

APN# 1420-33-212-001

Recording Requested by/Mail to:

Name: FIRST AMERICAN TITLE

Address: 1663 HWY 395 STE 101

City/State/Zip: MINDEN NV 89423

Mail Tax Statements to:

Name: TERESA S. WHITE

Address: 4841 E. COPPER

City/State/Zip: TUCSON AZ 85712

AFFIDAVIT- DEATH OF TRUSTEE

Title of Document (required)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording
DOES contain personal information as required by law: (check applicable)

 Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

 Judgment – NRS 17.150(4)

 Military Discharge – NRS 419.020(2)



Signature

EMILY TOBIAS

Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

A.P.N.: 1420-33-212-001
File No: 143-2602079 (mk)

When Recorded return to, and mail Tax Statements to:
Teresa S. White
4841 E. Copper
Tucson, AZ 85712

AFFIDAVIT - TERMINATING JOINT TENANCY

Teresa S. White, of legal age, being first duly sworn, deposes and says:

That **Marlin Dean White Jr.**, the decedent mentioned in the attached certified copy of Certificate of Death is the same person as **Marlin Dean White Jr.** named as one of the parties in that certain **Grant Bargain and Sale Deed** dated **September 18, 2014** executed by **William A. Harris Executor for the Estate of Robert Thomas Pottenger Jr.** to **Marlin D. White and Teresa S. White husband and wife as joint tenants** as joint tenants, recorded as Document No. **2014-851463** on **10/22/2014** in Book **na** of Official Records of **Douglas** County, **Nevada** covering the following described property situated in the County of **Douglas**, State of **Nevada** :

LOT 118, IN BLOCK A, OF THE FINAL MAP OF WILDHORSE UNIT 4, A PLANNED UNIT DEVELOPMENT, ACCORDING TO THE MAP THEREOF, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON DECEMBER 31, 1990 IN BOOK 1290, PAGE 3944, AS DOCUMENT NO. 241974.

Teresa S. White 10-7-2020

Teresa S. White

Date

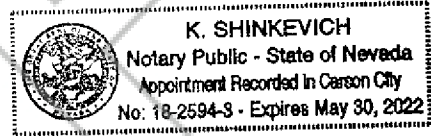
STATE OF **NEVADA**)
)
COUNTY OF **DOUGLAS**)
)
:ss.

This instrument was acknowledged before me on this:
7th day of October, 2020

By: **Teresa S. White**

By: K. Shinkevich / Its: _____

Notary Public
(My commission expires: 5/30/2022)



CERTIFICATE OF DEATH

STATE OF HAWAII
DEPARTMENT OF HEALTH



CERTIFICATE NO. 151 2017 - 009154

Name of Decedent

MARLIN DEAN WHITE, JR.

City, Town or Location of Death

KAMUELA

County of Death

HAWAII

Island of Death

HAWAII

Actual or Presumed Date of Death

October 23, 2017

Actual or Presumed Time of Death

12:51 PM

Date of Birth

February 24, 1948

Age at Death

69 YEAR(s)

Sex

MALE

Race

Caucasian

Citizenship

UNITED STATES

Ever in Armed Forces?

YES

Social Security Number

██████████-3472

Marital Status

MARRIED

Surviving Spouse (If Wife, Name Prior to First Marriage)

Teresa Riley

Father's Name

Marlin Dean White Sr.

Mother's Name (Prior to First Marriage)

Lucy Ellen Slowey

Disposition

CREMATION

Date: October 27, 2017

Permit #: 169733

Cemetery/Crematory: CREMATION SERVICES OF WEST HAWAII

Location: KAILUA-KONA, HAWAII 96740

Funeral Home: DODO MORTUARY

Certifier: Deen Wong MEDICAL EXAMINER/CORONER

Date Certified: October 25, 2017

Original Date Certified: October 25, 2017

Date Pronounced Dead: October 23, 2017

Time Pronounced Dead: 12:51 PM

Cause of Death:

- a. Cardiac Arrest
- b. Cardiomegaly, 530 grams

Manner of Death: NATURAL CAUSES

Date Filed by State Registrar: October 26, 2017

OHSM 1.2 (Rev. 1/2013)

This copy serves as prima facie evidence of the fact of death in any court proceeding. [HRS 338-13(b), 338-19]

1237937

ANY ALTERATIONS INVALIDATE THIS CERTIFICATE

COPY

NOV 21 2017

I CERTIFY THIS IS A TRUE COPY OR
ABSTRACT OF THE RECORD ON FILE IN
THE HAWAII STATE DEPARTMENT OF HEALTH

Alvin T. Onaka, Ph.D.
STATE REGISTRAR