

DOUGLAS COUNTY, NV **2023-994108**
Rec:\$40.00
\$40.00 Pgs=5 02/23/2023 08:43 AM
STEWART TITLE COMPANY - NV
SHAWNYNE GARREN, RECORDER

| | |
|--------------------------------|-----------------|
| A.P.N. No.: | 1420-18-214-053 |
| File No.: | 1933351 AMG |
| Recording Requested By: | |
| Stewart Title Company | |
| When Recorded Mail To: | |
| Terry L Weaver | |
| 3338 Vista Grande Blvd. | |
| Carson City NV 89705 | |

(for recorders use only)

Affidavit – Death of Joint Tenant (Title of Document)

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

-OR-

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 as required by law:
NRS 440.380
(State specific law)



Signature

A Claypool
Print Signature

Escrow Assistant

Title

**This document is being
recorded as an
accommodation only.**

This page added to provide additional information required by NRS 111.312 Sections 1 - 2 and NRS 239B.030 Section 4.

This cover page must be typed or printed in black ink.

(Additional recording fee applies)

| | |
|--------------------------------|----------------------|
| A.P.N. No.: | 1420-18-214-053 |
| File No.: | 1933351 AMG |
| Recording Requested By: | |
| Stewart Title Company | |
| Mail Tax Statements To: | <i>Same as below</i> |
| When Recorded Mail To: | |
| Terry L Weaver | |
| 3338 Vista Grande Blvd | |
| Carson City NV 89705 | |

AFFIDAVIT - DEATH OF JOINT TENANT

State of Nevada)
) ss
 County of Douglas)

Terry L. Weaver, of legal age, being first duly sworn, deposes and says: That Ned A. Weaver, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Ned A. Weaver named as one of the parties in that certain [Enter Prior Document Name] dated October 4, 2001 executed by Terri Wade, an unmarried woman to Ned A. Weaver and Terry L. Weaver, husband and wife, as joint tenants as joint tenants, recorded as Document No0526897 on November 2, 2001 of Official Book 1101 Page 0616 Records of Douglas County Nevada, covering the following described property situated in Douglas County, State of Nevada.

See Exhibit "A" attached hereto and made a part hereof.

Dated: Feb. 17, 2023.

EXHIBIT "A"
LEGAL DESCRIPTION

The land referred to herein is situated in the State of Nevada,
County of Douglas, described as follows:

Lot 32, Block B, as shown on the map of SILVERADO HEIGHTS
SUBDIVISION, filed for record in the office of the County
Recorder of Douglas County, Nevada, on September 18, 1978, as
Document No. 25326, and Certificate of Amendment of the final
plat of said subdivision recorded August 23, 1979, in Book 879
of Official Records at Page 1725, Douglas County, Nevada, as
Document No. 35885, and Certificate of Amendment of the final
plat of said subdivision recorded October 13, 1979, in Book 1079
of Official Records, at Page 1039, Douglas County, Nevada, as
Document No. 37638.

Assessors Parcel No. 1420-18-214-053.

STATE OF NEVADA

CERTIFICATION OF VITAL RECORD

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

CASE FILE NO. 4319872

CERTIFICATE OF DEATH

2022028797
STATE FILE NUMBER

| | | | | | |
|--|--|---|--|--|--|
| 1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) Ned Alfred WEAVER | | 2. DATE OF DEATH (Mo/Day/Year) November 27, 2022 | | 3a. COUNTY OF DEATH Douglas | |
| 3b. CITY, TOWN, OR LOCATION OF DEATH Carson City | | 3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street number) 3338 Vista Grande Blvd | | 4. SEX Male | |
| 5. RACE (Specify) White | | 6. Hispanic Origin? Specify No - Non-Hispanic | | 7a. AGE-Last birthday (Years) 65 | |
| 7b. UNDER 1 YEAR MOS / DAYS | | 7c. UNDER 1 DAY HOURS / MINS | | 8. DATE OF BIRTH (Mo/Day/Yr) March 22, 1957 | |
| 9a. STATE OF BIRTH (If not US/CA, name country) Nevada | | 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) Terry Lee MORITZKY | | | |
| 13. SOCIAL SECURITY NUMBER ██████-2508 | | 14a. USUAL OCCUPATION (Give Kind of Work Done During Most of) SUPERINTENDENT | | 14b. KIND OF BUSINESS OR INDUSTRY CONSTRUCTION | |
| 15a. RESIDENCE - STATE Nevada | | 15b. COUNTY Douglas | | 15c. CITY, TOWN OR LOCATION Carson City | |
| 15d. STREET AND NUMBER 3338 Vista Grande Blvd | | 15e. INSIDE CITY LIMITS (Specify Yes or No) Yes | | | |
| 16. FATHER/PARENT - NAME (First Middle Last Suffix) Rollie A WEAVER | | | 17. MOTHER/PARENT - NAME (First Middle Last Suffix) LNora FOWLER | | |
| 18a. INFORMANT- NAME (Type or Print) Terry Lee WEAVER | | 18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 3338 Vista Grande Blvd Carson City, Nevada 89705 | | | |
| 19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation | | 19b. CEMETERY OR CREMATORY - NAME Fitzhenry's Crematory | | 19c. LOCATION City or Town State Carson City Nevada 89701 | |
| 20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) NORMA M FINKES SIGNATURE AUTHENTICATED | | 20b. FUNERAL DIRECTOR LICENSE NUMBER FD967 | | 20c. NAME AND ADDRESS OF FACILITY Fitzhenrys Funeral Home 3945 Fairview Dr 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) KEENAN K COPP SIGNATURE AUTHENTICATED | | | 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) December 09, 2022 | | 21c. HOUR OF DEATH 20:48 | | 22b. DATE SIGNED (Mo/Day/Yr) December 09, 2022 | |
| 22c. HOUR OF DEATH 20:48 | | 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) Coroner Keenan K Copp, 1038 Buckeye Rd Minden, NV 89423 | | | | 23b. LICENSE NUMBER | |
| 24a. REGISTRAR (Signature) SCOTT SHELDON SPANGLER SIGNATURE AUTHENTICATED | | 24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) December 09, 2022 | | 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 Chronic Alcoholism | | | | | |
| DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death | | | | | |
| (b) DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death | | | | | |
| (c) DUE TO, OR AS A CONSEQUENCE OF: Interval between onset and death | | | | | |
| (d) DUE TO, OR AS A CONSEQUENCE OF: 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. Hypertension And Hypertipidemia. | | | | 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) | | 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.

DATE ISSUED: **12/12/2022**

Scott Spangler
STATE REGISTRAR

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

