

RECORDING REQUESTED BY

Mrs. Thelma Joseph

AND WHEN RECORDED MAIL TO

Mrs. Thelma Joseph
2022 North Zeebe Avenue
Los Angeles, 59 Calif.

52721

RECORDED AT THE REQUEST OF Thelma Joseph
on June 15 at 10 A. M.
Book 35 of Official Records of 489-490 RECORDS OF
FUREKA COUNTY, NEVADA Thelma A. Joseph Recorder.
File No. 52721 Fee \$ 4.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Affidavit—Death of Joint Tenant

THIS FORM FURNISHED BY TITLE INSURANCE AND TRUST COMPANY

STATE OF CALIFORNIA,

County of Los Angeles

That THELMA JOSEPH of legal age, being first duly sworn, deposes and says:
That JAMES JOSEPH the decedent mentioned in the attached certified copy of
Certificate of Death is the same person as JAMES LEON JOSEPH dated May 12, 1967
named as one of the parties in that certain Deed
executed by NEVADA TITLE INSURANCE COMPANY, a Nevada Corporation
to JAMES LEON JOSEPH and THELMA JOSEPH, Husband and Wife in
as joint tenants, recorded as Instrument No. 146,644 on Mar. 17, 1967
book 28 page 576 of Official Records of Eureka County, Nevada
~~covering the following described property situated in the~~ Eureka
~~County of~~ Nevada State

Lots 1 and 2 in Block 5, as shown on the map of CRESCENT VALLEY
RANGE & FAIRBANKS, UNIT NO. 1, filed in the office of the County
Recorder of Eureka County, Nevada, on November 5, 1959.

EXCEPTING, say and all oil rights, including the right of entry
for exploration and production of oil or other hydro-
carbons.

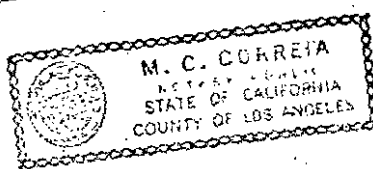
That the value of all real and personal property owned by said decedent at date of death, including the full value of
the property above described, did not then exceed the sum of \$ 600.00

Dated June 10, 1967

SUBSCRIBED AND SWORN to before me on June 10, 1967

Signature [Signature]
Name (Typed or Printed) Thelma Joseph

Thelma Joseph
Thelma Joseph



This area for official notarial seal.

CERTIFICATE OF DEATH

STATE OF CALIFORNIA		DEPARTMENT OF PUBLIC HEALTH		COUNTY OF LOS ANGELES	
1. NAME OF DECEASED - FIRST NAME James		2. LAST NAME Joseph		3. DATE OF DEATH - MONTH DAY YEAR Feb. 15, 1970	
4. SEX Male		5. COLOR OR RACE Negro		6. DATE OF BIRTH Aug. 18, 1913	
7. PLACE OF BIRTH California		8. AGE 56 Yrs		9. TIME OF DEATH 0430 hrs.	
10. NAME AND BIRTHPLACE OF FATHER Andrew L. Joseph - Mo.		11. NAME AND BIRTHPLACE OF MOTHER Virginia Daniels - Mo.		12. MARITAL STATUS Married	
13. NAME OF SURVIVING SPOUSE IF WIFE, LATE HUSBAND NAME IF HUSBAND Thelma Roberts		14. NAME OF DECEASED'S USUAL RESIDENCE 2022 No. Keene St.		15. CITY OR TOWN Compton	
16. COUNTY Los Angeles		17. STATE California		18. ZIP CODE 90221	
19. USUAL RESIDENCE - STREET ADDRESS, CITY AND STATE 2022 No. Keene St.		20. NAME AND MAILING ADDRESS OF INFORMANT Thelma Joseph		21. ADDRESS OF INFORMANT Same	
22. CITY OR TOWN Compton		23. COUNTY Los Angeles		24. STATE California	
25. PHYSICIAN'S OR CORONER'S CERTIFICATION Investigation		26. PHYSICIAN'S SIGNATURE Dr. [Signature]		27. DATE SIGNED 2-17-70	
28. NAME OF FUNERAL DIRECTOR Pierce Bros-Los Angeles		29. NAME OF CEMETERY OR CREMATORY Evergreen Cemetery		30. ENDORSEMENT - SIGNATURE OF BOARD EXAMINER [Signature]	
31. DATE 2-21-70		32. NAME OF REGISTRAR [Signature]		33. DATE FEB 18 1970	
34. PART I: DEATH WAS CAUSED BY: (A) ATHEROSCLEROTIC CARDIOVASCULAR DISEASE		35. PART II: OTHER SIGNIFICANT CONDITIONS None		36. PART III: INJURY INFORMATION None	
37. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE None		38. PLACE OF INJURY None		39. DATE OF INJURY None	
40. PLACE OF INJURY None		41. INJURY AT HOME None		42. DATE OF INJURY None	
43. DESCRIBE HOW INJURY OCCURRED None		44. INJURY AT HOME None		45. DATE OF INJURY None	

THIS IS A TRUE CERTIFIED COPY OF THE DEATH
FILED IN THE LOS ANGELES COUNTY HEALTH DEPARTMENT
IF IT BEARS THE SEAL IMPRINTED
IN PURPLE INK



FEB 27 1970

F.E.E.
\$2.00

Richard [Signature]
RICHARD [Signature]
OFFICIAL, CLERK AND REGISTRAR

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