

DOUGLAS COUNTY, NV

2015-861720

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\$18.00 Pgs=5

05/08/2015 03:39 PM

ETRCO, LLC

KAREN ELLISON, RECORDER

APN# : 1220-24-701-034

**Recording Requested By:**

Western Title Company, Inc.

**Escrow No.:** 071295-MHK

**When Recorded Mail To:**

C/O Matuska Law Office

2310 South Carson Street Ste 6

Carson City NV 89701

**Mail Tax Statements to: (deeds only)**

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(space above for Recorder's use only)

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)

**Signature** \_\_\_\_\_

*M Kelsh*

M kelsh

Escrow Officer

\_\_\_\_\_  
**Affidavit of Death**

This page added to provide additional information required by NRS 111.312  
(additional recording fee applies)

**When Recorded Mail to:**

**Matuska Law Offices, Ltd.  
2310 South Carson Street, Suite 6  
Carson City, NV 89701**

SPACE ABOVE RESERVED FOR RECORDER'S USE

**AFFIDAVIT OF DEATH**

STATE OF NEVADA )

) SS.

COUNTY OF CARSON CITY )

I, KATHLEEN ANN HOLESAPPLE, Trustee of the KATHLEEN ANN HOLESAPPLE REVOCABLE TRUST u/i/d April 28, 2004, do hereby swear under penalty of perjury that the following assertions are true to the best of my knowledge and belief:

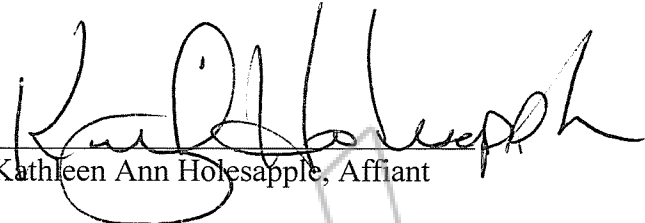
1. I am over 18 years old of age, am of sound mind, and if called to testify would competently testify to the following.

2. ROY DEAN HOLESAPPLE died on July 29, 2006 in Reno, Nevada. Attached as **Exhibit 1** is a certified copy of the death certificate.


3. I am Decedent's daughter.

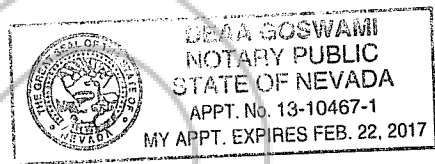
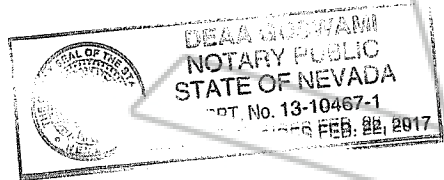
4. Decedent was survived by Barbara Holesapple, Kathleen Ann Holesapple, Ronald J. Holesapple, Brenda D. Hamrick and Sandra E. Dickey.

DATED: 27 day of April, 2015

  
Kathleen Ann Holesapple, Affiant

SUBSCRIBED and SWORN to before me  
this 27 day of April 2015.

  
\_\_\_\_\_  
Notary Public



*COPIES*

**EXHIBIT "A"**

All that certain real property situate in the County of Douglas, State of Nevada, described as follows:

A parcel of land located within a portion of Section 24, Township 12 North, Range 20 East, Mount Diablo Meridian, Douglas County, Nevada described as follows:

Commencing at the East one-quarter (1/4) corner of Section 24, Township 12 North, Range 20 East, M.D.M., as shown on that Parcel Map for Joseph E. and Maxine Moore and Gene A. and Peggy P. Eppler as recorded June 14, 1993, as Document No. 280300; thence North  $89^{\circ}55'40''$  West, 2,019.88 feet; thence South  $00^{\circ}04'20''$  West, 25.00 feet; thence North  $89^{\circ}55'40''$  West, 136.97 feet to THE POINT OF BEGINNING; thence South  $00^{\circ}04'20'$  West, 635.81 feet; thence North  $89^{\circ}43'42''$  West, 206.49 feet; thence North  $00^{\circ}04'59''$  East, 635.09 feet; thence South  $89^{\circ}55'40'$  East, 206.37 feet to THE POINT OF BEGINNING.

The Basis of Bearing of this description is identical to that Parcel Map for Joseph E. and Maxine Moore and Gene A. and Peggy P. Eppler, as Document No. 280300.

NOTE: The above metes and bounds description appeared previously in that certain Grant, Bargain and Sale Deed recorded in the office of the County Recorder of Douglas County, Nevada on November 2, 2012, as Document No. 812231, in Book 1112, Page 694, and re-recorded on February 14, 2014 as Document No. 838382, in Book 214, Page 2703, of Official Records.

Assessor's Parcel Number(s):  
1220-24-701-034

# WASHOE COUNTY DISTRICT HEALTH DEPARTMENT

## VITAL STATISTICS

Reno, Nevada

### STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES

#### DIVISION OF HEALTH — SECTION OF VITAL STATISTICS

#### CERTIFICATE OF DEATH

2006002438

	LOCAL FILE NUMBER			STATE FILE NUMBER		
TYPE OR PRINT IN PERMANENT BLACK INK  IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	1. Roy Dean HOLESAPPLE		2. July 29, 2006		3a. Washoe	
	3b. Reno		3c. Washoe Medical Center		3e. Inpatient	
DECEASED	5. White		6. No		7a. 65	
	8. January 27, 1941		9a. Washington		10. 10	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	13. [REDACTED]-6264		14a. Dry Waller		14b. Construction	
	15a. Nevada		15b. Douglas		15c. Gardnerville	
PARENTS	16. Irry J. Holesapple		17. Eleana Andersen			
	18a. Barbara Holesapple		18b. PO Box 582, Gardnerville, Nevada 89410			
DISPOSITION	19a. Cremation		19b. Mountain View Crematory		19c. Reno Nevada	
	20a. [Signature]		20b. 21		20c. 425 Stoker Avenue Reno, Nevada 89503	
CERTIFIER	21a. [Signature]		21b. DATE SIGNED (Mo., Day, Yr.)		21c. HOUR OF DEATH	
	21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22a. [Signature]		22b. DATE SIGNED (Mo., Day, Yr.)	
CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST	23a. Vernon O. McCarty, Coroner, P.O. Box 11130, Reno, Nevada 89520		23b. WCC S.35			
	24a. [Signature]		24b. September 13, 2006		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
CAUSE OF DEATH	PART I (a) Right cerebral infarction		PART II (a) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.		26. Yes	
	(b) Thrombotic & Atherosclerotic occlusion of carotid arteries				27. 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. PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)		28f. LOCATION		
28g. STREET OR R.F.D. No.		28h. CITY OR TOWN		28i. STATE		

STATE REGISTRAR

No. 348452

This is to certify that the above is a true and legal copy of the certificate on file in this office.

*Mary A. Anderson*

Deputy Registrar: \_\_\_\_\_

Date: \_\_\_\_\_

SEP 14 2006

