

**PREPARED BY:**

Mr. William T Roney III  
1428 Purple Sage Drive  
Gardnerville, Nevada 89460

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)  
)  
)



00088439201909269990070070

KAREN ELLISON, RECORDER

E05

**AFTER RECORDING RETURN TO:**

Mr. William T Roney III  
1428 Purple Sage Drive  
Gardnerville, Nevada 89460

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)  
)  
) ABOV

STATE OF NEVADA

)

SS.

COUNTY OF DOUGLAS

)

**DEATH OF GRANTOR AFFIDAVIT**

We, Mr. William T Roney III and Mrs. Christina R Roney, as married tenants in common and both being of the legal age of consent, both being duly sworn, depose and state that we wish to claim property of the deceased, Mr. William T Roney Jr., who was a resident of the state of Nevada at the time of death on 03/05/2019.

William T. Roney III and Christina R Roney deposes and says that William T. Roney Jr. the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as William T. Roney Jr. named as the grantor or as one of the grantors in the deed upon death recorded on August 28, 2018, as document or file number 2018-918661 in the records of Douglas County, Nevada, covering real property commonly known as 1428 Purple Sage Drive, City of Gardnerville, County of Douglas State of Nevada 89460 having a parcel number of 1220-22-211-014.

See attached Exhibit A  
DEED UPON DEATH

THEREFORE, we are claiming the following portions of the decedent's following property:

All that certain real property situated in the County of Douglas, State of Nevada, described as follows:  
Lot 7 in Block B, as shown on the map of BARRINGTON RANCHOS, filed for record in the office of the County Recorder of Douglas County, Nevada on March 1, 1991 in Book 391 at page 187 as Document No. 245840, being a subdivision of Lot 706 as shown on the map of GARDNERVILLE RANCHOS UNIT NO. 6, filed for record in the office of the County Recorder of Douglas County, Nevada on May 29, 1973 in Book 573 at Page 1026 as File No. 66512.

DULY SWORN AND AUTHORIZED, WE CERTIFY UNDER PENALTY OF PERJURY UNDER NEVADA LAW THAT THE CONTENTS OF THE AFOREMENTIONED AFFIDAVIT ARE TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

William T Roney III  
(PETITIONER SIGNATURE)

Mr. William T Roney III

Christina R Roney  
(PETITIONER SIGNATURE)

Mrs. Christina R Roney

3-22-19  
(DATED)

3/22/19  
(DATED)

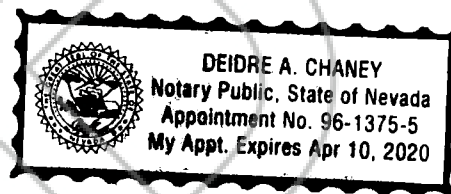
STATE OF NEVADA

COUNTY OF DOUGLAS

On March 22, 2019, before me, Deidre A CHANEY personally appeared, William T Roney III and Christina R Roney and proved to me on the basis of satisfactory evidence to be the persons whose names are subscribed to this DEATH OF GRANTOR AFFIDAVIT and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal

Deidre A Chaney  
(Notary Signature)



My Commission Expires: 04-10-2020  
[NOTARY PUBLIC MAY AFFIX STAMP HERE]

APN #: 1220-22-211-014

**RECORDING REQUESTED BY:**  
William T. Roney III

**WHEN RECORDED MAIL TO:**  
William T. Roney III  
1428 Purple Sage Drive  
Gardnerville, NV 89460

**MAIL TAX STATEMENTS TO:**  
William T. Roney III  
1428 Purple Sage Drive  
Gardnerville, NV 89460



KAREN ELLISON, RECORDER

E10

I, the undersigned, hereby affirm that this document submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

**DEED UPON DEATH**

I, William T. Roney Jr. through my Power of Attorney, William T. Roney III, does hereby convey in equal shares to William T. Roney III and Christina R. Roney, as married tenants in common, effective on my death, all right, title and interest in the real property commonly known as 1428 Purple Sage Drive, City of Gardnerville, County of Douglas, State of Nevada, and more particularly described as:

