

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. John David Atkins, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as John David 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.

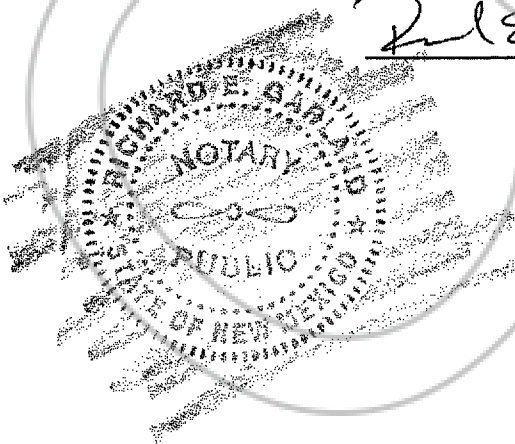
Dated 12/16/19 J. Moseley  
 \_\_\_\_\_  
 Jessica Lee Moseley, Successor Co - Trustee

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. Gabriel EXP Aug 29, 2020  
 \_\_\_\_\_  
 Notary Public



# STATE OF ARIZONA

## CERTIFICATION OF VITAL RECORD

ORIGINAL  
STATE COPY

STATE OF ARIZONA  
DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS  
CERTIFICATE OF DEATH

State File Number  
102-2019-019374

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX) <b>JOHN, DAVID, ATKINS</b>		2. AKA'S (IF ANY)		3. DATE OF DEATH <b>04/23/2019</b>	
4. SEX <b>MALE</b>		5. SOCIAL SECURITY NUMBER <b>██████████7466</b>		6. DATE OF BIRTH <b>02/17/1948</b>	
7. AGE <b>71 YEARS</b>		8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH <b>PHOENIX, MARICOPA, 85013</b>			
9. PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY NAME/ADDRESS) <b>RESIDENCE - 106 W MARLETTE AVENUE</b>					
10. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) <b>RENO, NEVADA</b>		11. MARITAL STATUS <b>MARRIED</b>		12. NAME OF SURVIVING SPOUSE PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) <b>LISA, ANN, JACKSON</b>	
13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, COUNTY, STATE, ZIP) <b>106 W.MARLETTE AVENUE, PHOENIX, MARICOPA, AZ, 85013</b>					
14. DECEDENT'S HISPANIC ORIGIN(S) <b>NO, NOT SPANISH/HISPANIC/LATINO</b>		15. DECEDENT'S RACE(S) <b>WHITE</b>		16. EVER IN ARMED FORCES <b>YES</b>	
17. OCCUPATION <b>NATURAL RESOURCE ADVOCATE</b>					
18. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX) <b>JOHN, T, ATKINS</b>			19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) <b>IVA, MARIE, PORTER</b>		
20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX) <b>LISA, ANN, ATKINS</b>				21. RELATIONSHIP <b>SPOUSE</b>	
22. INFORMANT'S MAILING ADDRESS <b>106 W MARLETTE AVENUE, PHOENIX, AZ, 85013</b>					
23. NAME AND ADDRESS OF FUNERAL FACILITY OR RESPONSIBLE PERSON <b>A.L. MOORE-GRIMSHAW MORTUARIES BETHANY 710 W BETHANY HOME ROAD, PHOENIX, AZ, 85013</b>		24. FUNERAL DIRECTOR'S NAME OR RESPONSIBLE PERSON <b>CHAD, JOHNSON</b>		25. LICENSE NUMBER <b>F1522</b>	
26. METHOD(S) OF DISPOSITION <b>CREMATION</b>		27. NAME AND LOCATION OF 1ST DISPOSITION FACILITY <b>GREENWOOD MEMORY LAWN CREMATORY PHOENIX, AZ, US</b>		28. NAME AND LOCATION OF 2ND DISPOSITION FACILITY	
<b>MEDICAL CERTIFICATION SECTION CAUSE OF DEATH PART I</b>					
29. A. IMMEDIATE CAUSE OF DEATH <b>METASTATIC SMALL CELL LUNG CANCER</b>				30. APPROXIMATE INTERVAL <b>YEARS</b>	
31. B. DUE TO OR AS A CONSEQUENCE OF				32. APPROXIMATE INTERVAL	
33. C. DUE TO OR AS A CONSEQUENCE OF				34. APPROXIMATE INTERVAL	
35. D. DUE TO OR AS A CONSEQUENCE OF				35. APPROXIMATE INTERVAL	
<b>CAUSE OF DEATH PART II</b>					
37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I:		38. INJURY? <b>NO</b>		39. INJURY AT WORK? <b>NO</b>	
		40. MANNER OF DEATH <b>NATURAL DEATH</b>		41. TIME OF DEATH <b>02:29 AM</b>	
		42. WAS AN AUTOPSY PERFORMED? <b>NO</b>		43. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?	
<b>CAUSE AND MANNER CERTIFICATION</b>					
TO THE BEST OF MY KNOWLEDGE, THE INFORMATION ABOVE IS CORRECT AND THE DEATH OCCURRED DUE TO THE CAUSE(S) AND MANNER STATED.		44. NAME OF PERSON COMPLETING CAUSE OF DEATH <b>CHERYL, PENDERGRASS</b>		45. DATE CERTIFIED <b>04/25/2019</b>	
46. CERTIFIER'S ADDRESS <b>1212 N SPENCER #SUITE 2, MESA, AZ, 85203</b>					

Date Registered: 04/25/2019

Date Issued: 04/26/2019

VS-49 Rev. 12/2017



This is a true certification of the facts on file with the Arizona Department of Health Services: Bureau of Vital Records, PHOENIX, ARIZONA.  
Revised 07/2016

*Krystal Colburn*  
**KRYSTAL COLBURN**  
ASSISTANT STATE REGISTRAR



This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE