DOUGLAS COUNTY, NV

Rec:\$35.00

**ETRCO** 

\$35.00

2017-905737 10/18/2017 09:13 AM

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KAREN ELLISON, RECORDER

Recording Requested By: eTRCo, LLC. When Recorded Mail To: Susan F. Slaughter P.O. Box 1201 Genoa, NV 89411 Mail Tax Statements to: (deeds only) (space above for Recorder's use only)

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) & 40.525 (5))

Signature C

**APN#**: 1419-26-610-026

Susan F. Slaughter

**Surviving Joint Tenant** 

This document is being recorded as an accommodation only.

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**

Susan F. Slaughter, of legal age, being first duly sworn, deposes and says:

That Robert M. Slaughter, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Robert M. Slaughter named as one of the parties in that certain Grant, Bargain and Sale Deed dated 9/11/2013 executed by Dirk E. Jansse and Eileen M. Jansse, Trustees of The Jansse Family Trust, dated August 23, 2000 to Robert M. Slaughter and Susan F. Slaughter, Husband and Wife as Joint Tenants, recorded as instrument No. 830473, on 9/12/2013, in Book 913, Page 2534, of Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada:

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

See Exhibit A

Susan F. Slaughter, Surviving Joint Tenant

STATE OF NEVADA

}SS

COUNTY OF

This instrument was acknowledged before me on

by Susan F. Slaughter.

Notary Public

ANU JANSSE
Notary Public - State of Nevada
Appointment Recorded in Douglas County
No: 03-80889-5 - Expires March 20, 2019



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



CASE	FILE NO.	3970791

Rone	RST,MIDDLE,LAST,SUFFIX ert: Michael	) .: SLAUGH		E OF DEATH (Mo/Day/Year) August 02, 2017	3a. COUNTY OF DEATH  Carson City
7,000	TION OF DEATH RA HOS		N -Name(If not either, give street	ani3e if Hosp, or inst. indicate	DOA.OP/Emer. Rm. 4. SEX
	180 and 180 and 1900	Carson Tahoe Region		Uncation(Specify)	
Carson C		8. Hispanic Origin? Specify	79 AGEL est birthdeuzh 19	DER 1 VEAR TO UNDER 1	om / Outpatient Male DAY   9. DATE OF BIRTH (Mo/Day/Y
5. RACE (Specify)	White	No - Non-Hispanic	(Years) MO	S DAYS HOURS M	October 17, 1946
9e. STATE OF BIRTH (If no name country) Califo	NUSICA, 9b. CITIZEN (	of what country 10 EDUC ed States 16	ATION 11. MARITAL STATUS (Spec Married		SNAME (Lest name prior to first merriage)
13. SOCIAL SECURITY NU	IMBER 14e. USUAL (	OCCUPATION (Give Kind of Wo	rk Done During Most of 👑 14b	KIND OF BUSINESS OR IN	DUSTRY Ever in US Arm
-1055		Sales	Director	Beverages	Forces? No
15e. RESIDENCE - STATE	15b. COUNTY	15c CITY, TOWN OR		<ul> <li>* ** ** ** * * * * * * * * * * * * * *</li></ul>	15e, INSIDÉ CITY LIMITS (Spiedy Yes
Nevada	Douglas	Geno	a 2906 Pro	montory Dr.	or No) Yes
16. FATHER/PARENT , NA	ME (First Middle Last St	uffix)	17. MOTHER/PAREN	T-NAME (First Middle Las	
	Sam Curtis SLAU		/	Lillian Ann S	TEIN
18a, INFORMANT- NAME		186. MAILING A	4	o, City or Town, State, Zip) tory Dr. Genoa. Nevad	In 90411
	Fem SLAUGHTER	Hy) 196. CEMETERY OR CREI			ON City or Town State
	emation	Fit	zhenry's Crematory	# 5.66 # 5. COV	arson City Nevada 89701
	R - SIGNATURE (Or Person	Acting as Such)	RAL DIRECTOR 20c. NAME AN	DADORESS OF FACILITY	
	RISTIE D WILDE	LICENSE N		Fitzhenrys Fu	
	HATURE AUTHENTICA	TED	0917	3945 Fairview Dr Car	rson City NV 89701
TRADE CALL - NAME AND		gramma pod tak siaji	· (10) WH WH W		5.7
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STATE REGISTRAR





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:

8/18/2017
This copy is not valid unless prepared on engraved border displaying date, seal and signature of Registrar.

