

This document includes a certified death certificate as required by NRS 40.525 (5) which contains a social security number as required by NRS 440.380(1)(a)



Rebecca M. Conti

APN: 1319-34-001-001

RECORDING REQUESTED BY:

Anderson, Dorn & Rader, Ltd.
500 Damonte Ranch Parkway #860
Reno, Nevada 89521

WHEN RECORDED MAIL TO:

Anderson, Dorn & Rader, Ltd.
500 Damonte Ranch Parkway #860
Reno, Nevada 89521

MAIL TAX STATEMENTS TO:

JUDY P. STURGIS
1515 Foothill Road
Gardnerville, NV 89460

AFFIDAVIT OF DEATH OF TRUSTEES

I, JUDY P. STURGIS, the undersigned, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

- (1) By instrument dated August 12, 1980, WILLIAM T. STURGIS, AKA WILLIAM TIMKEN STURGIS, executed the WILLIAM T. STURGIS FAMILY TRUST.
- (2) That the WILLIAM T. STURGIS FAMILY TRUST, dated August 12, 1980 has also been referred to as the WILLIAM T. STURGIS TRUST, dated August 20, 1980, and the WILLIAM T. STURGIS FAMILY TRUST, dated February 12, 1980. Pursuant to an amendment and restatement of the WILLIAM T. STURGIS FAMILY TRUST August 12, 1980 executed by WILLIAM T. STURGIS on May 4, 2012, all of these name references are to the same trust instrument. All name iterations of this trust instrument shall be hereinafter referred to as the "WILLIAM T. STURGIS FAMILY TRUST".

- (3) The WILLIAM T. STURGIS FAMILY TRUST appointed me to serve as sole successor Trustee upon the death or incapacity of WILLIAM T. STURGIS.
- (4) WILLIAM T. STURGIS died on July 15, 2014, a resident of Douglas County, Nevada. Attached hereto as Exhibit "A" is a certified copy of the death certificate of said WILLIAM T. STURGIS.
- (5) The following described real property is part of the trust estate of the WILLIAM T. STURGIS FAMILY TRUST: See Exhibit "B" attached.
- (6) I am authorized under the terms of the WILLIAM T. STURGIS FAMILY TRUST and applicable provisions of the Nevada Revised Statutes to act as the Successor Trustee with respect to the trust's interest in the described property.
- (7) No other person has a right to the interest of the WILLIAM T. STURGIS FAMILY TRUST in the described property.
- (8) The described property shall be transferred to me as successor Trustee.

Executed on this 23 day of October, 2017, at Reno, Nevada.

Judy P. Sturgis
 JUDY P. STURGIS

STATE OF NEVADA)
) ss:
 COUNTY OF WASHOE)

SUBSCRIBED AND SWORN TO before me this 23 day of October, 2017, by JUDY P. STURGIS.

Victoria Kelley

 Notary Public



Exhibit "A"

Legal Description:

That land lying in the County of Douglas, in Township 13 North, Range 19 East, M.D.B.&M.,

PARCEL NO. 1:

Section 34: North $\frac{1}{2}$ of the Northeast $\frac{1}{4}$:
Southwest $\frac{1}{4}$ of the Northwest $\frac{1}{4}$, excepting therefrom that portion lying Westerly of Foothill Road;
East $\frac{1}{2}$ of the Northwest $\frac{1}{4}$;
Northwest $\frac{1}{4}$ of the Northwest $\frac{1}{4}$, excepting therefrom that portion lying Westerly of Foothill Road.

PARCEL NO. 2:

Commencing at the Section corner common to Sections 26, 27, 34 and 35, Township 13 North, Range 19 East, M.D.B.&M., and running thence South along the section line between Section 34 and 35, said Township and Range, 20 chains, more or less, to the quarter section corner; thence Easterly along said quarter, quarter section line, 9 chains, more or less, to common corner of fence dividing lands of Mary Cosser Estate from lands of Chris and Knox Johnson and lands of Jas P. Van Sickle; thence North along the division fence between the lands of Jas P. Van Sickle and of said Cosser Estate, a distance of 33.50 feet, more or less to fence dividing lands of said Estate of Oscar T. Van Sickle; thence Westerly along said boundary fence 9 chains, more or less to section line between sections 26 and 27; thence South along said section line 13.50 chains, more or less to place of commencement, and being portions of the Southwest $\frac{1}{4}$ of the Southwest $\frac{1}{4}$ of Section 26 and the Northwest $\frac{1}{4}$ of the Northwest $\frac{1}{4}$ of Section 35, Township 13 North, Range 19 East, M.D.B.&M.

