

55975

IN THE MATTER OF THE DEATH
OF NOAH COTTON

AFFIDAVIT OF TERMINATION OF
JOINT TENANCY

STATE OF OREGON)
) ss
County of Lake)

I, ZARILLA B. COTTOM, after being duly sworn, depose
and say:

That I am the surviving wife of Noah Cotton, who
died on December 29, 1971 in Lakeview, Oregon; that she was a
resident of Lake County, Oregon, at the time of his death; that
she and the same Noah Cotton are the same persons named as
parties of the second part in that certain deed filed for record
in the office of the County Recorder of Eureka County, Nevada
as document No. 39775 in Book 4 at pages 95-96 of the Official
Records of Eureka County, Nevada on April 29, 1964; that said
deed was conveyed to her and Noah Cotton as joint tenants with
the right of survivorship, and to the survivor of them, all
that certain real property situate in the County of Eureka, State
of Nevada, that is described as follows:

E4NW4, E4SW4 of Section 28, Township 32, North, Range
51 East M.D.B. & M. containing 160 acres;

TOGETHER with all improvements situate thereon;

TOGETHER with all right, title and interest in
and to that certain water right, known as Two
Hill Canyon Spring, issued under Application No.
6487, and recorded in the Office of the County
Recorder of Eureka County, Nevada, in Book A of
Water Locations, page 189. Also, all right, title
and interest in and to any and all other water rights
appurtenant to the above described lands.

TOGETHER with the tenements, hereditaments and
appurtenances thereunto belonging or appertaining,
and the reversion and reversions, remainder and
remainders, rents, issues and profits thereof.

That upon the death of the said Noah Cotton all
interest of said decedent in and decedent in and to said real

property described above, terminated under the joint tenancy provisions of said deed; that a certified copy of the death certificate of Noah Cotton on December 29, 1971, is attached hereto and by reference made a part hereof.

Zarilla B. Cotton
Zarilla B. Cotton

Subscribed and sworn to before me this

9th day of May, 1972.



Barbara Sudek
Notary public for Oregon

My commission expires: Sept 10, 1974

L

STATE OF OREGON—STATE BOARD OF HEALTH
Vital Statistics Section

15321

71-49

CERTIFICATE OF DEATH

DECEASED—NAME First Middle Last Noah Cottom		DATE OF DEATH (month, day, year) 2 December 29, 1971	
RACE (White, Negro, American Indian, etc. (specify)) White		SEX Male	AGE—Last birthday (year's) Under 1 year Under 1 day 60
CITY, TOWN, OR LOCATION OF DEATH Lakeview		DATE OF BIRTH (month, day, year) 1 November 1, 1891	
STATE OF BIRTH (if not in U.S.A., name country) Idaho		HOSPITAL OR OTHER INSTITUTION—NAME (if not in other, give street and number) 74 Lake District Hospital	
CITIZENSHIP U.S.A.		MARRIED, WIVES MARRIED, WIDOWED, DIVORCED (specify) 16 Married	
SOCIAL SECURITY NUMBER [REDACTED]		NAME OF SPOUSE 1. Zarilla Cottom	
USUAL OCCUPATION (give kind of work done during most of working life, even if retired) 13. Carpenter—retired		KIND OF BUSINESS OR INDUSTRY 12b. Railway	
RESIDENCE—STATE Oregon		CITY, TOWN, OR LOCATION Lakeview	
FATHER—NAME First middle last James Cottom		MOTHER—NAME First middle last Emily Jones	
DEATH WAS CAUSED BY: 18. Cardiac Arrest & Standstill.		17. Mrs. Zarilla Cottom, Wife	
19. LBBB & AV block, & asystole.		45 mins	
20. Hypertensive Cardiovascular disease & LV failure.		1 week	
PART II. OTHER SIGNIFICANT CONDITIONS: conditions contributing to death but not related to those given in Part I (a)		AUTOPSY (yes or no) 19a. NO	
21. Acute Pulmonary Edema.		IF YES, were findings considered in determining cause of death? 19b. NO	
ACCIDENT (specify yes or no)	DATE OF INJURY (month, day, year)	HOW INJURY OCCURRED (enter nature of injury in part I or part II, item 18)	
22a.	22b.	22c.	
INJURY AT WORK (specify yes or no)	PLACE OF INJURY (if home, farm, school, factory, office bldg., etc. (specify))	LOCATION (hospital or E.F.D. No., city or town, county, state)	
23a.	23b.	23c.	
CERTIFICATION—PHYSICIAN (month, day, year)	month, day, year	And Last Seen (Month/Day/Year) (specify if other than death)	DEATH OCCURRED (month, day, year)
24. June 12 1970	Dec 29 1971	Dec 29, 1971	7:30 P. M.
PHYSICIAN—SIGNATURE <i>James Robertson</i>	NAME (Type or print) L. C. Robertson, M.D.	DEGREE or TITLE MD	DATE SIGNED (month, day, year) 12/30/71
25. 629 Center Street, Lakeview, Oregon 97630			
BURIAL, CREMATION, REMOVAL (specify)	CEMETERY OR CREMATORY—NAME	LOCATION—city or town, state	DATE (month, day, year)
26. Burial	Carlin Cemetery	Carlin, Nevada	1/3/1972
FUNERAL DIRECTOR—SIGNATURE <i>Edward Oles</i>	FUNERAL HOME—NAME AND ADDRESS (street, city or town, state, zip)	DATE RECEIVED BY LOCAL REGISTRAR	DATE RECEIVED BY STATE REGISTRAR
27. Edward Oles	Ousley-Osterman Mortuary, 410 Center St., Lakeview, Or.	Dec 31, 1971	JAN - 6 1972
28. Harriet Redding, Deputy, Reg.	RESERVED FOR REGISTRAR'S USE		

STATE OF OREGON

County of Multnomah

DATE ISSUED

Jan. 11, 1972

I hereby certify that the foregoing copy has been compared by me with the original document and is a true, full and correct copy of the original certificate as the same appears on file in the Vital Statistics Section of the Oregon State Health Division and in my official care and custody.



STATE REGISTRAR

RECORDED AT THE REQUEST OF **Conn & Lynch**

May 11 1972 at **45** mail post **10 A.** M.

Book **42** of OFFICIAL RECORDS, page **288-290.** RECORDS OF

CULEXA COUNTY, NEVADA

File No. **55975**

Fee \$5.00

42

290

BOOK PAGE