



KAREN ELLISON, RECORDER

APN: 1318-10-310-045

Recording Requested By:
Lance N. McKenzie, Esq.
McDonald Carano, LLP
100 W. Liberty St., 10th Fl.
Reno, NV 89501

Mail Future Tax Statements To:
Carolyn B. Jerde, Trustee
James B. and Carolyn B. Jerde Trust
P.O. Box 66736
Scotts Valley, California 95067

The undersigned hereby affirms that this document submitted for recording **DOES** contain the personal information of the decedent per NRS 239B.030(2)(a), NRS 440.380(1)(a) and NRS 40.525(5).

AFFIDAVIT OF DEATH OF CO-TRUSTEE

STATE OF NEVADA)
 : ss.
COUNTY OF WASHOE)

CAROLYN B. JERDE, being first duly sworn, upon oath deposes and says:

1. Affiant is over the age of twenty-one years, legally competent and possessed of her rights; and
2. JAMES B. JERDE, the decedent mentioned in the certified copy of the Certificate of Death attached hereto as Exhibit "A", and incorporated herein and made a part hereof by this reference, is one of the Co-Trustees of the JAMES B. and CAROLYN B. JERDE TRUST dated April 22, 2004 (the "Trust"), which acquired title to certain real property commonly known as 192 Foothill Road, Zephyr Cove, Nevada, under File No. 0641173, recorded on April 7, 2005, and more particularly described as Exhibit "B"

3. Affiant, CAROLYN B. JERDE, further states that JAMES B. JERDE died in Santa Cruz, State of California, on June 23, 2019, and as a result of his death and pursuant to the terms of the Trust, CAROLYN B. JERDE, became the sole Trustee of the Trust.

4. Title to the subject property is now held as follows:

“CAROLYN B. JERDE, Trustee of the JAMES B. and CAROLYN B. JERDE TRUST dated April 22, 2004”

I declare under penalty of perjury under the laws of the State of Nevada that the foregoing is true and correct.

Further your affiant sayeth naught.

DATED: This 25th day of February, 2020.

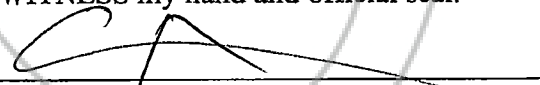
JAMES B. and CAROLYN B. JERDE TRUST
dated April 22, 2004

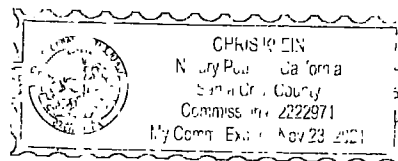
By: 
CAROLYN B. JERDE, Trustee

STATE OF CA)
 : ss.
COUNTY OF Santa Cruz)

On this 25 day of Feb, 2020, personally appeared before me, a notary public, CAROLYN B. JERDE, ~~personally known to me~~ (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her capacity, and that by her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.


NOTARY PUBLIC



CHRIS KLEIN
Commission # 2222971
Expires Nov 23, 2021

EXHIBIT "A"

DEATH CERTIFICATE

COPY

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SANTA CRUZ

SANTA CRUZ, CALIFORNIA

3052019135334

CERTIFICATE OF DEATH

3201944000845

STATE FILE NUMBER		USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS <small>STATE OF CALIFORNIA NO. 114899-0001 VS-1 (REV. 3/00)</small>				LOCAL REGISTRATION NUMBER		
DECEDENT'S PERSONAL DATA	1. NAME OF DECEDENT - FIRST (Given) JAMES		2. MIDDLE BRADLEY		3. LAST (Family) JERDE			
	AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)				4. DATE OF BIRTH mm/dd/ccyy 05/04/1947	5. AGE Yrs. 72	6. SEX M	
	9. BIRTH STATE/FOREIGN COUNTRY ID	10. SOCIAL SECURITY NUMBER -2749	11. EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	12. MARITAL STATUS/SRDP* (at Time of Death) MARRIED	7. DATE OF DEATH mm/dd/ccyy 06/23/2019	8. HOUR (24 Hours) 0626		
	13. EDUCATION - Highest Level/Degree (see worksheet on back) BACHELOR		14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) CAUCASIAN			
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED ENGINEER			18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) CONTROL SYSTEMS			19. YEARS IN OCCUPATION 48		
USUAL RESIDENCE	20. DECEDENT'S RESIDENCE (Street and number, or location) 1835 VINE HILL RD.							
	21. CITY SANTA CRUZ	22. COUNTY/PROVINCE SANTA CRUZ	23. ZIP CODE 95065	24. YEARS IN COUNTY 39	25. STATE/FOREIGN COUNTRY CA			
INFORMANT	26. INFORMANT'S NAME, RELATIONSHIP CAROLYN JERDE, SPOUSE			27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) PO BOX 66736, SCOTTS VALLEY, CA 95067				
	28. NAME OF SURVIVING SPOUSE/SRDP* - FIRST CAROLYN		29. MIDDLE NANCY	30. LAST (BIRTH NAME) BRADSHAW				
SPOUSE/SRDP AND PARENT INFORMATION	31. NAME OF FATHER/PARENT - FIRST JAMES		32. MIDDLE MARTEN	33. LAST JERDE		34. BIRTH STATE SD		
	35. NAME OF MOTHER/PARENT - FIRST BESSIE		36. MIDDLE BOBETTE	37. LAST (BIRTH NAME) RATHMAN		38. BIRTH STATE WA		
	39. DISPOSITION DATE mm/dd/ccyy 07/03/2019		40. PLACE OF FINAL DISPOSITION RESIDENCE OF CAROLYN JERDE 1835 VINE HILL RD., SANTA CRUZ, CA 95065					
FUNERAL DIRECTOR / LOCAL REGISTRAR	41. TYPE OF DISPOSITION(S) CR/RES		42. SIGNATURE OF EMBALMER ▶ NOT EMBALMED			43. LICENSE NUMBER -		
	44. NAME OF FUNERAL ESTABLISHMENT BENITO & AZZARO PACIFIC GARDENS CHAPEL		45. LICENSE NUMBER FD799	46. SIGNATURE OF LOCAL REGISTRAR ▶ GAIL J. NEWEL, MD		47. DATE mm/dd/ccyy 07/03/2019		
PLACE OF DEATH	101. PLACE OF DEATH DECEDENTS RESIDENCE							
	104. COUNTY SANTA CRUZ	105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 1835 VINE HILL RD.				106. CITY SANTA CRUZ		
CAUSE OF DEATH	107. CAUSE OF DEATH Enter the chain of events - - - diseases, injuries, or complications - - - that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. (A) CARDIOPULMONARY ARREST					Time Interval Between Onset and Death (AT) MINS	108. DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER	
	(B) DEMENTIA WITH LEWY BODIES					(BT) YRS	109. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	(C)					(CT)	110. AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	(D)					(DT)	111. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 NONE								
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.) NO								
PHYSICIAN'S CERTIFICATION	114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since Decedent Last Seen Alive		115. SIGNATURE AND TITLE OF CERTIFIER ▶ MICHAEL JOSEPH COULSON M.D.		116. LICENSE NUMBER A61436	117. DATE mm/dd/ccyy 07/03/2019		
	(A) mm/dd/ccyy 01/07/2003	(B) mm/dd/ccyy 06/20/2019	118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE MICHAEL JOSEPH COULSON M.D. 2980 EL RANCHO DR, SANTA CRUZ, CA 95060					
CORONER'S USE ONLY	119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined					120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	121. INJURY DATE mm/dd/ccyy	122. HOUR (24 Hours)
	123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)							
	124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)							
	125. LOCATION OF INJURY (Street and number, or location, and city, and zip)							
126. SIGNATURE OF CORONER / DEPUTY CORONER			127. DATE mm/dd/ccyy	128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER				

STATE REGISTRAR	A	B	C	D	E	 *010001004243264*	FAX AUTH.#	CENSUS TRAC
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CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF SANTA CRUZ



000328857

This is a true and exact reproduction of the document officially registered and placed on file in the Vital Records Section, Santa Cruz County Public Health Department.

DATE ISSUED **JUL 08 2019**

Agrevel MD
D. Ghilarducci MD

DAVID GHILARDUCCI, MD
CHIEF PUBLIC HEALTH OFFICER
SANTA CRUZ, CALIFORNIA

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

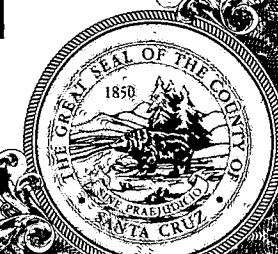


EXHIBIT "B"

Assessor's Parcel No. 1318-10-310-3045

192 Foothill Road, Zephyr Cove, Nevada

Situate in the County of Douglas, State of Nevada, described as follows:

PARCEL ONE

Beginning at the corner common to Lots 7, 8, 17 and 18, Block B amended Map of Zephyr Cove Property in Section 10, Tp. 13 N., R. 18 E., approved by the Board of County Commissioners of Douglas County, Nevada, August 5, 1929, and filed the same date with the Recorder of Douglas County, Nevada, thence Northeasterly along the line of Lot 17, 25 feet, thence Southeasterly parallel with side of Lot 17, a distance of 66.5 feet, thence Southwesterly parallel with end lines of lots 17 and 18, a distance of 123.94 feet, thence Northwesterly to the corner of Lot 18, thence 75 feet Northeasterly to the place of beginning, being parts of Lots 17 and 18, Block B, of said subdivision. Said deed being of record in Volume T of Deeds, Page 70, Douglas County, Nevada Records.

PARCEL TWO

Commencing at a point on the line between Lots 7 and 17, 25 feet Northeasterly from the corner common to Lots 7, 8, 17 and 18 in Block B of Zephyr Cove Property, Section 10, Township 13 North, Range 18 East, M.D.B.&M., as delineated on that certain map entitled "Amended Map of Zephyr Cove property in Section 10, T. 13 N., R. 18 E.", which was filed for record August 5, 1929 with the County Recorder of Douglas County, Nevada, thence Northeasterly along the said line between Lots 7 and 17, 50 feet to the corner common to Lots 6, 7, 16 and 17 in said Block B; thence Southeasterly along the line between Lots 16 and 17 in said Block B, 63 feet; thence Southeasterly on a line parallel to the line between Lots 7 and 17 in said Block B 50 feet; thence Northwesterly and parallel with the line between Lots 16 and 17 in said Block B to the point of commencement, being the strip 63 feet long in the Northeasterly 50 feet of Lot 17, in Block B next to Lots 7 and 16 in said Block. Said deed being of record in Volume U of Deeds, Page 36, Douglas County, Nevada Records.

Ref A13 111.312, this legal description was previously recorded as Document No. 31921, Book 479, Page 1555, on April 27, 1979.