

DOUGLAS COUNTY, NV

2019-940083

Rec:\$35.00

\$35.00

Pgs=4

12/23/2019 02:38 PM

ETRCO

KAREN ELLISON, RECORDER

APN#: 1319-03-811-002

Recording Requested By:

Western Title Company

When Recorded Mail To:

Jessica Lee Moseley

462 County Road 84

Santa Fe, NM

89506

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 of Trustee

This page added to provide additional information required by NRS 111.312

(additional recording fee applies)

AFFIDAVIT – DEATH OF TRUSTEE

Jessica Lee Moseley, of legal age, being first duly sworn, deposes and says:

1. Kenneth Brian Atkins, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Kenneth Brian Atkins named as Trustee in the Declaration of Trust dated February 10, 2011, and executed by John T. Atkins and W. Willene Atkins as Trustor(s).
2. At the time of the decedent's death, decedent was the record owner, as Trustee, of certain real property commonly known as 366 Genoa Springs Drive Genoa, NV 89411, which property is described in a Deed which was executed by John T. Atkins and W. Willene Atkins, Husband and wife, as joint tenants as Grantor(s) on March 21, 2001 and recorded as Instrument No. 521092, in Book 0801, Page 5489, 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:

PARCEL 1:

Unit 2, Block A, as shown on the Final Map of GENOA LAKES, PHASE 2, A PLANNED UNIT DEVELOPMENT, filed for record in the office of the Douglas County Recorder, State of Nevada on June 2, 1994 in Book 694, Page 202, as Document No. 338683, Official Records.

PARCEL 2:

That certain Exclusive use and Landscape Easement described as follows:

An easement located within a portion of the South 1/2 of Section 3, Township 13 North, Range 19 East, M.D.M., Douglas County, Nevada, being more particularly described as follows:

COMMENCING at the Southeasterly corner of Unit 2 being amended to the Typical House Plan 2 as shown on the Final Map for Genoa Lakes Phase 2 Planned Unit Development, Document No. 338683 of the Douglas County Recorder's Office, said point bears North 21°48'43" West, 145.97 feet from Tie Point "A" of said Final Map; thence North 83°19'56" West, along the Southerly line of said amended Unit 2, 54.33 feet to the Southwesterly corner thereof, being the TRUE POINT OF BEGINNING; thence North 83°19'56" West, 32.83 feet; thence North 07°13'58" West, 41.33 feet; thence North 19°36'07" West, 33.32 feet; thence South 83°19'56" East, 25.00 feet to the Southwesterly corner of Unit 3 as shown on said Genoa Lakes Phase 2 Final Map; thence South 83°19'56" East, along the Southerly line of said Unit 3, 53.33 feet; thence South 06°40'04" West, 4.00 feet; thence South 83°19'56" East, 19.34 feet; thence South 06°40'04" West, 10.83 feet to a point on the Northerly line of said amended Unit 2; thence along the Northerly and Westerly boundary lines of said amended Unit 2 the following 8 courses:

1. North 83°19'56" West, 52.83 feet;
2. South 06°40'04" West, 15.67 feet;

3. South 83°19'56" East, 3.67 feet;
4. South 06°40'04" West, 1.83 feet;
5. South 83°19'56" East, 6.00 feet;
6. South 06°40'04" West, 28.00 feet;
7. South 83°19'56" East, 3.00 feet;
8. South 06°40'04" West, 9.67 feet to the TRUE POINT OF BEGINNING.

NOTE: The above metes and bounds description appeared previously in that certain Grant, Bargain, Sale Deed recorded in the office of the County Recorder of Douglas County, Nevada on August 21, 2001, in Book 801, Page 5493 as Document No. 521093 of Official Records.

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 the foregoing is true and correct.

Dated 12/16/19 J Moseley
Jessica Lee Moseley, Successor Co - Trustee

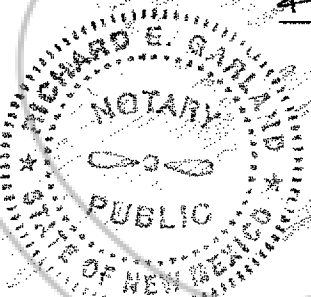
STATE OF New Mexico)SS

COUNTY OF Los Alamos

This instrument was acknowledged before me on
Dec 16, 2019

By Jessica Lee Moseley

Richard E. Garlano Exp Aug 29, 2020
Notary Public



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

CERTIFICATE NUMBER: 2016-017403

DATE ISSUED: 06/01/2016

FEE NUMBER: 000000029

GIVEN NAMES: KENNETH BRIAN
LAST NAME: ATKINS

COUNTY OF DEATH: SKAGIT
DATE OF DEATH: APRIL 25, 2016
HOUR OF DEATH: 01:30 P.M.
SEX: MALE
AGE: 66 YEARS

PLACE OF DEATH: HOME
FACILITY OR ADDRESS: 10124 COLLINS ROAD
CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284

SOCIAL SECURITY NUMBER: ████████-8099

RESIDENCE STREET: 10124 COLLINS ROAD
CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284
INSIDE CITY LIMITS? NO

HISPANIC ORIGIN: NO, NOT HISPANIC
RACE: WHITE

COUNTY: SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 18 YEARS

BIRTHDATE: APRIL 16, 1950
BIRTHPLACE: RENO, WASHOE CNTY, NEVADA

FATHER/PARENT: JOHN T ATKINS
MOTHER/PARENT: IVA MARIE PORTER

MARITAL STATUS: MARRIED
SPOUSE: MARYANN MENDRYK

METHOD OF DISPOSITION: CREMATION
PLACE OF DISPOSITION: MOUNT VERNON CREMATORY
CITY, STATE: MOUNT VERNON, WA
DISPOSITION DATE: APRIL 28, 2016

OCCUPATION: CABINET MAKER
INDUSTRY: CABINET MANUFACTURING
EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE
US ARMED FORCES? NO

FUNERAL FACILITY: LEMLEY CHAPEL
ADDRESS: 1008 THIRD ST
CITY, STATE, ZIP: SEDRO WOOLLEY WA 98284
FUNERAL DIRECTOR: RICK B. LEMLEY

INFORMANT: MARYANN ATKINS
RELATIONSHIP: SPOUSE
ADDRESS: 10124 COLLINS ROAD SEDRO-WOOLLEY, WA 98284

- CAUSE OF DEATH:
- A. HYPOKALEMIA OF UNKNOWN CAUSE
INTERVAL: 2 MONTHS
 - B. INTERVAL:
 - C. INTERVAL:
 - D. INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:
ALCOHOL RELATED DEMENTIA, ALCOHOLISM, SUBDURAL HEMATOMA

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? NO
PREGNANCY STATUS, IF FEMALE: NOT APPLICABLE

LOCATION OF INJURY:

CERTIFIER NAME: LESLIE A. ESTEP, MD
TITLE: PHYSICIAN
CERTIFIER
ADDRESS: 227 FREEMAN DRIVE, SUITE A
CITY, STATE, ZIP: MOUNT VERNON WA 98273
DATE SIGNED: APRIL 26, 2016

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

STATUS OF DECEDENT, IF A TRANSPORTATION INJURY:
NOT APPLICABLE

CASE REFERRED TO ME/CORONER: YES
FILE NUMBER: 288
ATTENDING PHYSICIAN:
NOT APPLICABLE

ITEM(S) AMENDED: DOB

LOCAL DEPUTY REGISTRAR:
MEL PEDROSA
DATE RECEIVED: APRIL 27, 2016

NUMBER(S): 2016063321
DATE(S): 06/01/2016

