**DOUGLAS COUNTY, NV** 

Rec:\$16.00

2016-878091

\$16.00 Pgs=3 03/14/2016 12:07 PM

ETRCO, LLC

KAREN ELLISON, RECORDER

**APN#**: 1022-14-001-014

Minden, NV 89423

Recording Requested By:	
Western Title Company	
When Recorded Mail To:	
When Recorded Mail To: Louis J. Best	

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. (Per NRS 440.380 (1)(5)

& 4Q.525 (5))

Signature

Traci Adams

**Escrow Officer** 

### **Affidavit Death of Joint Tenant**

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

#### AFFIDAVIT - DEATH OF JOINT TENANT

Viola A. Best, of legal age, being first duly sworn, deposes and says:

That Louis J. Best, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Louis J. Best named as one of the parties in that certain Grant, Bargain, Sale Deed dated 1/10/1989 executed by Byron H. Boulanger and Shirley M. Boulanger, husband and wife to Louis J. Best and Viola A. Best as joint tenants, recorded as instrument No. 194379, on 1/13/1989, in Book189, Page 1604, of Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada:

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

Lot 6, in Block A, as shown on the map of TOPAZ RANCH ESTATES UNIT NO. 4, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on November 16, 1970, in Book 1 of Maps, Page 224, as Document No. 50212.

Dated (

Surviving Joint Tenant

Viola A. Best

STATE OF NEVADA

COUNTY OF \_\_\_\_\_\_\_

This instrument was acknowledged before me on

by Viola A. Best

TRACI ADAMS
Notary Public - State of Nevada

}SS

Appointment Recorded In Douglas County No: 69-1891-5 - Expires January 5, 2019

Motery Public

#### **CERTIFICATION OF VITAL RECORD**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

# CERTIFICATE OF DEATH

2014010040

TYPE OR	g- <u></u>				STATE FILE NUMBER									
PRINT IN	ra DECE	ased-name (	FIRST MIDDL	E.LAST, SUFFIX	) tony conse	2. DATE OF DEA	TH (Mo/Day/	Sa. COUNTY OF DEATH						
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PARENIS	Kenneth BEST Pauline HUBBARD													
ote salah dan ote salah dan	18b: NFORMANT: NAME (Type or Print) 18b: MAILING ADDRESS (Street or R.F. D. No, City at Town, State, Zip)  Viola BEST 4085 Tile Court Wellington, Nevada 89444													
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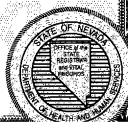
535323

### 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:

STATE REGISTRAR



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