

APN# 1318-15-110-001

Recording Requested by:

Name: First American Title Insurance
Company

Address: P.O. Box 645

City/State/Zip: Zephyr Cove, NV 89448

Order Number: 141-2475775

Affidavit Death of Trustee
(Title of Document)

(for Recorder's use only)

Recorder Affirmation Statement


Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

-OR-

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the social security number of a person or persons as required by law:

NRS 440 3 80
(State specific law)



Signature

12/24/14

Title

Karen Peterson

Print Signature

This page added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

(Additional recording fee applies)

RECORDING REQUESTED BY
First American Title Insurance
Company of Nevada

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

Pickett Living Trust
4795 Industrial way
Benicia, CA
94510

Space Above This Line for
Recorder's Use Only

A.P.N. 1318-15-110-001

File No.: 141-2475775 (NMP)

Affidavit - Death of Trustee

State of Nevada)
County of Douglas)ss.
)

Michael J. Pickett ("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. **Jean Nathel Pickett** ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on **June 9, 1998** at **Danville, CA** (city and state of death).
2. Decedent is the same person named as the trustee named in that certain Declaration of Trust dated **March 10, 1988** executed by **Donald E. Pickett and Jean N. Pickett** as trustor(s) (the "Trust").
3. Decedent as a trustee is the same person who was named as a grantee in that certain **Grant, Bargain and Sale Deed** dated **February 28, 1990** which was recorded as Instrument No. **0606373** in Book **0304**, Page **02284**, of Official Records of **Douglas** County, Nevada as legally described as follows:

PARCEL NO. 1:

UNIT NO. 1 AS SHOWN ON THAT CERTAIN SUBDIVISION MAP ENTITLED "OFFICIAL PLAT OF PINEWILD, MARLA BAY, DOUGLAS COUNTY, NEVADA", RECORDED JUNE 26, 1973 IN BOOK 673, PAGES 1089 ET SEQ., OFFICIAL RECORDS IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA.

PARCEL NO. 2:

THE EXCLUSIVE RIGHT TO USE AND POSSESSION OF THOSE CERTAIN PATIO AREAS ADJACENT TO SAID UNIT DESIGNATED AS "RESTRICTED COMMON AREAS" ON THE SUBDIVISION MAP REFERRED TO IN PARCEL 1 ABOVE.

PARCEL NO. 3:

AN UNDIVIDED NINETEEN AND TWO TENTHS PER CENT (19.2%) INTEREST AS TENANT IN COMMON IN AND TO THAT PORTION OF THE REAL PROPERTY DESCRIBED ON THE SUBDIVISION MAP REFERRED TO IN THE DESCRIPTION IN PARCEL 1 ABOVE, DEFINED IN THE AMENDED DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS OF PINEWILD, A CONDOMINIUM PROJECT, RECORDED ON MARCH 11, 1974, IN BOOK 374, AT PAGE 193 ET SEQ. AS LIMITED COMMON AREA AND THEREBY ALLOCATED TO THE UNIT DESCRIBED IN PARCEL 1 ABOVE, AND EXCEPTING UNTO GRANTOR NON-EXCLUSIVE EASEMENTS FOR INGRESS AND EGRESS, UTILITY SERVICES, SUPPORT, ENCROACHMENTS, MAINTENANCE AND REPAIR OVER THE COMMON AREAS DEFINED AND SET FORTH IN SAID DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS.

PARCEL NO. 4:

NON-EXCLUSIVE EASEMENTS APPURTENANT TO PARCEL 1 ABOVE, FOR INGRESS AND EGRESS, UTILITY SERVICES, SUPPORT ENCROACHMENTS, MAINTENANCE AND REPAIR, OVER THE COMMON AREAS AS DEFINED AND SET FORTH IN THE DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS OF PINEWILD, MORE PARTICULARLY DESCRIBED IN THE DESCRIPTION OF PARCEL 3 ABOVE.

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: December 9, 2014

DECLARANT:



Michael J. Pickett

State of California)
County of Solano)

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

On December 22, 2014 before me, Patricia Marie Carey,
(here insert name and title of the officer)

personally appeared Michael Pickett

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.



Signature Patricia Marie Carey

(Seal)

OPTIONAL INFORMATION

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of Affidavit - Death of Trustee (Jean N Pickett) containing 2 pages, and dated Dec 9, 2014.

The signer(s) capacity or authority is/are as:

- Individual
- Attorney-in-Fact
- Corporate Officer(s) _____ Title(s) _____
- Guardian/Conservator
- Partner - Limited/General
- Trustee(s)
- Other: _____

representing: _____
Name(s) of Person(s) or Entity(ies) Signer is Representing

Additional Information

Method of Signer Identification

Proved to me on the basis of satisfactory evidence:
 form(s) of identification credible witness(es)

Notarial event is detailed in notary journal on:

Page # _____ Entry # _____

Notary contact: _____

Other

Additional Signer(s) Signer(s) Thumbprint(s)

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY of CONTRA COSTA
MARTINEZ, CALIFORNIA

