

APN: 1420-34-811-027

RECORDING REQUESTED BY:

Donna Bidart
1240 Jones Ranch Road
Gardnerville, Nevada 89460

MAIL TAX STATEMENTS TO:

Donna Bidart
1240 Jones Ranch Road
Gardnerville, Nevada 89460

*Pursuant to NRS 239B.030(4), I affirm that
the instrument contained below does contain
the social security number of any person.*



00151786202209825660030031

KAREN ELLISON, RECORDER

AFFIDAVIT OF SURVIVING JOINT TENANT

DONNA BIDART, being first duly sworn on oath, deposes and states under the pains and penalties of perjury as follows:

1. Your affiant, Donna J. Bidart and Marc Bidart were grantees in joint tenancy with right of survivorship pursuant to that certain grant, bargain and sale deed dated 2 September 1987, and recorded 14 September 1987, in the official records of Douglas County, Nevada, as Document No. 162110.

The grantees in the grant, bargain and sale deed are one and the same as your affiant and Marc Bidart.

2. The joint tenancy property, with right of survivorship, is located at 1584 Johnson Lane Road, Gardnerville, Nevada. The property may be more specifically identified as:

Lot 7, as shown on the map of EL RANCHO ESTATES, filed for record in the office of the County Recorder of Douglas County, Nevada, on April 23, 1962, in Book 11, page 348, as Document No. 19910.

3. Marc Bidart, affiant's joint tenant, died on 25 July 2020, in Washoe County, Nevada, and is the identical person named as the Deceased in that certain certified copy of the certificate of

death attached hereto as Exhibit "A". The certified copy of the certificate of death is incorporated herein by this reference as if set forth in full.

4. That title to all of the property identified herein is now vested in your affiant, Donna Bidart as of the date of Decedent's death.

TOGETHER will all tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

Witness my hand this 15th day of March, 2022.

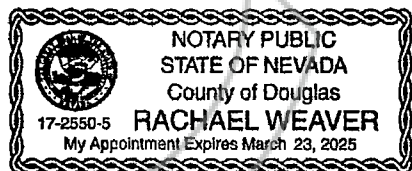

DONNA BIDART

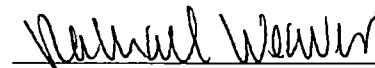
ACKNOWLEDGEMENT

STATE OF NEVADA)
) ss.
COUNTY OF DOUGLAS)

On March 15th, 2022, before me, the undersigned, a Notary Public in and for said County and State, personally appeared DONNA BIDART known to me to be the person whose name is subscribed to the within instrument and acknowledged that she executed the same.

WITNESS my hand and official seal.




