

APN#: 1120-03-000-003

Recording Requested By:

eTRCo, LLC.

When Recorded Mail To:

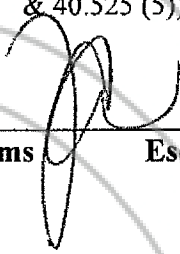
Mariah Evans

18124 Wedge Pkway #1035

Reno, NV 89511-8134

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



Traci Adams

Escrow Officer

Affidavit Death

This page added to provide additional information required by NRS 111.312

(additional recording fee applies)

AFFIDAVIT OF DEATH

Mariah Evans, of legal age, being first duly sworn, deposes and says:

That Sallie R. Springmeyer, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Sallie R. Springmeyer named as one of the parties in that certain Deed dated 9/8/1988 executed by Sallie R. Springmeyer to Don Springmeyer, recorded as instrument No. 188569, on 10/17/1988, in Book 1088, Page 1881, of Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada:

Dated Sept 13, 2018

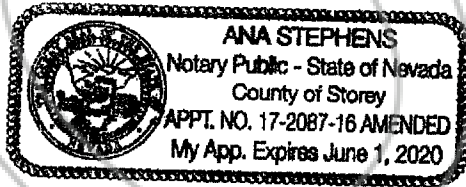
Mariah Evans
Mariah Evans

STATE OF NEVADA) SS
COUNTY OF Washoe

This instrument was acknowledged before me on
September 13th, 2018

By Mariah Evans.

Ana Stephens
Notary Public



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

PARCEL 1

A Parcel of land located in the Northeast quarter of the Southwest quarter of Section 3, Township 11 North, Range 20 East, M.D.B. & M., Douglas County, Nevada, more particularly described as follows:

COMMENCING at the West quarter corner of said Section 3, a found brass cap, proceed North $89^{\circ}32'50''$ East, 1320.61 feet to the TRUE POINT OF BEGINNING, which is the Northwest corner of the parcel;
proceed thence North $89^{\circ}32'50''$ East, 466.84 feet, to the Northeast corner of the parcel;
thence South $11^{\circ}02'06''$ West, 729.65 feet to a point;
thence South $07^{\circ}55'46''$ West, 405.27 feet to a point;
thence South $18^{\circ}04'31''$ West, 168.16 feet to the Southeast corner of the parcel;
thence North $46^{\circ}17'54''$ West, 108.94 feet to a point;
thence North $46^{\circ}12'34''$ West, 201.58 feet to the Southwest corner of the parcel;
thence North $00^{\circ}16'51''$ East, 1058.98 feet to the TRUE POINT OF BEGINNING.

Reference is made to Parcel 1 as shown on Parcel Map for Sallie Springmeyer, recorded January 6, 1976, as Document No. 86555, Official Records of Douglas County, Nevada.

PARCEL 2

A non-exclusive easement for roadway ingress and egress and set forth in Grant of Easement executed by Fred H. Dressler in favor of The General Public and the County of Douglas, filed in the office of the Douglas County Recorder on October 10, 1991, as Document No. 262359, and in Easement Deed executed by Heritage Ranch, a General Partnership in favor of the General Public and the County of Douglas, filed in the office of the Douglas County Recorder on October 19, 1991, as Document No. 262360, Official Records.

PARCEL 3

A reciprocal Easement for ingress/egress, public or private utilities as set forth in Reciprocal Grant of Easement executed by the Estate of Fred H. Dressler, et als, and Bently Family Limited Partnership, its successors and assigns, filed in the office of the Douglas County Recorder on March 25, 1997, as Document No. 409059, Official Records.

PARCEL 4

A Private access easement as set forth in Easement Deed executed by West Fork Water Company LLC, in favor of George Goodspeed JR. and Barbara Goodspeed, husband and wife, filed for record in the office of the Douglas County Recorder on September 30, 2008, as Document No. 730837, Official Records.

NOTE: The above metes and bounds description appeared previously in that certain Grant, Bargain and Sale Deed recorded in the office of the County Recorder of Douglas County, Nevada on May 7, 2015, as Document No. 2015-861614 of Official Records.

CERTIFICATION OF VITAL RECORD

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH
VITAL STATISTICS
CERTIFICATE OF DEATH**

2007012360

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 Sallie			1b. MIDDLE R			1c. LAST SPRINGMEYER			2. DATE OF DEATH (Mo/Day/Year) December 23, 2007			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) 1445 Indian Creek Ranch						3a. If Hosp. or Inst. Indicate DOA, OP/Emer. Rm. Inpatient (Specify)			4. SEX Female				
5. RACE - (e.g., White, Black, American Indian) (Specify) White			6. Was Decedent of Hispanic Origin? No If yes, specify Mexican, Cuban, Puerto Rican, etc. Non-hispanic			7a. AGE - Last birthday (Years)			7b. UNDER 1 YEAR MOS		7c. UNDER 1 DAY DAYS		7d. UNDER 1 DAY HOURS		7e. UNDER 1 DAY MINS		8. DATE OF BIRTH (Mo/Day/Yr) August 27, 1903		
9a. STATE OF BIRTH (If not U.S.A., name country) New York			9b. CITIZEN OF WHAT COUNTRY United States			10. EDUCATION 14			11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Widowed			12. SURVIVING SPOUSE (if wife, give maiden name)							
13. SOCIAL SECURITY NUMBER -2673						14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Attorney						14b. KIND OF BUSINESS OR INDUSTRY Private Law Practice							
15a. RESIDENCE - STATE Nevada			15b. COUNTY Douglas			15c. CITY, TOWN OR LOCATION Gardnerville			15d. STREET AND NUMBER 1445 Indian Creek Ranch			15a. INSIDE CITY LIMITS (Specify Yes or No) Yes							
16. FATHER - NAME (First Middle Last Suffix) Justus RUPERT									17. MOTHER - NAME (First Middle Last Suffix) Sallie NICOLL										
18a. INFORMANT - NAME (Type or Print) Sally ZANJANI						18b. MAILING ADDRESS - (Street or R.F.D. No. City or Town, State, Zip) 4360 Slide Mountain Circle Reno, Nevada 89511													
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation						19b. CEMETERY OR CREMATORY - NAME Walton's Sierra Crematory						19c. LOCATION City or Town State Carson City Nevada 89706							
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) RICK NOEL SIGNATURE AUTHENTICATED						20b. FUNERAL DIRECTOR LICENSE 620			20c. NAME AND ADDRESS OF FACILITY Walton's Chapel of the Valley 1281 N. Road Carson City NV 89706										
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) SIGNATURE AUTHENTICATED STEPHEN HEWITT DO																			
21b. DATE SIGNED (Mo/Day/Yr) January 02, 2008					21c. HOUR OF DEATH 12:45					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)									
22b. DATE SIGNED (Mo/Day/Yr)																			
22c. HOUR OF DEATH																			
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) Dr. Stephen Hewitt DO 1090 3rd Street #1 South Lake Tahoe, CA 89449												23b. LICENSE NUMBER NV 1107							
24a. REGISTRAR (Signature) SARAH KOERNER SIGNATURE AUTHENTICATED						24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) January 03, 2008			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 (e) Congestive Heart Failure Interval between onset and death Years																			
DUE TO, OR AS A CONSEQUENCE OF:																			
(b) Coronary Artery Disease Interval between onset and death Years																			
DUE TO, OR AS A CONSEQUENCE OF:																			
(c) OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not resulting in the underlying cause given in Part 1																			
PART II																			
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

535339

184813

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:

01/02/2008

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

PBNC0 (Rev. 1/06)

STATE REGISTRAR
SIGNATURE AUTHENTICATED

