

DOUGLAS COUNTY, NV

2022-981834

Rec:\$40.00

\$40.00 Pgs=5

02/28/2022 11:20 AM

STEWART TITLE COMPANY - NV

KAREN ELLISON, RECORDER

APN#: 1318-24-701-004

Recording Requested By:

Stewart Title Company

When Recorded Mail To:

Linda Andree Frederick

P.O. Box 851

Zephyr Cove, NV

89448

Mail Tax Statements to: (deeds only)

Same as above

(space above for Recorder's use only)

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the social security number of a person or persons. (Per NRS 440.380 (1)(5) & 40.525 (5))

Signature

Amy Kromberg

Escrow Officer

Affidavit Death of Life Tenant

This page added to provide additional information required by NRS 111.312

(additional recording fee applies)

AFFIDAVIT - DEATH OF LIFE TENANT

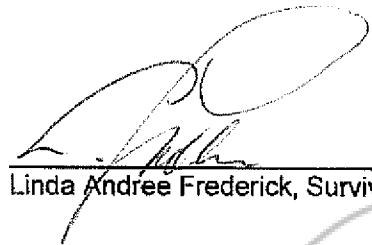
Linda Andree Frederick, of legal age, being first duly sworn, deposes and says:

That Ernest Robert Frederick, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Ernest Robert Frederick named as one of the parties in that certain Grant, Bargain, Sale Deed with Life Estate Reservation dated 12/28/2018 executed by Ernest Robert Frederick and Linda Andree Frederick to Linda Andree Frederick an unmarried woman, recorded as instrument No. 2019-928225, on 4/24/2019, of Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF.

Dated

02/22/2022


Linda Andree Frederick, Surviving Tenant

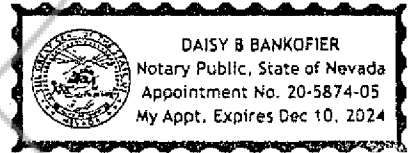
STATE OF NEVADA)SS

COUNTY OF Douglas

This instrument was acknowledged before me on

02/22/2022

By Linda Andree Frederick.





Notary Public
Nevada Springs, Arizona
12/10/2024

EXHIBIT "A" LEGAL DESCRIPTION

File No.: 1531637

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

Parcel No. 3 lying within the Southeast 1/4 of Section 24, Township 13 North, Range 18 East, M.D.B.&M., as set forth on Parcel Map filed for record October 15, 1974 in Book 1074, Page 260, Document No. 75900, Official Records of Douglas County, State of Nevada, described as follows:

Commencing at the East 1/4 corner of said Section 24, proceed South 63°43'27" West 1464.02 feet to the Southeast corner of the Northeast 1/4 of the Northwest 1/4 of the Southeast 1/4 of the section which is also the Northwest corner of the Ansaldo Acres Subdivision; thence North 00°04'17" West, 249.49 feet to a point; thence Southerly along the Westerly boundary of Logging Road, around a curve to the right, with a beginning tangent of South 5°14'25" West, a radius of 500 feet, a central angle of 0°32'58", and a length of 4.79 feet to the true point of beginning; thence along the Westerly boundary of Logging Road Southerly around a curve to the right, with a beginning tangent of South 5°47'23" West, radius of 500 feet, a central angle of 14°30'24", and a length of 126.59 feet to a point of reverse curvature; thence along the Westerly boundary of Logging Road, Southerly around a curve to the left, having a radius of 426.52 feet, a central angle of 6°05'35" and a length of 45.36 feet, to the Southeast corner of the parcel; thence leaving Logging Road, South 78°37'03" West, 414.07 feet to the Southwest corner of the parcel; thence North 200.00 feet to the Northwest corner of the parcel; thence North 83°52'50" East, 450.43 feet to the true point of beginning.

Together with a non-exclusive easement for access and utilities over the Easterly 50 feet of Parcel 2 lying East of a line joining a point 50 feet West of the Southeast corner and a point lying 25 feet West of the Northeast corner of Parcel 2 as set forth on said map.

NOTE: The above metes and bounds description appeared previously in that certain Deed recorded in the office of the County Recorder of Douglas County, Nevada on April 24, 2019, as Document No. 2019-928225 of Official Records.

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
VITAL STATISTICS

CASE FILE NO. 4236732

CERTIFICATE OF DEATH

2021022612
STATE FILE NUMBER

TYPE OR
PRINT IN
PERMANENT
BLACK INK

DECEDENT

IF DEATH
OCCURRED IN
INSTITUTION SEE
HANDBOOK
REGARDING
COMPLETION OF
RESIDENCE
ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF
DEATH

CONDITIONS IF
ANY WHICH
GAVE RISE TO
IMMEDIATE
CAUSE
STATING THE
UNDERLYING
CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE, LAST, SUFFIX) Ernest Robert FREDERICK		2. DATE OF DEATH (Mo/Day/Year) September 14, 2021		3a. COUNTY OF DEATH Carson City	
3b. CITY, TOWN, OR LOCATION OF DEATH Carson City		3c. HOSPITAL OR OTHER INSTITUTION -Name (If not either, give street address number) 2155 Homann Way		3e. If Hosp. or Inst. Indicate DOA, OPI/Emer. Rm. Inpatient (Specify) Other Residence	
5. RACE (Specify) White		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday (Years) 81	
7b. UNDER 1 YEAR MOS DAYS		7c. UNDER 1 DAY HOURS MINS		8. DATE OF BIRTH (Mo/Day/Yr) February 19, 1940	
9a. STATE OF BIRTH (if not US/CA, name country) California		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 14	
11. MARITAL STATUS (Specify) Divorced		12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage)			
13. SOCIAL SECURITY NUMBER 5651		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of)		14b. KIND OF BUSINESS OR INDUSTRY REAL ESTATE	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Stateline	
15d. STREET AND NUMBER 230 Logging Road Lane		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes			
16. FATHER/PARENT - NAME (First Middle Last Suffix) Ernest Newton FREDERICK			17. MOTHER/PARENT - NAME (First Middle Last Suffix) Marie Pascaline CARRICABURU		
18a. INFORMANT - NAME (Type or Print) Linda Andree FREDERICK			18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) PO BOX 851 Zephyr Cove, Nevada 89448		
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Autumn Cremation Services		19c. LOCATION City or Town State Carson City Nevada 89701	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JOHN LAWRENCE		20b. FUNERAL DIRECTOR LICENSE NUMBER FD304		20c. NAME AND ADDRESS OF FACILITY Autumn Funerals & Cremations 1575 N Lompa Ln Carson City NV 89701	
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) DOUGLAS VACEK DO			22a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) September 17, 2021		21c. HOUR OF DEATH 10:45		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22d. PRONOUNCED DEAD (Mo/Day/Yr)		22e. PRONOUNCED DEAD AT (Hour)	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Douglas Vacek DO 850 6th Street Lovelock, NV 89419					23b. LICENSE NUMBER 1125
24a. REGISTRAR (Signature) BLAISE SATARIANO		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) September 17, 2021		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
PART I (a) Cardiac Arrest				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(b) Electrolyte Imbalance				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(c) End-stage Parkinson's Disease				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(d) Etiology Unknown				Interval between onset and death	
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1.					26. AUTOPSY (Specify Yes or No) No
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No					
28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY	
28d. DESCRIBE HOW INJURY OCCURRED					
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	

000892345



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.

DATE ISSUED: **9/21/2021**

Blaise Satariano
STATE REGISTRAR

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

