

APN: 1420-07-717-023

RECORDING REQUESTED BY WHEN
RECORDED MAIL TO:

ALLING & JILLSON, LTD.
Post Office Box 3390
Lake Tahoe NV 89449-3390



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KAREN ELLISON, RECORDER

AFFIDAVIT OF DEATH OF JOINT TENANT

Judith A Scott, being first duly sworn, deposes and says:

1. That Affiant Judith A. Scott, is a Joint Tenant with Andrew M. Scott, deceased, with respect to certain real property more particularly described below.

2. That said Andrew M. Scott and Judith A. Scott are joint tenants with right of survivorship by virtue of that certain Grant, Bargain and Sale Deed, dated February 23, 2016, recorded on April 14, 2016, in the Official Records of Douglas County, Nevada, as Document No. 2016-879379, wherein Richard B. Watkins and Judy L. Watkins, were the Grantors and the said Andrew M. Scott and Judith A. Scott, as joint tenants with right of survivorship, were Grantees, the same conveying that certain real property in the County of Douglas, State of Nevada, and more particularly described as follows:

LOT 3, IN BLOCK C, OF THE HIGHLAND ESTATES UNIT NO. 3,
ACCORDING TO THE MAP THEREOF, FILED IN THE OFFICE OF THE
COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON MAY 2, 1078,
AS FILE NO. 20213.

3. That the said Andrew M. Scott died on or about March 17, 2017, in the City South Lake Tahoe, El Dorado County, California, and is the identical person named as Andrew M. Scott in that certain certified copy of the Certificate of Death attached hereto as **Exhibit A**, and incorporated herein by reference.

4. That all of said real property was vested in Judith A. Scott upon the death of Andrew M. Scott, as of the date of the death.

COPY

EXHIBIT A

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

EL DORADO COUNTY

HEALTH AND HUMAN SERVICES AGENCY

PLACERVILLE, CALIFORNIA

3052017066653

CERTIFICATE OF DEATH

3201709000323

STATE OF CALIFORNIA USE BLACK INK ONLY (NO ERASURES, WHITEOUTS OR ALTERATIONS VS-1 (REV 3/06))

LOCAL REGISTRATION NUMBER

Form with sections: DECEDENT'S PERSONAL DATA, USUAL RESIDENCE, INFORMANT, SPOUSE/STEP AND PARENT INFORMATION, FUNERAL DIRECTORY/LOCAL REGISTRAR, PLACE OF DEATH, CAUSE OF DEATH, PHYSICIAN'S CERTIFICATION, CORONER'S USE ONLY, STATE REGISTRAR.

CERTIFIED COPY OF VITAL RECORDS STATE OF CALIFORNIA, COUNTY OF EL DORADO

This is a true and exact reproduction of the document officially registered and placed on file in the office of the El Dorado County Health and Human Services Agency.

DATE ISSUED

APR 05 2017



000179775

Signature of Nancy J Williams

NANCY J WILLIAMS MD, MPH COUNTY HEALTH OFFICER

This copy is not valid unless prepared on an engraved border, displaying the data, seal and signature of the County Health Officer.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CALIFORNIA