PARCEL NO. 3:

Commencing at the section corner common to Sections 26, 27, 34 and 35, Township 13 North, Range 19 East, M.D.B.&M., and running thence North along the section line between Section 26 and 27, 13.46 chains, more or less to fence dividing lands of said Cosser Estates from lands of Oscar T. Van Sickle; thence Westerly along said fence 60 chains, more or less, to quarter, quarter section line running North and South through the West half of Section 27; thence South along said quarter, quarter section line 13.46 chains, more or less, to section line between Sections 27 and 34; thence East along said section line, 60 chains, more or less to place of commencement, and being portions of the South $\frac{1}{2}$ of the Southeast $\frac{1}{4}$ and Southeast $\frac{1}{4}$ of the Southwest $\frac{1}{4}$ of Section 27, Township 13 North, Range 19 East, M.D.B.&M.

EXCEPTING THEREFROM that portion of said land Deeded in the State of Nevada in Document Recorded September 15, 1950, Book Z of Deed, Pages 273 and 274, Document Nos. 7582 and 7583, Douglas County, Nevada, records.

Per NRS 111.312- The Legal Description above appeared previously in that Grant, Bargain, Sale Deed recorded on October 24, 2008, as Document No. 0731928 in Douglas County Records, Douglas County, Nevada.

APN: 1319-34-001-001

Property Address: 1515 FOOTHILL ROAD, GARDNERVILLE, NV 89460

STATE OF NEVADA

CERTIFICATION OF VITAL RECORD

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

2014011592
STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK	1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) William Timken STURGIS		2. DATE OF DEATH (Mo/Day/Year) July 15, 2014		3a. COUNTY OF DEATH Douglas	
	3b. CITY, TOWN, OR LOCATION OF DEATH Gardnerville		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and number) 1515 Foothill Road		3e. If Hosp. or Inst. Indicate DOA,OP, Emer. Rm. Inpatient(Specify) Home	
DECEDENT	5. RACE White (Specify):		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday (Years) 88	
	7b. UNDER 1 YEAR MOS: DAYS		7c. UNDER 1 DAY HOURS: MINS		8. DATE OF BIRTH (Mo/Day/Yr) January 19, 1926	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	9a. STATE OF BIRTH (If not U.S.A., name country) California		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 17	
	11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) Judy PRICE			
PARENTS	13. SOCIAL SECURITY NUMBER 3816		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired) Rancher		14b. KIND OF BUSINESS OR INDUSTRY Cattle Ranch	
	15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Gardnerville	
POSITION	16. FATHER/PARENT - NAME (First Middle Last Suffix) George Robert STURGIS		17. MOTHER/PARENT - NAME (First Middle Last Suffix) Valerie Timken WHITNEY			
	18a. INFORMANT- NAME (Type or Print) Judy STURGIS		18b. MAILING ADDRESS (Street or R.F.D. No; City or Town, State; Zip) 1515 Foothill Road, Gardnerville, Nevada 89460			
TRADE CALL	19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Truckee Meadows Crematory		19c. LOCATION - City or Town - State Sparks Nevada 89431	
	20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JOHN LAWRENCE SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE 304R		20c. NAME AND ADDRESS OF FACILITY Autumn Funerals & Cremations 1575 N Lompa Ln Carson City, NV 89701	
CERTIFIER	21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) JOSEPH FINK 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 22, 2014		21c. HOUR OF DEATH 19:57		22b. DATE SIGNED (Mo/Day/Yr)	
REGISTRAR	21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c. HOUR OF DEATH		22d. PRONOUNCED DEAD (Mo/Day/Yr)	
	23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) JOSEPH FINK, MD 1670 Whisper Rock Court Reno, NV 89523		23b. LICENSE NUMBER 1867			
CAUSE OF DEATH	24a. REGISTRAR (Signature) BIANCA GALEANO SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) July 22, 2014		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).) PART I: (a) Lung Cancer DUE TO, OR AS A CONSEQUENCE OF: (b) DUE TO, OR AS A CONSEQUENCE OF: (c) DUE TO, OR AS A CONSEQUENCE OF: (d)		Interval between onset and death			
CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST	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) Yes	
	28a. ACC., SUICIDE, HOMICIDE, UNDETERMINED 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

535517

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: **07/22/2014**

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

[Signature]
SIGNATURE AUTHENTICATED

