

Recorded at the request of

LAW OFFICES OF C. RAY ROBINSON

Return to

Law Offices of C. Ray Robinson

P. O. Box, 2248

Merced, California 95340

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF ~~CALIFORNIA~~ ~~NEVADA~~ NEVADA

County of Eureka } ss.

Bernice Becker of legal age, being first duly sworn, deposes and says:
That Carl George Becker the decedent mentioned in the attached certified copy of
Certificate of Death, is the same person as Carl G. Becker
named as one of the parties in that certain Joint tenancy deed dated 13th day of July, 1964
executed by Crescent Valley Ranch & Farms, a Nevada Corporation
to Carl G. Becker and Bernice Becker, husband and wife
as joint tenants, recorded as Instrument No. 39997 on July 31, 1964, in
book 4 page 563 of Official Records of Eureka
Nevada covering the following described property situated in the
County, California covering the following described property situated in the
County of Eureka, State of ~~California~~ Nevada

Lot 15 of Block 3 of CRESCENT VALLEY RANCH & FARMS UNIT NO. 1
as per map recorded in said County as File No. 34081

- SUBJECT TO: (1) Taxes due not heretofore paid.
(2) Covenants, conditions, restrictions, reservations,
easements, rights and/or rights of way of record.

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 \$ 650.00

Dated Sept 4, 1969

Mrs. Bernice Becker



SUBSCRIBED AND SWORN TO before me this 4 day of September

CHARLES GERALD SCHUMACHER - Notary Public - Cal
144 Reamer Street, Auburn, Calif. 95603
COM. EXP. MAR. 16, 1971 - PLACER COUNTY

Notary Public in and for said County and State

Form No. 300-A

CERTIFICATE OF DEATH

3100

158

STATE TITL NUMBER

STATE OF CALIFORNIA—DEPARTMENT OF PUBLIC HEALTH

STATE REGISTRATION DISTRICT AND CERTIFICATE NUMBER

| | | | | | | | | | |
|---|--|---|--------------------|---|--|--|--|--|--|
| 1A NAME OF DECEASED—FIRST NAME Carl | | 1B MIDDLE NAME George | | 1C LAST NAME Becker | | 2A DATE OF DEATH—MONTH DAY YEAR 3-12-1969 3-11-69 | | 2B HOUR 8:50 P. | |
| 3 SEX Male | | 4 COLOR OR RACE Cauc | | 5 BIRTHPLACE Germany | | 6 DATE OF BIRTH July 28, 1873 1896 | | 7 AGE 73 | |
| 8 NAME AND BIRTHPLACE OF FATHER William Becker, Germany | | | | 9 MAIDEN NAME AND BIRTHPLACE OF MOTHER Marie Packlin/unknown | | | | | |
| 10 COUNTRY OF WHAT COUNTRY U.S.A. | | | | 11 SOCIAL SECURITY NUMBER | | 12 MARRIED NEVER MARRIED WIDOWED DIVORCED (SPECIFY) married | | 13 NAME OF SURVIVING SPOUSE Bernice Becker | |
| 14 LAST OCCUPATION Park Security | | 15 NUMBER OF YEARS IN THIS OCCUPATION 8 | | 16 NAME OF LAST EMPLOYING COMPANY OR FIRM Yosemite Park | | 17 KIND OF INDUSTRY OR BUSINESS Park Security | | | |
| 18A PLACE OF DEATH—NAME OF HOSPITAL OR OTHER INPATIENT FACILITY Auburn General Hospital | | | | 18B STREET ADDRESS—STREET AND NUMBER OR LOCATION 370 Elm Street | | | | 18C INSIDE OF CORPORATION LIMITS yes | |
| 18D CITY OR TOWN Auburn | | | | 18E COUNTY Placer | | 18F ZIP CODE 6 | | 18G NUMBER OF YEARS IN THIS CITY 38 | |
| 19A USUAL RESIDENCE—STREET ADDRESS—STREET AND NUMBER OR LOCATION 175 Cary Street | | | | 19B INSIDE CITY CORPORATE LIMITS yes | | 20 NAME AND MAILING ADDRESS OF INFORMANT Bernice Becker 175 Cary Street Auburn, California | | | |
| 19C CITY OR TOWN Auburn | | | | 19D COUNTY Placer | | 19E STATE California | | | |
| 21A CORONER | | 21B PHYSICIAN | | 21C PHYSICIAN OF CORONER'S CHOICE | | 21D DATE SIGNED 3-12-69 | | | |
| 21E ADDRESS 2-24-69 | | 21F ADDRESS 3-11-69 | | 21G ADDRESS 370 Elm St Auburn, California 95625 | | 21H SIGNATURE <i>Carlton E. Beck MD</i> | | | |
| 22A SPECIFY MANNER, ASSIGNMENT OF CREMATION Burial | | 22B DATE 3-11-1969 | | 23 NAME OF CEMETERY OR CREMATORY Auburn District Cemetery | | 24 EMBALMER—SIGNATURE <i>By Helen K...</i> | | 25 LICENSE NUMBER 5510 | |
| 25 NAME OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH Auburn Funeral Home | | | | 26 INSURE | | 27 SIGNATURE <i>By Helen K...</i> | | 28 DATE 3-13-1969 | |
| 29 PART I DEATH WAS CAUSED BY IMMEDIATE CAUSE A. TERMINAL BRONCHOPNEUMONIA DUE TO OR AS A CONSEQUENCE OF B. CONGESTIVE HEART FAILURE DUE TO OR AS A CONSEQUENCE OF C. GENERALIZED ARTERIOSCLEROSIS | | | | | | | | | |
| 30 PART II OTHER SIGNIFICANT CONDITIONS DIABETES MELLITUS | | | | | | | | | |
| 33 SPECIFY ACCIDENT SUICIDE OR HOMICIDE | | | 34 PLACE OF INJURY | | | 35 TYPE AT ACCIDENT | | 36 DATE OF INJURY | |
| 37A PLACE OF INJURY—STREET AND NUMBER OR LOCATION AND CITY OR TOWN | | | 37B | | | 37C | | 37D | |
| 40 DESCRIBE HOW INJURY OCCURRED | | | | | | | | | |

STATE REGISTRAR



This is to certify that this document is a true and correct copy of the vital record which is on file in this office and of which I am the legal custodian.

RECORDED AT THE REQUEST OF
G. RAY ROBINSON
on **SEPTEMBER 11** 1969
at **07** MIN, past **11 A.** M.
In Book **31** of OFFICIAL
RECORDS, page **498-499**
OF **YUBA COUNTY, NEVADA**
Recorded **50725** 4.00

Carlton E. Beck MD,
Local Registrar and County Health Officer
Auburn, California Date **SEP 2 1969**

BOOK **31** PAGE **499**