUARTE AND MARIA MARGARET HUARTE, HUSBAND AND WIFE AS JOINT TENANTS, by deed dated APRIL 09, 2007 and recorded APRIL 13, 2007 IN BOOK 0407 PAGE 4043 of official records.

APN #: **1320-33-312-014**

Commonly known as: 1450 EDLESBOROUGH CIR, GARDNERVILLE, NV 89410