

17

MAIL TAX STATEMENTS TO:
Dani L. Andrews, Surviving Trustee
1405 Stephanie Way
Minden, NV 89423



KAREN ELLISON, RECORDER

Recording requested by:
JOHNSTON LAW OFFICES
22 State Route 208
Yerington, NV 89447

A.P.N. 1420-34-101-005 and
1420-34-101-006

AFFIDAVIT OF DEATH OF TRUSTEE

STATE OF NEVADA)
) ss.
COUNTY OF LYON)

Dani L. Andrews is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

1. Herman S. Andrews, Jr., the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as Herman S. Andrews, Jr., named as one of the parties in that certain Deed, executed by **Herman S. Andrews, Jr. and Dani L. Andrews, Husband and Wife as joint tenants, to Herman S. Andrews, Jr. and Dani L. Andrews, Trustees of the Herman S. Andrews, Jr. and Dani L. Andrews Family Trust dated October 28, 1993**, recorded as Document No. 617477, on June 29, 2004, of the Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada.

ADJUSTED PARCEL 1

A parcel of land located within a portion of the Northwest one-quarter (NW1/4) of Section 34, Township 14 North, Range 20 East, Mount Diablo Meridian, Douglas County, Nevada described as follows:

A portion of the East 150 feet of the West 1/2 of the North 1/2 of the NW1/4NW1/4NW1/4.

COMMENCING at the Northwest corner of Section 34, T.14N., R.20E., M.D.M.; thence along the West line of said Section 34, South 00°10'22" West, 330.29 feet to a point on the North line of the South 1/2 of the NW1/4NW1/4NW1/4; thence along said North line, North 89°58'28" East, 179.47 feet to the POINT OF BEGINNING; thence North 00°09'54" East, 300.29 feet to the south right-of-way line of Stephanie Way; thence along said right-of-way line, North 89°58'28" East, 150.00 feet; thence leaving said right-of-way line, South 0°01'32" East, 249.93; thence North 89°12'52" West, 18.49 feet; thence South 0°30'29" West, 50.63 feet to a point on said North line; thence along said North line, South 89°58'28" West, 132.04 feet to the POINT OF BEGINNING, containing 1.02 acres, more or less.

ADJUSTED PARCEL 2

A parcel of land located within a portion of the Northwest one-quarter (NW1/4) of Section 34, Township 14 North, Range 20 East, Mount Diablo Meridian, Douglas County, Nevada, described as follows:

The West 150 feet of the East 1/2 of the North 1/2 of the NW1/4NW1/4NW1/4 of Section 34, T.14N., R.20E., M.D.M. and a portion of the East 150 feet of the West 1/2 of the North 1/2 of the NW1/4NW1/4NW1/4 of Section 34, T.14N., R.20E., M.D.M. and a portion of the South 1/2 of the NW1/4NW1/4NW1/4 of Section 34, T.14N., R.20E., M.D.M. more particularly described as follows:

COMMENCING at the Northwest corner of Section 34, T.14N., R.20E., M.D.M.; thence along the West line of said Section 34, South 00°10'22" West, 330.29 feet to a point on the North line of the South 1/2 of the NW1/4NW1/4NW1/4; thence along said North line, North 89°58'28" East, 311.51 feet, the POINT OF BEGINNING; thence North 00°30'29" East, 50.63 feet; thence South 89°12'52" East, 18.49 feet; thence North 00°01'32" West, 249.93 feet to the south right-of-way line of Stephanie Way; thence along said right-of-way line, North 89°58'28" East, 150.00 feet; thence leaving said right-of-way line, South 00°11'48" West, 300.29 feet to a point on said North line; thence along said North line, South 89°58'28" West, 87.63 feet; thence leaving said North line, South 00°30'29" West, 34.77 feet; thence North 89°12'52" West, 80.17 feet; thence North 00°30'29" East, 33.63 feet to a point on said North line, the POINT OF BEGINNING, containing 1.11 acres, more or less.

Legal Description appeared previously in Document No. 617477, recorded on June 29, 2004, Official Records of Douglas County, Nevada.