**All that certain real property situated in the County of Douglas, State of Nevada, described as follows: Lot 7 in Block B, as shown on the map of BARRINGTON RANCHOS, filed for record in the office of the County Recorder of Douglas County, Nevada on March 1, 1991 in Book 391 at page 187 as Document No. 245840, being a subdivision of Lot 706 as shown on the map of GARDNERVILLE RANCHOS UNIT NO. 6, filed for record in the office of the County Recorder of Douglas County, Nevada on May 29, 1973 in Book 573 at Page 1026 as File No. 66512.**

Together with all improvements, tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

**THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR(S). THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR(S) WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTOR(S) IN THE SAME REAL PROPERTY.**

DATED: August 28, 2018

William T. Roney III POA

William T. Roney III, Medical POA, Real Estate POA, & Appointed Veterans Fiduciary for William T. Roney Jr.

ACKNOWLEDGMENT

On this 28 day of ~~July~~ <sup>August</sup>, in the year 2018, before me, personally appeared William T. Roney III, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument, and acknowledged that this DEED UPON DEATH that he, as Power of Attorney of and for William T. Roney Jr. with sufficient proof shown to myself, executed it as a free and voluntary act and deed for the uses and purposes therein mentioned.

Notary Public in and for the State of Nevada

County of Douglas

Residing at: 1362 Hwy 395 #109 Gardnerville NV 89410

My Commission Expires: 01/20/2020

Karen Stage (Signature of Notary Public)

NOTARY SEAL



# EXHIBIT A

COOP

**STATE OF NEVADA**  
**CERTIFICATION OF VITAL RECORD**

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

CASE FILE NO. 4070330

**CERTIFICATE OF DEATH**

2019004583

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK	1a DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) <b>William Trinkle RONEY JR</b>			2 DATE OF DEATH (Mo/Day/Year) <b>March 05, 2019</b>		3a COUNTY OF DEATH <b>Douglas</b>	
	3b CITY, TOWN, OR LOCATION OF DEATH <b>Gardnerville</b>		3c HOSPITAL OR OTHER INSTITUTION -Name(If not either, give street address) <b>1428 Purple Sage Dr</b>		3e If Hosp or Inst indicate DOA,OP/Emer Rm Inpatient(Specify) <b>Home</b>		4 SEX <b>Male</b>
DECEDENT	5 RACE (Specify) <b>White</b>		6 Hispanic Origin? Specify No - Non-Hispanic	7a AGE-Last birthday (Years) <b>94</b>	7b UNDER 1 YEAR MOS   DAYS	7c UNDER 1 DAY HOURS   MINS	8 DATE OF BIRTH (Mo/Day/Yr) <b>September 05, 1924</b>
	9a STATE OF BIRTH (If not US/CA, name country) <b>Pennsylvania</b>		9b CITIZEN OF WHAT COUNTRY <b>United States</b>	10 EDUCATION <b>18</b>	11 MARITAL STATUS (Specify) <b>Widowed</b>	12 SURVIVING SPOUSE'S NAME (Last name prior to first marriage)	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	13 SOCIAL SECURITY NUMBER <b>██████-0940</b>		14a USUAL OCCUPATION (Give Kind of Work Done During Most of)		14b KIND OF BUSINESS OR INDUSTRY		Ever in US Armed Forces? <b>Yes</b>
	15a RESIDENCE - STATE <b>Nevada</b>		15b COUNTY <b>Douglas</b>	15c CITY, TOWN OR LOCATION <b>Gardnerville</b>	15d STREET AND NUMBER <b>1428 Purple Sage Dr</b>		15e INSIDE CITY LIMITS (Specify Yes or No) <b>Yes</b>
PARENTS	16 FATHER/PARENT - NAME (First Middle Last Suffix) <b>William Trinkle RONEY SR</b>			17 MOTHER/PARENT - NAME (First Middle Last Suffix) <b>Mary Catherine BYRNE</b>			
	18a INFORMANT - NAME (Type or Print) <b>William Trinkle RONEY III</b>			18b MAILING ADDRESS (Street or R F D No, City or Town, State, Zip) <b>1428 Purple Sage Dr Gardnerville, Nevada 89460</b>			
DISPOSITION	19a BURIAL CREMATION, REMOVAL, OTHER (Specify) <b>Cremation</b>		19b CEMETERY OR CREMATORY - NAME <b>Walton's Sierra Crematory</b>		19c LOCATION City or Town State <b>Carson City Nevada 89706</b>		
	20a FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) <b>CARLEN BLANSETT</b> SIGNATURE AUTHENTICATED		20b FUNERAL DIRECTOR LICENSE NUMBER <b>FD861</b>	20c NAME AND ADDRESS OF FACILITY <b>Walton's Funerals and Cremations</b> 1521 Church Street Gardnerville NV 89410			
TRADE CALL	TRADE CALL - NAME AND ADDRESS						
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) <b>NITA SCHWARTZ MD</b> 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) <b>March 08, 2019</b>		21c HOUR OF DEATH <b>18:35</b>		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) <b>Nita Schwartz MD 710 W. Washington St. Carson City, NV 89703</b>				23b LICENSE NUMBER <b>9114</b>		
REGISTRAR	24a REGISTRAR (Signature) <b>ANGELICA RAMIREZ</b> SIGNATURE AUTHENTICATED		24b DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) <b>March 11, 2019</b>		24c DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
CAUSE OF DEATH	25 IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))						Interval between onset and death
	PART I (a) <b>Coronary Atherosclerosis</b> DUE TO, OR AS A CONSEQUENCE OF						Interval between onset and death
CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST	(b) DUE TO, OR AS A CONSEQUENCE OF						Interval between onset and death
	(c) DUE TO, OR AS A CONSEQUENCE OF						Interval between onset and death
	(d) DUE TO, OR AS A CONSEQUENCE OF						Interval between onset and death
	PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part I					26 AUTOPSY (Specify Yes or No) <b>No</b>	27 WAS CASE REFERRED TO CORONER (Specify Yes or No) <b>No</b>
28a ACC., SUICIDE, HOM. UNDET OR PENDING INVEST. (Specify)		28b DATE OF INJURY (No./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

RVS-Rev-20120523a



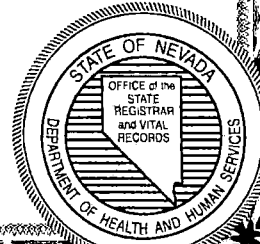
CERTIFIED COPY OF VITAL RECORDS

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.

*Julie Katcheva*  
STATE REGISTRAR

DATE ISSUED: **MAR 13 2019**

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)  
 a) 1220-22-211-014  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

2. Type of Property:  
 a)  Vacant Land    b)  Single Fam. Res.  
 c)  Condo/Twnhse    d)  2-4 Plex  
 e)  Apt. Bldg    f)  Comm'l/Ind'l  
 g)  Agricultural    h)  Mobile Home  
 i)  Other \_\_\_\_\_

FOR RECORDERS OPTIONAL USE ONLY	
BOOK _____	PAGE _____
DATE OF RECORDING: _____	
NOTES: _____	

3. Total Value/Sales Price of Property: \$ \_\_\_\_\_  
 Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ \_\_\_\_\_

4. If Exemption Claimed:  
 a. Transfer Tax Exemption per NRS 375.090, Section # 5  
 b. Explain Reason for Exemption: A conveyance of real property from parent to child pursuant to Deed Upon Death 2018-918661 to son William T Roney III and daughter-in-law Christina R Roney

5. Partial Interest: Percentage being transferred: 100.0 %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature *William T Roney Jr* Capacity *Grantor*

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION  
(REQUIRED)

BUYER (GRANTEE) INFORMATION  
(REQUIRED)

Print Name: William T Roney Jr  
 Address: 1428 Purple Sage Drive  
 City: Gardnerville  
 State: NV Zip: 89460

Print Name: William T Roney III  
 Address: 1428 Purple Sage Drive  
 City: Gardnerville  
 State: NV Zip: 89460

COMPANY/PERSON REQUESTING RECORDING  
(required if not the seller or buyer)

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_