

APN# 1121-05-510-026

Recording Requested by:

Name: First American Title
 Address: 5310 Kietzke Lane #100
 City/State/Zip: Reno NV 89511
RLT

(for Recorder's use only)

Affidavit Terminating Joint
Tenancy

(Title of Document)

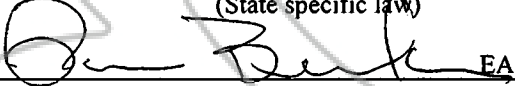
Recorder Affirmation Statement

Please complete Affirmation Statement below:

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

-OR-

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 as required by law:

 (State specific law)

 Signature Title

PAMELA BECKER
 Print Signature

This page added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

(Additional recording fee applies)

WHEN RECORDED MAIL TO:

Betty Jo Wailes
6534 NE Aquarius Ln
Bremerton, WA 98311
MAIL TAX STATEMENTS TO:

Same as above

The undersigned hereby affirms that this document submitted for recording includes a death certificate which may contain a social security number as required by NRS 440.380(1)(a).

SPACE ABOVE FOR RECORDER'S USE ONLY

Escrow No. 1902070-RLT
APN No.: 1121-05-510-026

2562512

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF COUNTY OF
~~WASHINGTON~~ Kitsap

} ss:

Betty Jo Wailes, of legal age and competent, to be a witness as to the matters stated herein, being duly sworn, deposes and says

That Russell G Wailes the decedent mentioned in the attached copy of the Certificate of Death, is the same person as Russell G Wailes named as one of the Grantees in that certain Deed from Pine View Estate Home Owners Association to Russell G Wailes and Betty Jo Wailes, Husband and wife, as joint tenants recorded in as Instrument No. 2018-922779, on 11/26/2018 of Official Records of Douglas County, Nevada, covering the following described property.

SEE EXHIBIT "A" ATTACHED HERETO AND BY REFERENCE MADE A PART HEREOF

Dated: June 4, 2019

Betty Jo Wailes
Betty Jo Wailes

STATE OF ~~NEVADA~~ ^{TO} WASHINGTON }
COUNTY OF ~~DOUGLAS~~ ^{TO} Kitsap } ss:

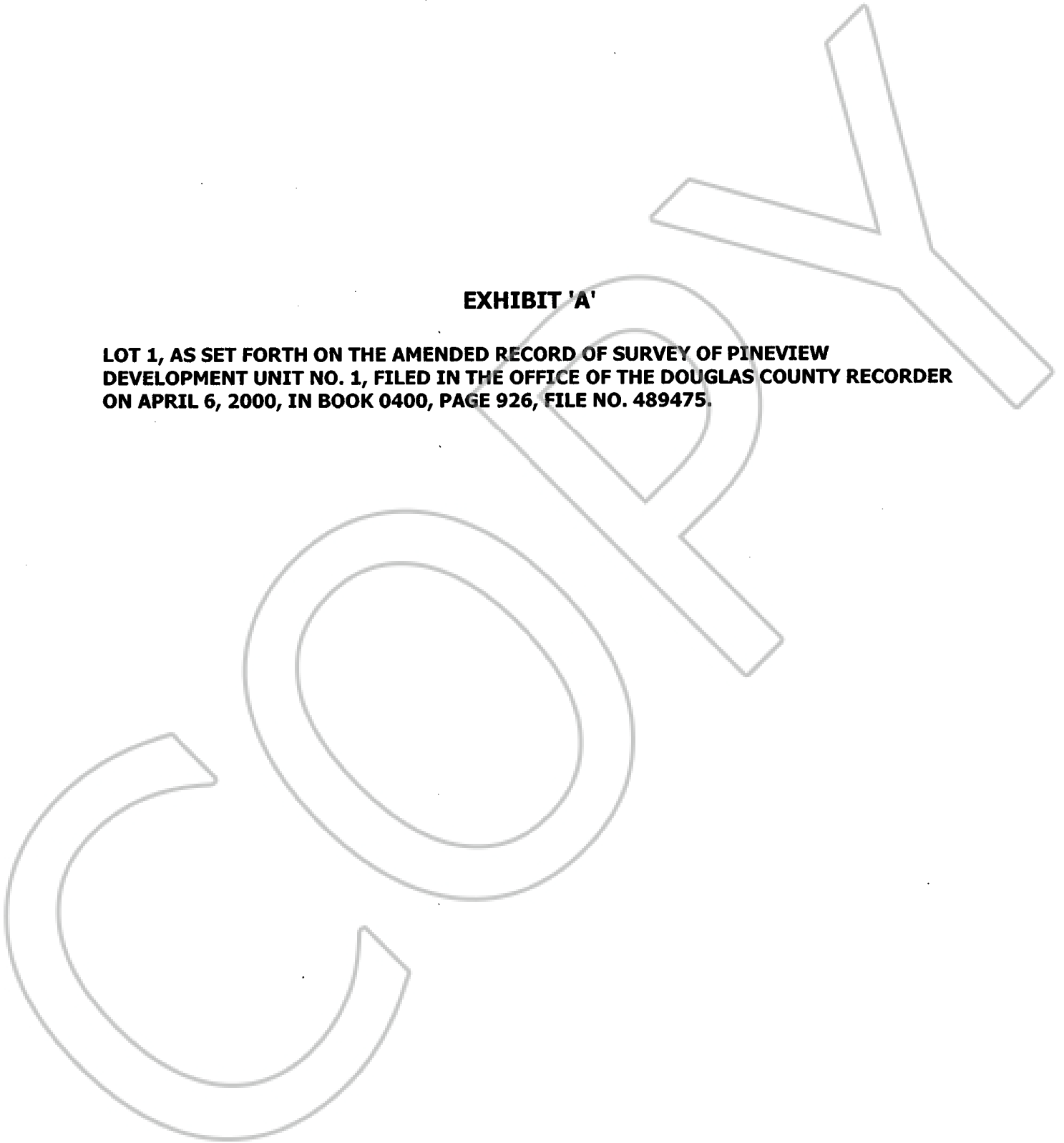
This instrument was acknowledged before me on 06/04/19
by Betty Jo Wailes

[Signature]
NOTARY PUBLIC

DOUG HOYER
Notary Public
State of Washington
License Number 200968
My Commission Expires
July 15, 2022

EXHIBIT 'A'

**LOT 1, AS SET FORTH ON THE AMENDED RECORD OF SURVEY OF PINEVIEW
DEVELOPMENT UNIT NO. 1, FILED IN THE OFFICE OF THE DOUGLAS COUNTY RECORDER
ON APRIL 6, 2000, IN BOOK 0400, PAGE 926, FILE NO. 489475.**



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2016-049221

DATE ISSUED: 12/14/2016

FEE NUMBER: 0000002781

GIVEN NAMES: RUSSELL GLEN
LAST NAME: WAILES

COUNTY OF DEATH: KITSAP
DATE OF DEATH: DECEMBER 05, 2016
HOUR OF DEATH: 08:05 A.M.
SEX: MALE
AGE: 73 YEARS
SOCIAL SECURITY NUMBER: ██████████ 0324

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 6534 NE AQUARIUS LN
CITY, STATE, ZIP: BREMERTON, WASHINGTON 98311

RESIDENCE STREET: 6534 NE AQUARIUS LN
CITY, STATE, ZIP: BREMERTON, WASHINGTON 98311
INSIDE CITY LIMITS? NO
COUNTY: KITSAP
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 1 YEAR

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

FATHER/PARENT: EVERETT OGLE WAILES
MOTHER/PARENT: ETHEL CHRISTINE HEGBOM

BIRTHDATE: AUGUST 10, 1943
BIRTHPLACE: TACOMA, WASHINGTON

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MILLER-WOODLAWN CREMATORY
CITY, STATE: BREMERTON, WA
DISPOSITION DATE: DECEMBER 08, 2016

MARITAL STATUS: MARRIED
SPOUSE: BETTY JO DUDGEON

FUNERAL FACILITY: NEPTUNE SOCIETY - PIERCE
ADDRESS: 3730 S. PINE STREET
CITY, STATE, ZIP: TACOMA WA 98409
FUNERAL DIRECTOR: ADAM L. HORTON

OCCUPATION: COMPUTER TECHNICIAN
INDUSTRY: ELECTRONICS
EDUCATION: HIGH SCHOOL GRADUATE OR GED COMPLETED
US ARMED FORCES? YES

INFORMANT: BETTY WAILES
RELATIONSHIP: SPOUSE
ADDRESS: 6534 NE AQUARIUS LN BREMERTON, WA 98311

- CAUSE OF DEATH:
- A. CHRONIC KIDNEY DISEASE
INTERVAL: 1 YEAR
 - B. HEPATIC CIRRHOSIS SECONDARY TO CONGESTIVE HEPATOPATHY
INTERVAL: 1 YEAR
 - C. ISCHEMIC CARDIOMYOPATHY
INTERVAL: YEARS
 - D. CORONARY ARTERY DISEASE
INTERVAL: YEARS

OTHER CONDITIONS CONTRIBUTING TO DEATH:
HYPERTENSION, HYPERLIPIDEMIA, HYPOTHYROIDISM, STASIS DERMATITIS

DATE OF INJURY:
HOUR OF INJURY:
INJURY AT WORK?
PLACE OF INJURY:

MANNER OF DEATH: NATURAL
AUTOPSY: NO
AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH? PROBABLY
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

LOCATION OF INJURY:

CITY, STATE, ZIP:
COUNTY:
DESCRIBE HOW INJURY OCCURRED:

CERTIFIER NAME: MICHAEL B. STEELE, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 2620 WHEATON WAY
CITY, STATE, ZIP: BREMERTON WA 98310
DATE SIGNED: DECEMBER 06, 2016

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

CASE REFERRED TO ME/CORONER: NO
FILE NUMBER: NOT APPLICABLE
ATTENDING PHYSICIAN:
NOT APPLICABLE

ITEM(S) AMENDED: SPOUSE, FA NAME

LOCAL DEPUTY REGISTRAR:
KRISTA JOHANSON
DATE RECEIVED: DECEMBER 07, 2016

NUMBER(S): 2016068361
DATE(S): 12/13/2016





Douglas County Recorder's Office
Karen Ellison, Recorder

<http://recorder.co.douglas.nv.us>
kellison@co.douglas.nv.us
(775) 782-9027

LEGIBILITY NOTICE

The Douglas County Recorder's Office has determined that the attached document may not be suitable for recording by the method used by the Recorder to preserve the Recorder's records. The customer was advised that copies reproduced from the recorded document would not be legible. However, the customer demanded that the document be recorded without delay as the parties right may be adversely affected because of a delay in recording. Therefore, pursuant to NRS 247.120 (3), the County Recorder accepted the document conditionally, based on the undersigned's representation (1) that a suitable copy will be submitted at a later date (2) it is impossible or impracticable to submit a more suitable copy.

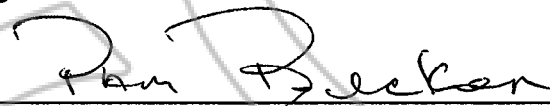
By my signing below, I acknowledge that I have been advised that once the document has been microfilmed, it may not reproduce a legible copy.



Signature

6/4/19

Date



Printed Name