2. Dani L. Andrews is the Surviving Trustee of The Herman S. Andrews, Jr. and Dani L. Andrews Family Trust Agreement, dated October 28, 1993. The Trust was in effect at the date of the death of the Decedent and has not been revoked. Dani L. Andrews has consented to act as Surviving Trustee under said Trust. Pursuant to the terms of the trust, the single signature of any acting Trustee is acceptable.

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TOGETHER WITH all tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and any reversion, remainders, rents, issues or profits thereof.

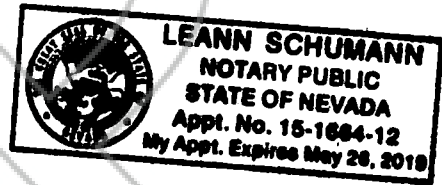
Dated: September 14, 2017

Dani L. Andrews
Dani L. Andrews

STATE OF NEVADA)
) ss.
COUNTY OF LYON)

On September 14, 2017, before me, the undersigned, a Notary Public in and for said State and County, personally appeared **Dani L. Andrews** known to me to be the person whose name is subscribed to the within instrument and acknowledge that she executed the same.

Signature Leann Schumann
Notary Public



STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
VITAL STATISTICS

CASE FILE NO. 3968131

CERTIFICATE OF DEATH

2017013724

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) Herman S ANDREWS JR		2. DATE OF DEATH (Mo/Day/Year) July 20, 2017		3a. COUNTY OF DEATH Douglas	
3b. CITY, TOWN, OR LOCATION OF DEATH Minden		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and 1405 Stephanie Way Inpatient(Specify) Home		4. SEX Male	
5. RACE (Specify) White		8. Hispanic Origin? Specify No - Non-Hispanic	7a. AGE-Last birthday (Years) 73	7b. UNDER 1 YEAR MOS DAYS HOURS MINS	7c. UNDER 1 DAY HOURS MINS
9a. STATE OF BIRTH (If not US/CA, name country) Iowa		9b. CITIZEN OF WHAT COUNTRY United States	10. EDUCATION 12	11. MARITAL STATUS (Specify) Married	12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage) DANI LYNN FERREL
13. SOCIAL SECURITY NUMBER 6547		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Construction Contractor		14b. KIND OF BUSINESS OR INDUSTRY Construction	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas	15c. CITY, TOWN OR LOCATION Minden	15d. STREET AND NUMBER 1405 Stephanie Way	
16. FATHER/PARENT - NAME (First Middle Last Suffix) Herman S ANDREWS SR			17. MOTHER/PARENT - NAME (First Middle Last Suffix) Orvina Josephine EBERT		
18a. INFORMANT- NAME (Type or Print) Dani Lynn ANDREWS		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 1405 Stephanie Way Minden, Nevada 89423			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Fitzhenry's Crematory		19c. LOCATION City or Town State Carson City Nevada 89701	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) MONICA GIESE SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE NUMBER FD880	20c. NAME AND ADDRESS OF FACILITY Neptune Society of Reno 969 West Moana Lane Reno NV 89509		
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) NITA SCHWARTZ 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) July 24, 2017		21c. HOUR OF DEATH 02:10		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) Nita Schwartz MD 710 W. Washington St. Carson City, NV 89703					23b. LICENSE NUMBER 9114
24a. REGISTRAR (Signature) BLAISE SATARIANO SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) July 25, 2017		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).)					Interval between onset and death
PART I (a) Coronary Atherosclerosis					Interval between onset and death
DUE TO, OR AS A CONSEQUENCE OF:					Interval between onset and death
(b) DUE TO, OR AS A CONSEQUENCE OF:					Interval between onset and death
(c) DUE TO, OR AS A CONSEQUENCE OF:					Interval between onset and death
(d) DUE TO, OR AS A CONSEQUENCE OF:					Interval between onset and death
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1.					26. AUTOPSY (Specify Yes or No) No
					27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No
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

VR9-Rev-20120523a

000683495



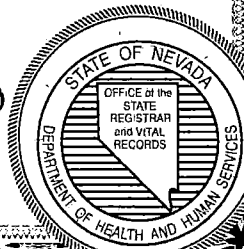
CERTIFIED COPY OF VITAL RECORDS

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: **AUG 01 2017**

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

[Signature]
STATE REGISTRAR



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE