DOUGLAS COUNTY, NV

2020-943482

Rec:\$40.00

\$40.00 Pgs=3

03/13/2020 12:31 PM

TICOR TITLE - GARDNERVILLE

KAREN ELLISON, RECORDER

WHEN RECORDED MAIL TO:
V. Menzer
1524 Downo Dy.
Winden in \$1423
MAIL TAX STATEMENTS TO:
Suppose Bayone

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

No: 99-54931-5 - Expires April 10, 2023

Escrow No. 1906114-RLT APN No.: 1420-33-701-022

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF NEVADA COUNTY OF DOUGLAS

} ss:

Vicki Jean Menzer, of legal age and competent, to be a witness as to the matters stated herein, being duly sworn, deposes and says

That Jean L. Olenik the decedent mentioned in the attached copy of the Certificate of Death, is the same person as Jean L. Olenik named as one of the Grantees in that certain Deed from Parigini Leasing Inc., a Nevada Corporation to Jean L. Olenik, an unmarried woman and Vicki Menzer, an unmarried woman. As joint tenants with right of survivorship recorded in Book 212 as Instrument No. 797674, on 02/23/2012 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: 2.19.202.0	\ \
ValMe))
Vicki Menzer, Surviving Joint Tenant	
STATE OF NEVADA COUNTY OF POUGLAS SS:	
This instrument was acknowledged before me on by	2/9/2020
by VICK, Member	

NOTARY PUBLIC	RISHELE L. THOMPSON Notary Public - State of Nevada Applitment Recorded in Davids County

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH

VITAL STATISTICS

	and the second	
204	204	3912
- 244	211	3712

TYPE OR				RTIFICATE	OF DEA	TH			2012 STATE FIL	20139° .e numbe		1	
TYPE OR PRINT IN	1a. DECEASED-NAME (FIRST,	JFFIX)				2. DATE OF DEATH (Mo/Day/Year)				3e. COUNTY OF DEATH			
PERMANENT	Jean L			OLENIK			August 30, 2012				Douglas		
BLACK INK	3b. CITY, TOWN, OR LOCATIO	N OF DEATH 3c.	HOSPITAL OR	OTHER INSTITUTION	ON -Name(If not	either, give stre	et 3e.lf Hosp Inpatient(ndicate DO	A,OP/Emer	. Rm. 4. §	SEX	
# DECEDENT	Minden	lan	d number)	1340 De					Home			Female	
60000	5. RACE White (Specify)		8. Hispanic Origin? Specify No - Non-Hispanic 7a. AGE-Last birthday (Yeers)			ers) M	75. UNDER 1 YEAR 7C. UNDER 1 DAY 8. I				March 08, 1925		
IF DEATH OCCURRED IN INSTITUTION	9a. STATE OF BIRTH (If not U.S name country) Wisconsi		ZEN OF WHAT O	COUNTRY 10 EDU	I	RRIED, NEVER CED (Specify) \		DOWED,	12. SUF maiden		POUSE (if will	e, give	
BEE HANDBOOK REGARDING BOMPLETION OF			LUSUAL OCCUPATION (Give Kind of Work Done During Most Vorking Life, Even If Retired) Homemaker		Most 14	146. KIND OF BUSINESS OR INDUST				TRY Ever in US Armed Forces? No			
RESIDENCE ITEMS	15a RESIDENCE - STATE Nevada	156. COUNTY Doug		5c. CITY, TOWN O		15d. STRE	ET AND NUMB	ER			15e. INSID LIMITS (Sp or No)		
PARENTS	16. FATHER/PARENT - NAME		et Suffix)			OTHER/PARE	IT-NAME (F		Last Su DENBU	796		\	
		MENZER		186, MAILING		And the second second	lo, City or Tow is St. M inde		• •	23			
ISPOSITION	19a. BURIAL, CREMATION, RE Removal/		(Specify) 19b. Cl		MATORY - NAM Abbey Mem			19c. L	OCATION Boni	•	own State mia 91902	N. 1	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	K NOEL		DIRECTO	RAL R LICENSE 620	20c. NAME AN	Wal	on's Cl	napel of t Carson Cit		•		
SPANE CALL	TRADE CALL - NAME AND ADD	URE AUTHEN		939 Booite Bood	Bonita CA 0	1902		тоор .	Jai 3011 011	.,			
CERTIFIER	21s. To the best of my kr due to the cause(s) state and the cause(s)	d. (Signature & T KELLE BR (Day/Yr) (012	OGAN M.D 21c. HOUR O	F DEATH 12:10	Completed	2a. On the bas he time, date ar 22b. DATE SIG 22d. PRONOU!	nd place and du NED (Mo/Day/	ie to the c	22c.	ted. (Signa	ture & Title)	·	
	23a. NAME AND ADDRESS OF			DING PHYSICIAN, 429 Elm Stree			ONER) (Type o	r Print)	2	3b. LICEN	SE NUMBER		
REGISTRAR			COLE SHO	T 47, TV T 4110.	24b. DATE (Mo/Day/Yr	RECEIVED BY Septemb	REGISTRAR er 05, 2012	30.	DEATH DU		NO X	DISEASE	
CAUSE OF DEATH	25. IMMEDIATE CAUSE PART I (a) Debility	1	V.	R LINE FOR (8), (I	o), AND (c).)					interval t	oetwoen onsel	and death	
CONDITIONS IF ANY WHICH	(b) Vascular	s a conseque Dementia								interval t	oetween onset	i and death	
GAVE RISE TO IMMEDIATE CAUSE -> STATING THE	(c) Atrial Fib							#15 	17.		oetween onset		
UNDERLYING CAUSE LAST	(d)	S A CONSEQUE			/					Interval	between onse	t and death	
/ /	PART II OTHER SIGNIFICANT								26. AUTOI (Specify Y		27. WAS CASI TO CORONER or No)	E REFERRED R (Specify Yes Yes	
	28s. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)			28s. HOUR OF		DESCRIBE HOW I	NJURY OCCURR	ED .	7				
\ \	28e. INJURY AT WORK (Specification of the control o	y 28f. PLACE OF building, etc. (S	INJURY- At hom opecify)	ne, farm, street, fact	ory, office 28g.	LOCATION	STREET O	R R.F.D.	No. CIT	Y OR TOV	VN	STATE	

STATE REGISTRAR

VR8-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.

0:7/06/2012

building, etc. (Specify)





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

EXHIBIT A LEGAL DESCRIPTION

All that certain real property situate in the County of Douglas, State of Nevada, described as follows:

A parcel of land located in the Northwest 1/4 of the Southeast 1/4 of Section 33, Township 14 North, Range 20 East, M.D.B.&M., according to the Official Map,

COMMENCING at the found East Quarter corner of said Section 33, proceed North 89°48'50" West, 1,636.02 feet along the quarter section line to a point;

THENCE South 0°09'10", West 1,091.09 feet to the TRUE POINT OF BEGINNING, which is the Northeast corner of the parcel;

THENCE North 89°48'50" West, 159.82 feet to the Northwest corner of the parcel;

THENCE South 0°09'10" feet West, 272.56 feet to the Southwest corner of the parcel; which lies on the centerline of Dennis Street;

THENCE South 89°48'50" East, 159.82 feet along the centerline of Dennis Street, a fifty foot wide public road, to the Southeast corner of the parcel;

THENCE North 0°09'10" East, 272.56 feet along the Easterly boundary of the parcel, to the TRUE POINT OF BEGINNING.

APN: 1420-33-701-022

Note: Book 212, Page 4292, as Document No. 797674 is provided pursuant to the requirements of Section

6.NRS 111.312.