NOTARY PUBLIC

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

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

CASE FILE NO. 4158094

CERTIFICATE OF DEATH

2020015682
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) Marc BIDART		2 DATE OF DEATH (Mo/Day/Year) July 25, 2020		3a COUNTY OF DEATH Washoe		
3b. CITY, TOWN, OR LOCATION OF DEATH Reno		3c HOSPITAL OR OTHER INSTITUTION -Name(If not either, give street ar Renown Regional Medical Center		3e If Hosp or Inst indicate DOA,OP/Emer Rm Inpatient(Specify) Inpatient		
5 RACE (Specify) White		6 Hispanic Origin? Specify No - Non-Hispanic		7a AGE-Last birthday (Years) 81		
9a. STATE OF BIRTH (If not US/CA, name country) France		9b CITIZEN OF WHAT COUNTRY United States		10 EDUCATION 14		
13 SOCIAL SECURITY NUMBER ██████-2820		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Maintenance		14b KIND OF BUSINESS OR INDUSTRY LANDSCAPING		
15a RESIDENCE - STATE Nevada		15b COUNTY Douglas		15c CITY, TOWN OR LOCATION Gardnerville		
15d STREET AND NUMBER 1240 Jones Ranch Rd		15e INSIDE CITY LIMITS (Specify Yes or No) Yes		8 DATE OF BIRTH (Mo/Day/Yr) January 03, 1939		
9a. STATE OF BIRTH (If not US/CA, name country) France			9b CITIZEN OF WHAT COUNTRY United States		10 EDUCATION 14	
11 MARITAL STATUS (Specify) Married		12 SURVIVING SPOUSE'S NAME (Last name prior to first marriage) Donna Jeanne LARUE				
13 SOCIAL SECURITY NUMBER ██████-2820		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Maintenance		14b KIND OF BUSINESS OR INDUSTRY LANDSCAPING		
15a RESIDENCE - STATE Nevada		15b COUNTY Douglas		15c CITY, TOWN OR LOCATION Gardnerville		
15d STREET AND NUMBER 1240 Jones Ranch Rd		15e INSIDE CITY LIMITS (Specify Yes or No) Yes		8 DATE OF BIRTH (Mo/Day/Yr) January 03, 1939		
16. FATHER/PARENT - NAME (First Middle Last Suffix) Gratien BIDART			17 MOTHER/PARENT - NAME (First Middle Last Suffix) Gracianne DENDARIE			
18a INFORMANT - NAME (Type or Print) Donna Jeanne BIDART			18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 240 Jones Ranch Rd Gardnerville, Nevada 89460			
19a BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b CEMETERY OR CREMATORY - NAME Walton's Sierra Crematory		19c LOCATION City or Town State Carson City Nevada 89706		
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) DENICE PORTILLO SIGNATURE AUTHENTICATED		20b FUNERAL DIRECTOR LICENSE NUMBER FD872		20c NAME AND ADDRESS OF FACILITY Walton's Funerals and Cremations 1521 Church Street Gardnerville NV 89410		
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)			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) LAURA D KNIGHT MD SIGNATURE AUTHENTICATED			
21b DATE SIGNED (Mo/Day/Yr)		21c HOUR OF DEATH		22b. DATE SIGNED (Mo/Day/Yr) July 28, 2020		
21d NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c HOUR OF DEATH 13:30		22d PRONOUNCED DEAD (Mo/Day/Yr) July 25, 2020		
22e PRONOUNCED DEAD AT (Hour) 13:30		23a NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Laura D Knight MD 990 E Ninth St Reno, NV 89512				
23b. LICENSE NUMBER 15930		24a REGISTRAR (Signature) KATHERINE J SULLIVAN SIGNATURE AUTHENTICATED				
24b DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) July 29, 2020		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) Complications Of Lumbar Vertebral Fracture And Spinal Epidural Hematoma Interval between onset and death						
(b) Blunt Force Injury Of The Spine Interval between onset and death						
(c) Ground Level Fall(s) Interval between onset and death						
(d) Interval between onset and death						
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part I Chronic Kidney Disease, Atrial Fibrillation, Alzheimer's Disease				26 AUTOPSY (Specify Yes or No) No		
27 WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes		28a ACC. SUICIDE, HOM., UNDET OR PENDING INVEST. (Specify) ACCIDENT				
28b. DATE OF INJURY (Mo/Day/Yr) June 01, 2020		28c HOUR OF INJURY 1200		28d DESCRIBE HOW INJURY OCCURRED Ground Level Fall(s)		
28e INJURY AT WORK (Specify Yes or No) No		28f. PLACE OF INJURY- At home, farm, street, factory, office building, etc. (Specify) Residence		28g LOCATION STREET OR R.F.D No CITY OR TOWN STATE 1240 Jones Ranch Road Gardnerville Nevada		

STATE REGISTRAR

000829934



CERTIFIED COPY OF VITAL RECORDS

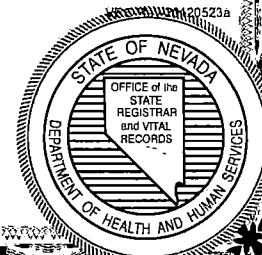
This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED:

SEP 08 2020

Laura D Knight
STATE REGISTRAR
Interim Administrator

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE