**DOUGLAS COUNTY, NV** 

KAREN ELLISON, RECORDER

2017-899007

Rec:\$20.00 Total:\$20.00

05/23/2017 03:07 PM

MARK HUSSMAN

APN# 1320-32-801-021 **Recording Requested by:** Mark Hussman Name: Address: 1208 Gilman Avenue

Gardnerville, Nevada 89410 City/State/Zip: Order Number: none

> 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 PB.036

(State specific law)

**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 of Nevada AND WHEN RECORDED RETURN TO AND MAIL TAX STATEMENTS TO: Helen Flizabeth Hussman

Helen Elizabeth Hussman 1208 Gilman Ave Gardnerville, NV 89410

> Space Above This Line for Recorder's Use Only

A.P.N. 1320-32-801-021

File No.: ()

### **Affidavit - Death of Trustee**

State of Nevada )
)ss.
County of Douglas )

**Helen Elizabeth Hussman** ("Declarant") is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

- William Louis Hussman ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on February 4, 2010 at Minden, NV (city and state of death).
- Decedent is the same person named as the trustee named in that certain Declaration of Trust dated August 30, 1982 executed by William Louis Hussman and Helen Elizabeth Hussman as trustor(s) (the "Trust").
- 3. Decedent as a trustee is the same person who was named as a grantee in that certain **Individual Grant Deed** dated **May 25, 1994** which was recorded as Instrument No. **345088** in Book **0894**, Page **5281**, of Official Records of **Douglas** County, Nevada as legally described as follows:

  See attacked Exhibit
- 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 The Trust was in effect at the date of the death of the Decedent and has not been revoked.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: August 8, 2013

DECLARANT:  Helen Elizabeth Hussman
State of Nevada )
)ss ) ) County of Douglas )
SUBSCRIBED AND SWORN TO (or affirmed) before me the undersigned, a Notary Public in and for said County
WITNESS my hand and official seal. This area for official notarial seal
Signature  SUZANNE CHEECHOV  NOTARY PUBLIC  STATE OF NEVADA  My Commission Expires: 05-12-19  Certificate No: 99-36456-5
Notary Name: SIZGNINE Chelche Notary Phone: 775-782-5411
Notary Registration Number: <u>49.31456ち</u> County of Principal Place of Business

# **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**DIVISION OF HEALTH VITAL STATISTICS CERTIFICATE OF DEATH** 

2010002408

TYPE OR			STATE FILE NUMBER							
PRINT IN	1a DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX)					2. DATE OF DEATH (Mo/Day/Year) 3a. COUNTY OF DEATH				
PERMANENT BLACK INK	William Louis MOSSIMAIN					ebruary 04, 201	0	Douglas		
E	3b. CITY, TOWN, OR LOCATIO	N OF DEATH 3c. HOS	PITAL OR OTHER INSTITU	TION -Name(If not eithe	er, give street	3e,If Hosp. or Inst.	ndicate DOA	,OP/Emer. Rm.	4. SEX	
DECEDENT	Minden	and num		Eighth St		Inpatient(Specify)	Home	\	Male	
DECEDENT	5. RACE White		6. Hispanic Origin? Specif	y 7a. AGE-Last	7b. UND	ER 1 YEAR 7c. UND	ER 1 DAY	8. DATE OF BIR	TH (Mo/Day/Yr)	
	(Specify)		No - Non-Hispanic	birthday (Years)	B8 MOS	DAYS HOURS	MINS	Aululo O	7, 1921	
E IF DEATH	9a. STATE OF BIRTH (If not U.S	B.A. I9b. CITIZEN C	F WHAT COUNTRY 10.EC			RRIED. WIDOWED.	I 12 SURV	VIVING SPOUSE		
OCCURRED IN INSTITUTION	name country) California United States 14 DIVORCED				D (Specify) Married PARTNER Helen Elizabeth PORTER					
SEE HANDBOOK	13. SOCIAL SECURITY NUMBER		. USUAL OCCUPATION (Give Kind of Work Done During Most of			14b. KIND OF BUSINESS OR INDUS			STRY Ever in US Armed	
REGARDING COMPLETION OF	1295	Working Life,	Working Life, Even if Retired) Pilot			Airline			Forces? No	
RESIDENCE ITEMS	15a RESIDENCE - STATE	15b, COUNTY	15c. CITY, TOWN	OR LOCATION	15d. STREET A	AND NUMBER			INSIDE CITY IITS (Specify Yes	
<u> </u>	Nevada	Douglas	M	linden	1587 Eight	h St	Na.	or N		
PARENTS	16. FATHER - NAME (First Mid	- ,		17 MOTH	IER - NAME (	irst Middle Last	Suffix)	The same of the sa	l.	
ARENTO	Otto Louis HUSSMAN . Mathilda JEPSEN									
<u> </u>	18a. INFORMANT- NAME (Type		18b. MAILIN			City or Town, State, 2			_	
E		HUSSMAN		ar ar	87 Eighth	St Minden, Neva		76		
DISPOSITION	19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) 19b. CEMETERY OR CREMATORY - NAME			\	19c. LOCATION City or Town State					
£	Cremat			alton's Sierra Crer				City Nevada	89706	
	20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such)  RICK NOEL  20b. FUNERAL DIRECTOR LICENSE					AND ADDRESS OF FACILITY  Walton's Funerals and Cremations				
FF	SIGNATURE AUTHENTICATED 620				/1	1521 Church Street Gardnerville NV 89410				
TRADE CALL	TRADE CALL - NAME AND ADD	RESS		1					<del></del>	
			d at the time, date and plac	and 🚡 22a.		examination and/or				
		LLE LYNN BRO	SIGNATURE AUTHENT DGAN M.D.	ICATED 18 5 the m	me, date and pi	ace and due to the c	ause(s) state	d. (Signature & 1	(itle)	
CERTIFIER	21b. DATE SIGNED (Mo	(Day/Yr) 21c	HOUR OF DEATH	22a. the tri	DATE SIGNED	(Mo/Day/Yr)	22c. H	OUR OF DEATH	i	
	due to the cause(s) stated. (Signature & Title) SIGNATURE AUTHENTICATED    WELLE LYNN BROGAN M.D.   21b. DATE SIGNED (Mo/Day/Yr)   21c. HOUR OF DEATH   22b DATE   22b DATE   22c DATE   22d PRON   21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER   22d PRON   22d PRON									
	21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER  (Type or Print)  22d. PRONOUNCE					D DEAD (Mo/Day/Yr	D (Mo/Day/Yr) 22e. PRONOUNCED DEAD AT (Hour)			
444	23a. NAME AND ADDRESS OF	CERTIFIER (RHYSICIA	N ATTENDING PHYSICIAN	The state of the s	OR CORONE	(P) (Tupo or Print)	laa	b. LICENSE NUM	ADED.	
	ZOG. TO WIE MAD ADDITED OF	Kelle Lynn Broga	n M.D. 18653 Wed	ge Pkwy Reno, N\	/ 89511	K) (Type of Pilit)	23	600 EICENSE		
REGISTRAR	24a. REGISTRAR (Signature)	CHRISTIN	A GRIFFITH	24b. DATE REC			DEATH DU	TO COMMUNIC	CABLE DISEASE	
<u> </u>			UTHENTICATED	The state of the s	February 2	3, 2010	YES	☐ NO	X	
CAUSE OF	25. IMMEDIATE CAUSE	(ENTER ONLY ONE	CAUSE PER LINE FOR (a)	(b), AND (c).)		~	:	Interval between	onset and death	
DEATH	(a)	ascular Diseas								
*	DUE TO, OR A	S A CONSEQUENCE C	PF:	1 1				Interval between	onset and death	
CONDITIONS IF	<u>(b)</u>	\\_								
GAVE RISE TO	DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death									
CAUSE ->	(C)									
UNDERLYING	DUE TO, OR AS A CONSEQUENCE OF Interval between onset and de									
CAUSE LAST	(d)						· · ·	<del></del>		
///	PART II	1					26. AUTOPS		S CASE REFERRED RONER (Specify Yes	
[ / /	22- 400 of forb	Tanana					(Specify Yes	No at No)	No	
ŧ / /	28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)	28b. DATE OF INJURY (N	fo/Day/Yr) 28c. HOUR	OF INJURY 28d. DESC	RIBE HOW INJUR	Y OCCURRED				
	28e. INJURY AT WORK (Specify	29f BLACE OF IN U.S	V At home form elecat for	atoni office 205 LOO	ATION C	TOFFT OF F.S.	In 0177	OD TOWN	07477	
<u> </u>	Yes or No)	building, etc. (Specify	) At nome, rann, street, fa	ectory, office 28g. LOC	ATION S	TREET OR R.F.D. N	NO CITY	OR TOWN	STATE	
<u></u> ω <u></u>			1							

STATE REGISTRAR

SIGNATURE AUTHENTICATED

VRS-Rev-20090602



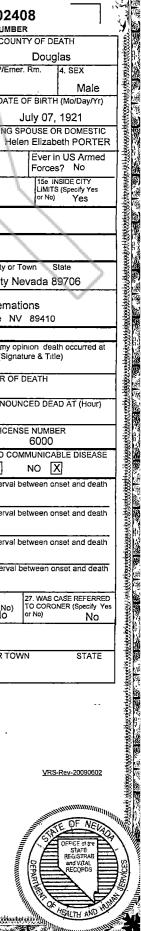
317000

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: 02/23/2010

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



# Exhibit "A" Parcel No. 1

A parcel of land located within a portion of Section 32, Township 13 North, Range 20 East, Mount Diablo Baseline and Meridian, Douglas County, Nevada, described as follows:

Commencing at the centerline of right-of-way monument at the Easterly end of Sierra Shadows Subdivision, Phase II as shown on the Official Plat as recorded in Book 1177 at Page 1307 as Document No. 15229, Douglas County, Nevada, Recorder's Office;

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thence South 39° 31' 35" West, 170.47 feet to THE POINT OF BEGINNING;
thence South 51° 25' 53" East, 180.00 feet;
thence South 71° 30' 34" East, 240.30 feet;
thence South 42° 45' 40" East, 479.66 feet;
thence South 26° 00' 20" East, 288.07 feet to a point at the Southeasterly corner of Parcel
       No. 4 as shown on Parcel Map No. 2 for Harold Gilbert, Howard McKibben, and
       Fred Scarpello, as recorded in Book 377 at Page 923 as Document No. 07707;
thence North 70° 45' 14" East, 554.84 feet;
thence South 01° 16' 39" East, 392.90 feet;
thence North 89° 42' 39" West, 318.87 feet;
thence South 49° 58' 28" East, 223.40 feet;
thence North 89° 42' 39" West, 1219.66 feet;
thence North 03° 08' 53" West, 747.42 feet;
thence North 82° 17' 42" West, 304.68 feet;
thence North 82° 19' 52" West, 175.26 feet;
thence North 89° 20' 20" West, 81.96 feet;
thence South 80° 14' 52" West, 375.43 feet;
thence North 00° 11' 49" West, 678.93 feet;
thence North 26° 14' 18" East, 384.53 feet to the Southerly line of Sierra Meadows Phase II;
thence South 51° 25' 24" East, 919.50 feet to THE POINT OF BEGINNING.
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Parcel No. 2 is subject to a 20-foot water line easement recorded in Book 284 at Page 065, Document No. 095611 and other utility easements as shown on a Parcel Map for Mathilda Hussman recorded in Book 1277 of Parcel Maps at Page 729, Document No. 15874.

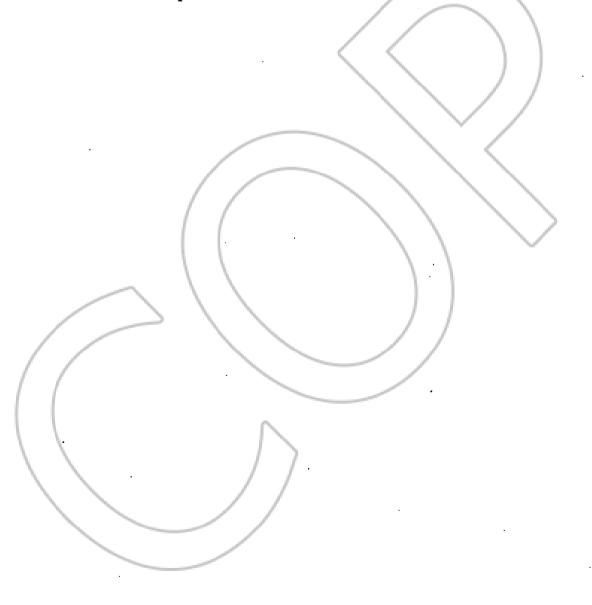
Parcel 1 is subject to an access easement described as follows:

Commencing at the Southeasterly corner of said Parcel 4 per map No. 2 for Gilbert, McKibben, and Scarpello, Document No. 07707;

thence North 70° 45' 14" East, 554.84 feet to THE POINT OF BEGINNING; thence South 01° 16' 39" East, 54.79 feet;

thence along the arc of a curve to the left, non-tangent to the preceding course, having a delta angle of 03° 50' 25", radius of 970.00 feet and an arc length of 65.02 feet; thence North 70° 45' 14" East, 55.75 feet to THE POINT OF BEGINNING;

Parcel No. 1 is further subject to a 30.00 foot wide easement for Cottonwood Slough per Document No. 15874 and a 15.00 foot wide Gardnerville Ranchos Improvement District Sewer Easement per Document No. 60170.



# Parcel No. 2

A parcel of land located within a portion of Sections 32 and 33, Township 13 North, Range 20 East, Mount Diablo Baseline and Meridian, Douglas County, Nevada, described as follows:

Commencing at the Southeasterly corner of Parcel No. 4 as shown on Parcel Map No. 2 for Harold Gilbert, Howard McKibben, and Fred Scarpello as recorded in Book 377 at Page 923 as Document No. 07707, Douglas County, Nevada, Recorder's Office;

thence North 70°45' 14" East, 554.84 feet to THE POINT OF BEGINNING;

thence continuing North 70° 45' 14" East, 195.28 feet;

thence South 44° 00' 56" East, 375.79 feet;

thence South 44° 51' 52" West, 218.62 feet;

thence North 49° 30' 11" West, 182.88 feet;

thence North 89° 55' 34" West, 146.80 feet;

thence North 01° 16' 39" West, 241.94 feet to THE POINT OF BEGINNING.

LEGAL Description from Document # 345088