CERTIFICATE OF DEATH

39807002969

STATE FILE NUMBER		USE BLACK INK OR INK ERASURES, WHITEOUT OR ALTERATIONS				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEASED—FIRST (Given)		2. MIDDLE		3. LAST (FAMILY)			
JEAN		NATHAL		PICKETT			
4. DATE OF BIRTH—M/M/D/D/C/C/Y		5. AGE YRS.		6. SEX		7. DATE OF DEATH—M/M/D/D/C/C/Y	
08/13/1919		78		F		06/09/1998	
8. STATE OF BIRTH		10. SOCIAL SECURITY NO.		11. MILITARY SERVICE		12. EDUCATION—YEARS COMPLETED	
AZ		1332		NONE		12	
14. RACE		15. MARRIAGE—SPECIAL		16. MARRIAGE—STATUS		17. USUAL EMPLOYER	
WHITE		NONE		MARRIED		SELF-EMPLOYED	
18. OCCUPATION		19. KIND OF BUSINESS		20. YEARS IN OCCUPATION			
HOMEMAKER		OWN HOME		58			
21. RESIDENCE—(STREET AND NUMBER OR LOCATION)							
25 MONTAIR PL.							
22. CITY		23. COUNTY		24. ZIP CODE		25. STATE OR FOREIGN COUNTRY	
DANVILLE		CONTRA COSTA		94526		CA	
26. NAME, RELATIONSHIP				27. MAILED ADDRESS (STREET AND NUMBER OR RURAL ROUTE, NUMBER, CITY OR TOWN, STATE, ZIP)			
DONALD E. PICKETT—HUSBAND				25 MONTAIR PL., DANVILLE, CA 94526			
28. NAME OF SURVIVING SPOUSE—FIRST		29. MIDDLE		30. LAST (MAIDEN NAME)			
DONALD		E.		PICKETT			
31. NAME OF FATHER—FIRST		32. MIDDLE		33. LAST		34. BIRTH STATE	
RICHARD				JUDD		AZ	
35. NAME OF MOTHER—FIRST		36. MIDDLE		37. LAST (MAIDEN)		38. BIRTH STATE	
DELTA		OLIVE		STAPLEY		AZ	
39. DATE M/M/D/D/C/C/Y		40. PLACE OF FINAL DISPOSITION					
06/15/1998		QUEEN OF HEAVEN CEMETERY, LAFAYETTE, CA					
41. TYPE OF DISPOSITION		42. SIGNATURE OF REGISTRAR		43. LICENSE NO.		44. DATE M/M/D/D/C/C/Y	
HD		<i>David Fisher</i>		7918		06/10/1998	
45. NAME OF FUNERAL DIRECTOR		46. LICENSE NO.		47. SIGNATURE OF LOCAL REGISTRAR		48. DATE M/M/D/D/C/C/Y	
OAK PARK HILLS CHAPEL		FD 1073		<i>David Fisher</i>		06/10/1998	
101. PLACE OF DEATH		102. IF HOSPITAL, SPECIFY ONE		103. FACILITY OTHER THAN HOSPITAL		104. COUNTY	
OWN RESIDENCE		NONE		NONE		CONTRA COSTA	
105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION)		106. CITY		107. DEATH WAS CAUSED BY (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C AND D)			
25 MONTAIR PL.		DANVILLE					
108. IMMEDIATE CAUSE		109. TIME INTERVAL BETWEEN DEATH AND DEATH		110. DEATH REPORTED TO CORONER		111. AUTOPSY PERFORMED	
(A) METASTATIC COLON CANCER		6 MOS.		YES		YES	
DUE TO (B)				NO		NO	
DUE TO (C)				NO		NO	
DUE TO (D)				NO		NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107							
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE.							
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED HEREON AND CAUSE STATED HEREON APPEARED SINCE DECEASED HAD BEEN ALIVE M/M/D/D/C/C/Y		115. SIGNATURE AND TITLE OF CERTIFIER		116. LICENSE NO.		117. DATE M/M/D/D/C/C/Y	
07/15/1997 03/27/1998		<i>David Fisher</i>		C076578		06/10/1998	
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP		119. MANNER OF DEATH		120. INJURY AT WORK (Y/N) INJURY DATE M/M/D/D/C/C/Y		121. PLACE OF INJURY	
DAVID FISHER, MD, 5201 NORRIS CANYON RD., SAN RAMON, CA 94583		NATURAL		NO			
122. DESCRIBE HOW INJURY OCCURRED; INCIDENTS WHICH RESULTED IN INJURY		123. CORONER'S USE ONLY		124. SIGNATURE OF CORONER OR DEPUTY CORONER			
		ACCIDENT		<i>Stephen J. Wain</i>			
125. LOCATION (STREET AND NUMBER OF LOCATION AND CITY, ZIP)		126. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE M/M/D/D/C/C/Y		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	
						CONTRA COSTA COUNTY RECORDER	
STATE REGISTRAR		FAX AUTH. #		CENSUS TRACT			
		5663 LC		345201			



CERTIFIED COPY OF VITAL RECORDS

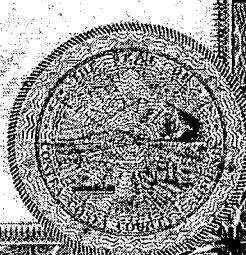
STATE OF CALIFORNIA } SS
COUNTY OF CONTRA COSTA

This is a true and exact reproduction of the document officially registered and placed on file in the office of the CONTRA COSTA COUNTY RECORDER.

ATTEST: *Stephen J. Wain*
CONTRA COSTA COUNTY RECORDER

DATE ISSUED: **MAR 13 2013**

This copy not valid unless prepared on engraved border displaying date and signature of Deputy Recorder.



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE