

APN# 1318-15-611-033

**Recording Requested by:**

**Name:** First American Title Insurance Company  
**Address:** P.O. Box 645  
**City/State/Zip:** Zephyr Cove, NV 89448  
**Order Number:** 141-2528877

Affidavit Death of Trustee (for Recorder's use only)  
(Title of Document)

**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 law:

(State specific law)

Jenny Lane Escrow Officer  
**Signature** **Title**

Jenny Lane  
**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**  
First American Title Insurance  
Company of Nevada

**AND WHEN RECORDED  
RETURN TO AND MAIL TAX  
STATEMENTS TO:**  
Joanne Wasak  
931 Tiffin Drive  
Clayton CA 94517

Space Above This Line for  
Recorder's Use Only

**A.P.N. 1318-15-611-033**

File No.: 141-2528877 (JL)

**Affidavit - Death of Trustee**

State of California )  
County of *CONTRA COSTA* )ss.  
*Joanne Wasak* )

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

1. **Zofia Wasak** ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on **10/20/2006** at **Concord California** (city and state of death).
2. Decedent is the same person named as the trustee named in that certain Declaration of Trust dated **11/13/1986** executed by **The Wasak Family Trust** as trustor(s) (the "Trust").
3. Decedent as a trustee is the same person who was named as a grantee in that certain **Trust Transfer Deed** dated **02/17/1987** which was recorded as Instrument No. **150927** in Book **387**, Page **263**, of Official Records of **Douglas** County, Nevada as legally described as follows:

**Legal Description attached hereto as Exhibit "A" and incorporated herein by this reference**

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: October 6, 2017

**DECLARANT:**

Joanne Wasak  
Joanne Wasak

State of California )  
County of CONTRA COSTA )<sup>SS</sup>

SUBSCRIBED AND SWORN TO (or affirmed) before me the undersigned, a Notary Public in and for said County CONTRA COSTA and State CA this 26<sup>th</sup> day of OCTOBER, 20 17 by JOANNE WASAK, personally know to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me..

WITNESS my hand and official seal.

*This area for official notarial seal*

Signature: FAROK ARDESHER

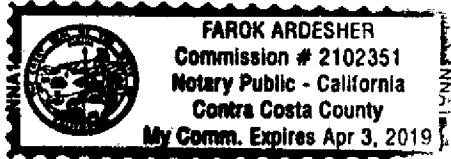
My Commission Expires: 4-3-19

Notary Name: FAROK ARDESHER

Notary Registration Number: 2102351

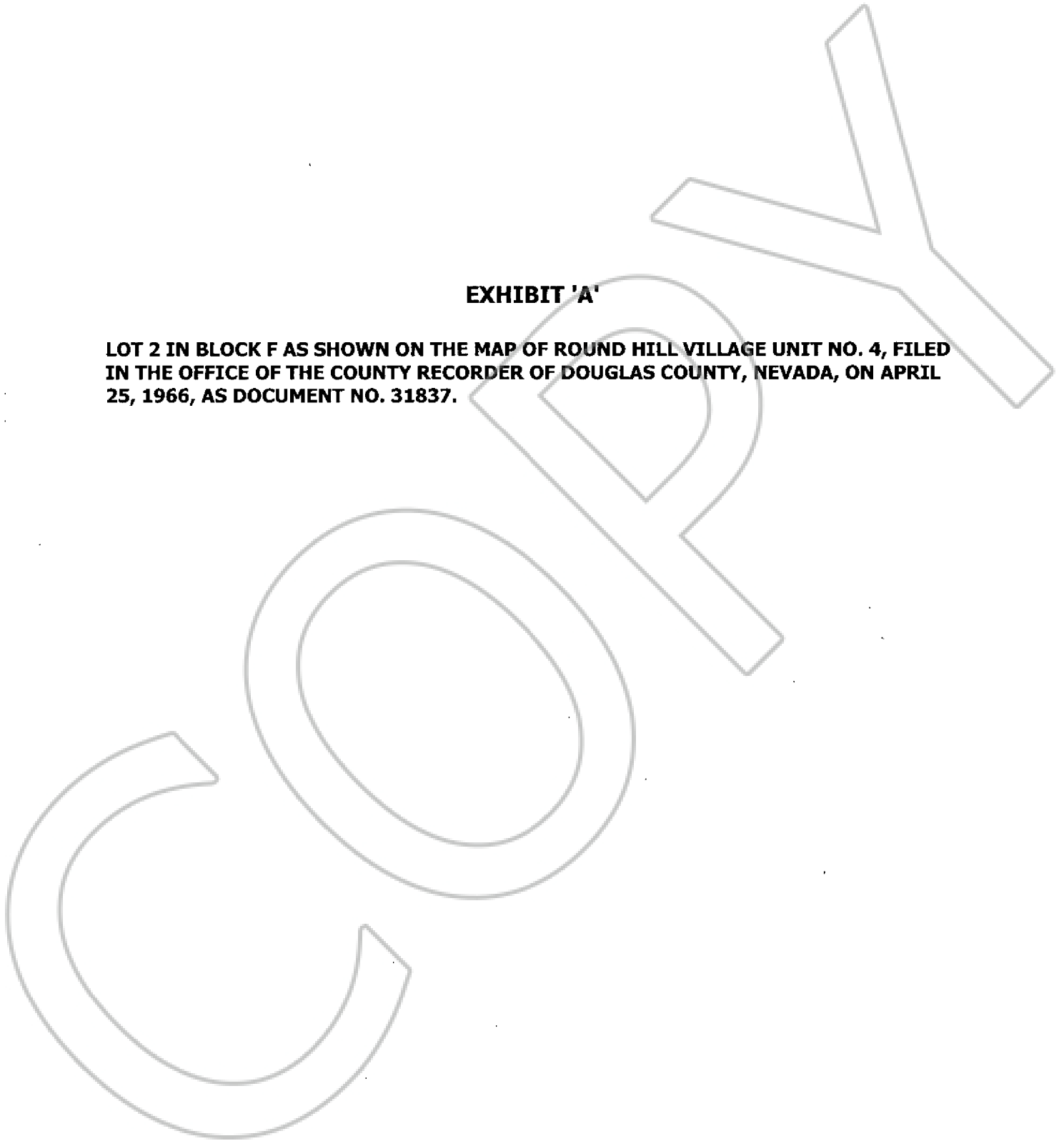
Notary Phone: 925-256-5689

County of Principal Place of Business: \_\_\_\_\_



**EXHIBIT 'A'**

**LOT 2 IN BLOCK F AS SHOWN ON THE MAP OF ROUND HILL VILLAGE UNIT NO. 4, FILED  
IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON APRIL  
25, 1966, AS DOCUMENT NO. 31837.**



COUNTY OF CONTRA COSTA

MARTINEZ, CALIFORNIA

CERTIFICATE OF DEATH

3 2006 07 005407

Form with sections: DECEASED PERSONAL DATA, USUAL RESIDENCE, INFORMANT, SPOUSE/SROP AND PARENT INFORMATION, FUNERAL DIRECTOR LOCAL REGISTRAR, PLACE OF DEATH, CAUSE OF DEATH, PHYSICIAN'S CERTIFICATION, CORONER'S USE ONLY. Includes fields for name, date of birth, social security number, marital status, and cause of death.

CERTIFIED COPY OF VITAL RECORD

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Contra Costa County Recorder.

ATTEST [Signature]

DATE ISSUED JAN 19 2017

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the Deputy Recorder.



000913278

JOSEPH E. CANCIAMILLA COUNTY RECORDER



CACONTRA02