DOUGLAS COUNTY, NV

Rec:\$35.00

\$35.00 Pgs=4 2019-926177

02/28/2019 10:25 AM

ETRCO

KAREN ELLISON, RECORDER

Recording Requested By: eTRCo, LLC.		
When Recorded Mail To: Vickie Colvin	\ \	(
2854 Squires St.	\	\
Minden, NV		\
89423		\
Mail Tax Statements to: (deeds only)		
	(space above for Recorder's use only)	
	/ / \ \	- N

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

APN#: 1420-07-310-012

Anu Jansse

Escrow Officer

Affidavit Death of Trustee

This page added to provide additional information required by NRS 111.312 (additional recording fee applies)

AFFIDAVIT – DEATH OF TRUSTEE

Vickie Colvin, of legal age, being first duly sworn, deposes and says:

- 1. <u>Victor Colvin</u>, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Victor Colvin named as Trustee in the Declaration of Trust dated <u>4/12/2017</u> and <u>executed by Victor Colvin and Vickie Colvin as Trustor(s)</u>.
- 2. At the time of the decedent's death, decedent was the record owner, as Trustee, of certain real property commonly known as 893 Mica DriveCarson City, NV 89705, which property is described in a Deed which was executed by Victor Colvin and Vickie Colvin, who took title as, Victor C. Colvin and Vickie Colvin, husband and wife, as Joint Tenants as Grantor(s) on April 26, 2017 and recorded as Instrument No. 2017-899000, in Book N/a, Page N/A, of Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada:
- 3. The legal description of said property is as follows:

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

Lot 11 in Block E of VISTA GRANDE SUBDIVISION UNIT NO. 1, as shown on the Official Map filed in the Office of the County Recorder of Douglas County, Nevada, on November 09, 1964, as Document No. 26518.

- 4. I am the named successor Trustee under the above-referenced Trust, which was in effect at the time of the death of the decedent mentioned in Paragraph 1, above, and which has not been revoked, and I hereby consent to act as such.
- 5. There is no federal estate tax as the result of the death of the decedent mentioned in Paragraph 1, above.

I declare under penalty of perjury, under the laws of the State of Nevada, that
foregoing is true and correct.
Dated <u>2/26/19</u>
15:17 0.07
Vickie Colisio
Vickie Colvin, Successor Trustee
STATE OF NEVADA }SS
COUNTY OF Daglas
This instrument was acknowledged before me on
2/26/19
By <u>Vickie Colvin</u> .
Notany Public

Notary Public - State of Nevada
Appointment Recorded in Washoe County
No: 16-1292-2 - Expires January 20, 2020

the



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

	E NO. 4013136			CERTIF				70.0	01800 TATE FILE N	
11	a. DECEASED-NAME (FIRS				¥11.48		2. DATE OF DE	ATH (Mo/Day/Year)	3a. COL	INTY OF DEATH
ı, L		Charle		.,	COLVIN		April	05, 2018	M = M	Douglas
3	b. CITY, TOWN, OR LOCAT	ON OF DE	ATH 3c. HOSI	PITAL OR OTHER I	NSTITUTION -N	ame(if not either, giv			DOA, OP/En	ner. Rm. 4. SEX
r Ľ	Minden	- (N) #		28	54 Squires S	Street	inpati	ent(Specify) Ho	me	∖ I Ma
5.	i. RACE (Specify)	Vhite		6. Hispanic Origin? No - Non-Hispan	Specify 7	7a. AGE-Last birthda (Years)		EAR 7c. UNDER 1	DAY 8. DAT	E OF BIRTH (Mo/Da
9	a. STATE OF BIRTH (If not U	IS/CA	leh CITIZEN O	E WHAT COUNTRY	VI10 EDI ICATIO	N 11: MARITAL STATU	IS (Specify) 1/2	SURVIVING SPOUSE		ecember 12, 19 ame prior to first marriage
	eme country) Californ	•		nited States	12	Marri		Vick	ie PEA	RSON
	3. SOCIAL SECURITY NUM	*****		CCUPATION (Give		one During Most of	14b KIND O	F BUSINESS OR IN		Ever in US Ar
• °	-8596					Race Car Drive		Owner		Forces? Yes
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	Nevada	193	Douglas		Minden	14 - 24 DAVID 1	Squires S	i.w-	10 2 3 2 3	LIMITS (Specify or No) Yes
7	6. FATHER/PARENT - NAME	(First Mi		Tiv)	MILIOGIT			(First Middle Last	Cidles	768
; '`		•	ries COLV			I/ MOTHERU	WELL - LAWRE	Ruth LAL		
10	8a. INFORMANT- NAME (Ty				MAILING ADDR	ESS (Street or D	ED No City or	Town, State, Zip)	, , , , , , , , , , , , , , , , , , ,	
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STATE REGISTRAR

building, etc. (Specify)

CERTIFIED COPY OF VITAL RECORDS

28d. DESCRIBE HOW INJURY OCCURRED

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.

PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1. Hypertension, Senile Dementia

28f. PLACE OF INJURY-At home, farm, street, factory, office

DATE ISSUED:

28e. INJURY AT WORK (Specify

APR 11 2018

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

STATE

26. AUTOPSY (Specif 27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No. (Specify Yes or No) No.

STREET OR R.F.D. No. CITY OR TOWN

