DOUGLAS COUNTY, NV

Rec:\$40.00 \$40.00

Pgs=4

2020-942525 02/20/2020 03:07 PM

FIRST AMERICAN TITLE MINDEN

KAREN ELLISON, RECORDER

RECORDING REQUESTED BY

First American Title Insurance Company of Nevada

AND WHEN RECORDED RETURN TO AND MAIL TAX STATEMENTS TO:

Charity Peters 13384 Violet Road Anamosa IA 52205

> Space Above This Line for Recorder's Use Only

A.P.N. 1022-11-002-041

File No.: 143-2582456 (mk)

Affidavit - Death of Trustee

State of Iwa

County of JONLS

)ss.)

Charity K. Peters ("Declarant") is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

- 1. **Emil E. Peters** ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on Thomas 2,2001 at Capids, In (city and state of death).
- 2. Decedent is the same person named as the trustee named in that certain Declaration of Trust dated **3-28-1997** executed by as trustor(s) (the "Trust").
- Decedent as a trustee is the same person who was named as a grantee in that certain Grant Deed dated 6-20-2000 which was recorded as Instrument No. 0495327 in Book 0700, Page 0636, of Official Records of Douglas County, Nevada as legally described as follows:

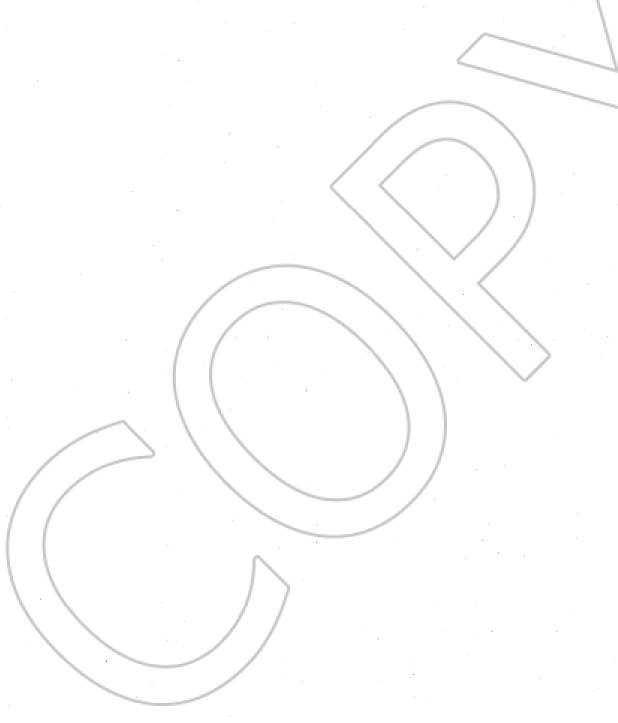
Legal Description attached hereto as Exhibit "A" and incorporated herein by this reference

4. Declarant is the successor trustee under the Trust. The Trust was in effect at the date of the death of the Decedent and has not been revoked. Declarant has consented to act as trustee under the Trust.

Dated: Charity K. Peters
DECLARANT:
Charity K. Peters Charity K. Perers
Charty K. Poters
State of Zowa)
County of 90:1es)ss)
SUBSCRIBED AND SWORN TO (or affirmed) before me the undersigned, a Notary Public in and
for said County Goves and State Zous, this
day of Feb , 20 20 by charts K Peters , personally know to me or proved to me on the
chart K. Peters , personally know to me or proved to me on the
basis of satisfactory evidence to be the person(s) who appeared before me
WITNESS my hand and official seal. This area for official notarial seal
WITHLSS My Haild and official seal.
Signature Bran Live RYAN PRIER
Signature RYAN PRIER Commission Number 799707 MY COMMISSION EXPIRES OCTOBER 10, 2022
Signature RYAN PRIER Commission Number 799707 MY COMMISSION EXPIRES OCTOBER 10, 2022 Notary Name: Ryan Pries Notary Phone: 480 292 5987
Signature RYAN PRIER Commission Number 799707 MY COMMISSION EXPIRES OCTOBER 10, 2022

EXHIBIT 'A'

LOT 53, AS SHOWN ON THE MAP OF TOPAZ RANCH ESTATES NO. 1, FILED IN THE OFFICE OF THE COUNTY RECORDER, DOUGLAS COUNTY, NEVADA ON DECEMBER 4, 1963 UNDER FILE NO. 23962.



FOR	NAME 1. SEX	Emil	E.	Peters Per 1 DAY DATE OF BRYH	10 TANA 14	of Death (Mo., Do., Yr.) ebruary 2, 2001
HANDBOOK	s. Male FACILITY NAME (It and Institution 66. St. Luke's Hospit	7 100000 100 100	MOS. DAYS, IND	s. April 28.		INSIDE CITY LIMI (Specify year or no) 6d, Yes
DECEDED	HOSPITAL Companient WAS DECEDENT OF HISPANK (Specify No or Yes below)	☐ ER/Overhent	□ 00X 07RE	ACE - White, Black	Residence Other (Specify	(Specify only highest grade complyied)
	(Specify No or Yes below) If yes, specify Cuben, Mexican, 1 7. S NO TYES Com BIRTHPLACE	cdy.	27.57	White	Elementary/Secondary (C	
DECEDENT LIVED F DEATH	10. Zurich, Switzer Social Security Number 13. 4336	land 11 U.S.A.	ATION (Give kind of work done to corpus relied.)	WED DIVORCED (Sovery) Viarried Surreg meet KIND O	Train Charles To	(I wid, give meiden name) K. Lougermilk Was decedent ever in U.S. Armet SERVICES? (Speed) year or no) 15. Yes.
<u> </u>	RESIDENCE - STATE	COUNTY SARCE	ISTY TOWN OR LOCATIO	N STREE	AND NUMBER OF RESIDENCE OF ROSCATIATY Rd. FIRST MIDDLE	INSIDE CITY UI (Specify yes; or , 164 Y CS
INEGRMANT	17. Eduar NFORMANTS VAME	The second secon	Peter	NAME 18. MAILING ADDRESS (Street	Anne and Number or Rural Route Number	Blumer r, City of Town, State, Zip Code)
~ ~	IDE. METHOD OF DISPOSITION		PLACE OF DISPOSIT	196. 107 Rosemar On (Hame of Complety, Creman	/ Rd Anaroosa, Iowa :	
	☐ Donation ☐ Other (S) UNERAL DIRECTOR - SIGNATO LL. ▶		De Viel		zee, Marion, I	OWa F.O. UCENSE # 21b. 2399
(2	UNERAL HOME NAME AND A COETISCH FUMERAL EGISTRAG SICNATURE				A CONTROL OF THE CONT	DATE RECEIVED BY REGISTR
REGISTRAR	23. MANNER OF CEATH X Natural Pendin	Celmin OF WAR			46192 SE HOW INDURY OCCUPACED	DATE RECEIVED BY REGISTR. (Mo. Day Yr.) 22b. FEB 2 9 209
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Accident Investor Suicide Could's Monucide Gestern	petion 24a. PLACE OF INJURY Index 24a.	(Specify at home, term, street, factory, office building,	tocation (Street a	nd Number of Rural Route Number,	City or Town: State, Zip Code)
2	o the best of my knowledge, dea Se. (Signature and tide) IN- IAME AND TITLE OF ATTENDIN	1 /	- 92/	memor en stalon.	and the state of t	16701 256. 031
2	K, IAME AND ADDRESS OF CERT	TIFIER (Physician or Medical Ex	The state of the s	A	The second secon	
	, Dr. Annamer	21000	country has been been a see	ng seperation as the roy property	pias, TA 5240	
	Energy or heart feet Energy or heart feet Feet disease or condition residing in deart		ATE CAUSE	he mode of cylno, such as cards	IC of respitory arrest.	Approximate Interval Selve Onset and De
CAUSE OF		DUE TO	ON LONG AND		ease / C l	za i
DEATH	Sequentially list conditions, leading to immediate cause UNDERLYTING CAUSE (De mony that indiated avents in in open) USST	Errer DUE TO	(OR AS A CONSEQUENCE O	react dis	cose, pater	The contract of the contract o
		DUE 76	(OR AS A CONSEQUENCE C		**************************************	
4 70.00		44	A STATE OF THE STA	The Princip District Avenue	A STANDARD CONTRACTOR OF A STANDARD CONTRACTOR CONTRACT	AND THE PERSON OF THE PERSON O

This is to certify that this is a true and correct reproduction of the original record as recorded in this state, issued under the authority of Chapter 144, Code of Iowa. This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar or Designee.

THIS COPY NOT VALID UNLESS UNALTERED AND PREPARED ON CERTIFIED SECURITY PAPER



02/18/2020 **DATE ISSUED** County of Issuance: Jones

FORM #588-0328S (Revised 09/2017)