DOUGLAS COUNTY, NV RPTT:\$352.95 Rec:\$40.00

2020-951430

Total:\$392.95

08/26/2020 03:37 PM

RICHARD JAMES GLENN III

Pgs=4

APN: 1022-10-002-004

After Recording, Mail to:

Richard James Glenn III 3020 110th St. SE Everett, WA 98208 0011711620200954200040049

KAREN ELLISON, RECORDER

Mail Tax Statements to:

Same as above

The undersigned affirms that this document <u>does</u> contain the social security number of any person. (NRS 239B.030).

DEATH OF GRANTOR AFFIDAVIT

RICHARD JAMES GLENN III, being duly sworn, deposes and says that KAREN GENEVA WARREN, the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as KAREN WARREN named as the grantor or as one of the grantors in the Transfer on Death Deed recorded on April 23, 2018, as Document Number 2018-913364, official records of Douglas County, Nevada, covering the following legal property:

Lot 150, as shown on the map of TOPAZ RANCH ESTATES UNIT NO. 2, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on February 20, 1967, in Book 47, Page 761, as Document No. 35464.

RICHARD JAMES GLENN III, a married man as his sole and separate property, is the grantee to whom the real property is conveyed upon the death of the grantor KAREN WARREN or is the authorized representative of the grantee or at least one of the grantees.

Per NRS 111.312, this legal description was previously recorded at Document No. 2018-913364, on April 23, 2018.

Dated: August 26, 2020

RICHARD JAMES GLENN III

ACKNOWLEDGMENT

STATE OF NEVADA)
	: ss
COUNTY OF DOUGLAS)

On August 26, 2020, before me, And Bout May Public, personally appeared RICHARD JAMES GLENN III, 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 he executed the same in his authorized capacities, and that by his 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.

Seal



NOTARY PUBLIC

CERTIFICATE OF DEATH



DATE ISSUED: 08/18/2020 FEE NUMBER: 112784107

CERTIFICATE NUMBER: 2020-036937

FIRST AND MIDDLE NAME(S): KAREN GENEVA

LAST NAME(S): WARREN

COUNTY OF DEATH: KING

DATE OF DEATH: AUGUST 07, 2020

HOUR OF DEATH: 08:15 AM

SEX: FEMALE AGE: 80 YEARS

SOCIAL SECURITY NUMBER:

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: MARCH 09, 1940 BIRTHPLACE: BINGER, OK

MARITAL STATUS: WIDOWED

SURVIVING SPOUSE: NOT APPLICABLE

OCCUPATION: OFFICE MANAGER

INDUSTRY: MEDICAL

EDUCATION: NO DIPLOMA, 9TH - 12TH GRADE

US ARMED FORCES: NO

INFORMANT: TRACIE WARREN

RELATIONSHIP: DAUGHTER

ADDRESS: 16426 SE 9TH ST BELLEVUE, WA, 98008

CAUSE OF DEATH:

A: STAGE IV LUNG ADENOCARCINOMA WITH BONE METASTASES

INTERVAL: 1.5 YEARS

INTERVAL:

C:

INTERVAL

D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

DATE OF INJURY:

HOUR OF INJURY:

INJURY AT WORK:

PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP:

COUNTY:

DESCRIBE HOW INJURY OCCURRED

TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: HOME

FACILITY OR ADDRESS: 16426 SE 9TH ST

CITY, STATE, ZIP: BELLEVUE, WASHINGTON 98008

RESIDENCE STREET: 16426 SE 9TH ST CITY, STATE, ZIP: BELLEVUE, WA 98008

INSIDE CITY LIMITS: YES COUNTY: KING

TRIBAL RESERVATION: NOT APPLICABLE LENGTH OF TIME AT RESIDENCE: 2 YEARS

FATHER: VERNON HISER MOTHER: JESSE FAE MEEKS

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: EVERGREEN WASHELLI CREMATORY

CITY, STATE: SEATTLE, WASHINGTON DISPOSITION DATE: AUGUST 15, 2020

FUNERAL FACILITY: CASCADE MEMORIAL BELLEVUE

ADDRESS: 13620 NE 20TH STREET

CITY, STATE, ZIP: BELLEVUE, WASHINGTON 98005

FUNERAL DIRECTOR: ROBIN DITTMAN

MANNER OF DEATH: NATURAL AUTOPSY: NO

WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE

CAUSE OF DEATH: NOT APPLICABLE

DID TOBACCO USE CONTRIBUTE TO DEATH: YES PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: KATE LAMPERTI, MD

TITLE: PHYSICIAN

CERTIFIER ADDRESS: 12040 NE 128TH STREET, MS 9

CITY, STATE, ZIP: KIRKLAND, WA 98034 DATE SIGNED: AUGUST 07, 2020

CASE REFERRED TO ME/CORONER: NO FILE NUMBER: NOT APPLICABLE

ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: DIANE BOGAN DATE RECEIVED: AUGUST 13, 2020

STATE OF NEVADA DECLARATION OF VALUE

1.	Assessor Parcel Number(s)					
a) <u>1022-10-002-004</u> b)			Γ	FOR RECORDERS O	PTIONAL USE ONLY	
	·——			Document/Instrument #:	T TIONAL DE ONET	
	d)	· · · · · · · · · · · · · · · · · · ·		Book:	Page:	
2.	Type of Property:			Date of Recording:		
	a) 🗆 Vacant Land	b) Single Fam. Res	s.	Notes:	= 1	
	c) ☐ Condo/Twnhse e) ☐ Apt. Bldg. g) ☐ Agricultural i) ☐ Other	d) □ 2-4 Plex f) □ Comm'l/Ind'l h) □ Mobile Home	_/			
3.	Total Value/Sales Pa	rice of Property:	/ /	\$ 90,134		
	Deed in Lieu of Foreclosure Only (value of property): \$					
	Transfer Tax Value:			\$ 90,134		
	Real Property Transfe	er Tax Due:	\$.	352.95		
4.	If Exemption Claimed:					
	a. Transfer Tax Exemption, per NRS 375.090, Section:					
	b. Explain Reason for Exemption:					
5.	Partial Interest: Perce	entage being transferred	l: <u>100</u> %			
provio the in due, i	ded is correct to the best of nformation provided herein. may result in a penalty of 10	their information and belie Furthermore, the disallowa % of the tax due plus intere	f, and can b ance of any c est at 1% per	e supported by documentatio laimed exemption, or other o	IRS 375.110, that the information if called upon to substantiate determination of additional tax nal amount owed.	
Signa	ature:	wein-	C	pacity: Grantee		
Signa	ature:		Ca	pacity:		
SELL	<u>ER (GRANTOR) INFOR</u>	MATION (Required)	<u>B</u>	JYER (GRANTEE) INFO	RMATION (Required)	
Print	Name: Richard James Gle	nn III	Pı	int Name: Richard James	Glenn III	
Address: 3020 110 th St. SE		A	Address: 3020 110 th St. SE			
City/	'State/Zip: <u>Everett, WA 9</u>	98208	Ci	ty/State/Zip: <u>Everett, W/</u>	A 98208	
CON	NPANY/PERSON REQUE	STING RECORDING	(REQUI	RED IF NOT THE SELLER OR BUY	ER)	
Print	Name: Law Office of	Karen L. Winters		Esc.#_		
Addr	ess: <u>P.O. Box 198</u>	7				
City:	Minden		State:	NV Zip	89423	