

File No. 34616

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF CALIFORNIA,)
County of Orange,)ss.

Marian H. Herlihy, of legal age, being first duly sworn, deposes and says: That Martha Eugenia Henley, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Eugenia P. Henley named as one of the parties in that certain Deed dated May 22, 1959 executed by Mae Nichols to Eugenia P. Henley, a widow and Marian H. Herlihy, an unmarried woman, as joint tenants, recorded as instrument No. 34185, on May 25, 1959 in Liber 25 of Deeds, Page 298 of Official Records of Eureka County, Nevada covering the following described property situated in the County of Eureka, State of Nevada, as follows:

The West one-half of Section 35, Township 30 North, Range 49 East, Mount Diablo Base and Meridian.

EXCEPTING 90 per cent of all coal, oil, gas and other minerals including the right of entry as reserved in that certain deed from Strathearn Cattle Company, a corporation, et al, to Mae Nichols, dated April 30, 1959.

SUBJECT TO: 1. Taxes for fiscal year 1958-1959.

2. Restrictions, conditions, reservations, rights, rights of way and easements now of record (if any) affecting the use and occupancy of said property as the same now appear of record, particularly in Book 25, page 240, Deed records of Eureka County.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

That the value of all real and personal property owned by said decedent at date of death, including the full value of the property above described, did not then exceed the sum of \$31,000.00.

Dated: December 3, 1959

Marian H. Herlihy

SUBSCRIBED AND SWORN TO before me

this 3d day of December, 1959.

(Notarial Seal)

Beas Krueger

Notary Public in and for said County and State.
My Comm.

THIS IS TO CERTIFY THAT THIS IS A TRUE COPY OF THE DOCUMENT FILED IN THIS OFFICE.

JIMMY M. KADA,
Deputy Registrar of Vital Statistics
By *[Signature]*
Date SEP 28 1959

fee \$1.00

EDW. LEE RUSSELL, M.D.,
Health Officer and Local Registrar
of Vital Statistics of Orange County

STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH									
CERTIFICATE OF DEATH									
LOCAL REGISTRATION DISTRICT AND 3000 D 59 2584									
1. NAME OF DECEASED—FIRST NAME			2. MIDDLE NAME		3. LAST NAME		4. DATE OF DEATH—MONTH DAY YEAR		5. HOUR
Martha			Eugenia		HENLEY		Sept. 11, 1959		1:00 P.
6. SEX	7. COLOR OR RACE	8. BIRTHPLACE (STATE OR FOREIGN COUNTRY)	9. DATE OF BIRTH		10. AGE (LAST BIRTHDAY)		11. YEARS		12. MONTHS
Female	Cauc.	Kansas	Jan. 24, 1879		80		YEARS		
13. NAME AND BIRTHPLACE OF FATHER			14. MAIDEN NAME AND BIRTHPLACE OF MOTHER			15. CITIZEN OF WHAT COUNTRY		16. SOCIAL SECURITY NUMBER	
(unkn) Platt, Ky.			Susan Grant, Ky.			USA			
17. LAST OCCUPATION		18. NUMBER OF YEARS IN THIS OCCUPATION		19. NAME OF LAST EMPLOYING COMPANY OR FIRM		20. KIND OF INDUSTRY OR BUSINESS			
Homemaker		60		Self		Home			
21. IF DECEASED WAS EVER IN U.S. ARMED FORCES, GIVE WAR OR DATES OF SERVICE			22. SPECIFY: MARRIED NEVER MARRIED WIDOWED DIVORCED			23. NAME OF PRESENT SPOUSE		24. PRESENT OR LAST OCCUPATION OF SPOUSE	
No			Widowed			deceased		*****	
25. PLACE OF DEATH—NAME OF HOSPITAL					26. STREET ADDRESS—(GIVE STREET OR RURAL ADDRESS OR LOCATION. DO NOT USE P. O. BOX NUMBERS)				
South Coast Community Hospital					31872 So. Coast Highway				
27. CITY OR TOWN					28. COUNTY		29. LENGTH OF STAY IN COUNTY OF DEATH		30. LENGTH OF STAY IN CALIFORNIA
South Laguna					Orange		20 YEARS		21 YEARS
31. LAST USUAL RESIDENCE—STREET ADDRESS (GIVE STREET OR RURAL ADDRESS OR LOCATION. DO NOT USE P. O. BOX NUMBERS)					32. IF INSIDE CITY CORPORATE LIMITS CHECK ONE		33. NAME OF INFORMANT (IF OTHER THAN SPOUSE)		
139 Sunset Terrace					<input checked="" type="checkbox"/> CHECK HERE <input type="checkbox"/> OUT OF A FARM <input type="checkbox"/> NOT ON A FARM		Mrs. Marian Herlihy		
34. CITY OR TOWN					35. COUNTY		36. STATE		37. ADDRESS OF INFORMANT (IF DIFFERENT FROM LAST USUAL RESIDENCE)
Laguna Beach					Orange		Calif.		204 West California St.
38. PHYSICIAN: I HEREBY CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED ABOVE, FROM THE CAUSES STATED BELOW AND THAT I ATTENDED THE DECEASED FROM					39. ADDRESS OF CORONER (IF DIFFERENT FROM LAST USUAL RESIDENCE)				
AND THAT I HAVE SIGNED THE DECEASED ABOVE ON					Raymond A. Brandt, Coroner				
40. CORONER: I HEREBY CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED ABOVE, FROM THE CAUSES STATED BELOW AND THAT I HAVE HELD					41. ADDRESS OF CORONER (IF DIFFERENT FROM LAST USUAL RESIDENCE)				
Autopsy					Court House Annex Santa Ana, Calif.				
42. SPECIFY INITIAL ENTOMBMENT OR CREMATION					43. DATE		44. NAME OF CEMETERY OR CREMATORY		
Cremation					9/14/59		Melrose Abbey Crematory		
45. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)					46. DATE RECEIVED FOR BURIAL		47. LOCAL REGISTRAR SIGNATURE		
Laguna Beach Funeral Home					SEP 17 1959		<i>[Signature]</i>		
48. DEATH WAS CAUSED BY:					49. ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), AND (C)				
IMMEDIATE CAUSE (A):					Massive gastro intestinal hemorrhage				
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE ABOVE CAUSE (A):					Chronic duodenal ulcer				
DUE TO (B):					Rheumatoid arthritis.				
DUE TO (C):					Calcific aortic stenosis; left ventricular hypertrophy; coronary sclerosis.				
50. OPERATION—CHECK ONE:					51. DATE OF OPERATION		52. AUTOPSY—CHECK ONE:		
<input checked="" type="checkbox"/> OPERATION PERFORMED—FURNISHED USED IN DETERMINING ABOVE STATED CAUSES OF DEATH							<input checked="" type="checkbox"/> AUTOPSY PERFORMED—FURNISHED USED IN DETERMINING ABOVE STATED CAUSES OF DEATH		
53. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE					54. DESCRIBE HOW INJURY OCCURRED (GIVE DETAILS OF INJURY WHICH RESULTED IN DEATH. NATURE OF INJURY SHOULD BE SET FORTH IN PART I OR PART II OF THIS FORM)				
55. TIME OF INJURY					56. CITY, TOWN, OR LOCATION				
57. INJURY OCCURRED					58. PLACE OF INJURY (GIVE STREET, OFFICE BUILDING, FACTORY STREET, OFFICE BUILDING)				
<input type="checkbox"/> WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK									

Recorded at the request of Marshall Beach December 14, A.D., 1959 At 02 minutes past 8 A. M.

Willis A. DePaoli - Recorder.