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KAREN ELLISON, RECORDER

Natalia K. Vander Laan, Esq.

**A.P.N.: 1320-33-813-021**

**Recording Requested By:** )  
Glen Courtney )  
1328 Windsor Drive )  
Gardnerville, NV 89410 )

**When Recorded Mail to:** )  
Glen Courtney )  
1328 Windsor Drive )  
Gardnerville, NV 89410 )

**Mail Tax Statements to:** )  
Glen Courtney )  
1328 Windsor Drive )  
Gardnerville, NV 89410 )

### **AFFIDAVIT – DEATH OF CO-TENANT**

I, GLEN RICHARD COURTNEY, of legal age, being first duly sworn, declare under penalty of perjury that:

PHONG COURTNEY, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as PHONG COURTNEY named as one of the parties (grantees) in that certain deed dated June 24, 2019, and executed by Amy Darling, an unmarried woman who acquired title as Amy L. Wilcott, a married woman as her sole and separate property (grantor), to Glen R. Courtney and Phong Courtney, husband and wife as joint tenants with right of survivorship, recorded on June 28, 2019, as Document No. 2019-931090 of the Official Records of Douglas County, Nevada, covering the following described property situated in Douglas County, Nevada:

Lot 28, in Block D, of FINAL SUBDIVISION MAP #1006-5 for CHICHESTER ESTATES, PHASE 5, according to the map thereof, filed in the office of the County Recorder of Douglas County, State of Nevada, on April 9, 1999, in Book 499, Page 1900, as Document No. 465394.

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Subject to:

1. All general and special taxes for the current fiscal year.
2. Covenants, conditions, Restrictions, Reservations, Rights, Rights of Way and Easements now of record.

Together with all tenements, hereditaments and appurtenances, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

PHONG COURTNEY, the deceased party, died on December 17, 2021, as shown in the attached certified copy of Certificate of Death.

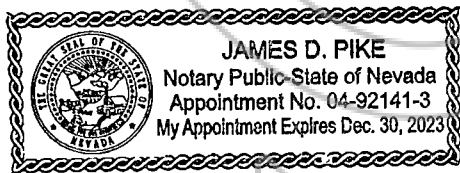
The Affiant is the Husband of the deceased party and now the sole owner of the subject property, holding title as a single man as his sole and separate property.

Executed on this March 1, 2022, in Douglas County, State of Nevada.

*Glen Courtney*  
 GLEN RICHARD COURTNEY

STATE OF NEVADA            )  
   ): ss  
 COUNTY OF Douglas        )

Signed and sworn to (or affirmed) before me on this March 1, 2022, by GLEN RICHARD COURTNEY.



*James D. Pike*  
 NOTARY PUBLIC

This Affidavit was prepared without the benefit of title search and the description of the property was furnished by the Affiant. The preparer of this affidavit assumes no liability whatsoever either for the accuracy of the legal description or the status of the title to the property.

**STATE OF NEVADA**  
**CERTIFICATION OF VITAL RECORD**

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

CASE FILE NO. 4255410

**CERTIFICATE OF DEATH**

2021032564  
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

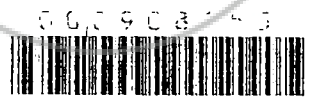
CERTIFIER

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) <b>Phong COURTNEY</b>		2. DATE OF DEATH (Mo/Day/Year) <b>December 17, 2021</b>		3a. COUNTY OF DEATH <b>Carson City</b>	
3b. CITY, TOWN, OR LOCATION OF DEATH <b>Carson City</b>		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street number) <b>Carson Tahoe Regional Medical Center</b>		3e.If Hosp. or Inst. indicate DOA OP/Emer. Rm. Inpatient(Specify) <b>Inpatient</b>	
4. SEX <b>Female</b>		5 RACE (Specify) <b>Thai</b>		6. Hispanic Origin? Specify <b>No - Non-Hispanic</b>	
7a. AGE-Last birthday (Years) <b>69</b>		7b. UNDER 1 YEAR <b>MOS</b>		7c. UNDER 1 DAY <b>DAYS</b>	
7d. UNDER 1 YEAR <b>HOURS</b>		7e. UNDER 1 DAY <b>MIN</b>		8. DATE OF BIRTH (Mo/Day/Yr) <b>January 01, 1952</b>	
9a. STATE OF BIRTH (If not US/CA, name country) <b>Thailand</b>		9b. CITIZEN OF WHAT COUNTRY <b>United States</b>		10. EDUCATION <b>7</b>	
11. MARITAL STATUS (Specify) <b>Married</b>		12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage) <b>Glen R COURTNEY</b>			
13. SOCIAL SECURITY NUMBER <b>██████████-1883</b>		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of) <b>HOMEMAKER</b>		14b. KIND OF BUSINESS OR INDUSTRY <b>HOME</b>	
15a. RESIDENCE - STATE <b>Nevada</b>		15b. COUNTY <b>Douglas</b>		15c. CITY, TOWN OR LOCATION <b>Gardnerville</b>	
15d. STREET AND NUMBER <b>1328 Windsor Drive</b>		15e. INSIDE CITY LIMITS (Specify Yes or No) <b>Yes</b>			
16. FATHER/PARENT - NAME (First Middle Last Suffix) <b>Gong KARNTHONG</b>			17. MOTHER/PARENT - NAME (First Middle Last Suffix) <b>Pun BAHNPOOT</b>		
18a. INFORMANT - NAME (Type or Print) <b>Glen R COURTNEY</b>		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) <b>1328 Windsor Drive Gardnerville, Nevada 89410</b>			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) <b>Cremation</b>		19b. CEMETERY OR CREMATORY - NAME <b>FitzHenry's Crematory</b>		19c. LOCATION City or Town State <b>Carson City Nevada 89701</b>	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) <b>NORMA M FINKES</b>		20b. FUNERAL DIRECTOR LICENSE NUMBER <b>FD967</b>		20c. NAME AND ADDRESS OF FACILITY <b>FitzHenry's Carson Valley Funeral Home 1637 Esmerelda Place Minden NV 89423</b>	
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) <b>SQUIRE D HEPWORTH MD</b>			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) <b>December 29, 2021</b>		21c. HOUR OF DEATH <b>09:50</b>		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c. HOUR OF DEATH		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) <b>Squire D Hepworth MD 1600 Medical Pkwy Carson City, NV 89703</b>			
23b. LICENSE NUMBER <b>18140</b>		24a. REGISTRAR (Signature) <b>DARAN GRISSOM</b>			
24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) <b>December 29, 2021</b>		24c. DEATH DUE TO COMMUNICABLE DISEASE <b>YES</b> <input type="checkbox"/> <b>NO</b> <input checked="" type="checkbox"/>			
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
PART I					
(a) <b>Cardiopulmonary Arrest</b>				Interval between onset and death	
(b) <b>Sepsis</b>				Interval between onset and death	
(c) <b>Bacteremia</b>				Interval between onset and death	
(d) <b>Urinary Tract Infection</b>				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) <b>No</b>				27. WAS CASE REFERRED TO CORONER (Specify Yes or No) <b>No</b>	
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	



CERTIFIED COPY OF VITAL RECORDS

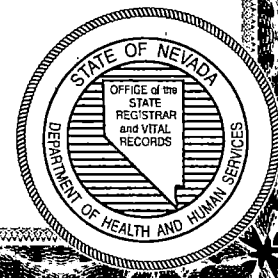
This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

*[Signature]*

DATE ISSUED: 1/5/2022

STATE REGISTRAR

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE