

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

Name MRS. KARR BURGUM
Street Address P.O. Box 295
City & State Victorville CALIF
92392

(SPACE ABOVE THIS LINE FOR RECORDER'S USE)

AFFIDAVIT—DEATH OF JOINT TENANT

STATE OF CALIFORNIA,

County of _____ } ss
Helen M. Nielsen

That Harold C. Nielsen, of legal age, being duly sworn, deposes and says:
the decedent mentioned in the attached certified
copy of Certificate of Death, is the same person as Harold C. Nielsen
named as one of the parties in that certain Deed dated May 1, 1964
executed by Crescent Valley Ranch & Farms

to Harold C. Nielsen and Helen M. Nielsen, husband and wife
as joint tenants, recorded as Instrument No. 39841, on June 8, 1964, in
Book 4, Page 190, of Official Records of Eureka County, Nevada
pp 171/21/171/2 covering the following described property situated in the unincorporated area
County of Eureka, State of Nevada

Lot 2 of Block 24 of Crescent Valley Ranch & Farms, Unit No. 1, as per map recorded in said County as file No. 34081.

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 \$ _____

Dated August 22, 1977 Helen M. Nielsen
Helen M. Nielsen

VERIFICATION

I, the undersigned, say: I am the Helen M. Nielsen the Declarant of the foregoing
(Surviving Tenant or Agent)
Affidavit; I have read the foregoing and know the contents thereof; the same is true of my own knowledge.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 22, 1977, 19 _____, at Victorville, California.
(Date of signature.) (City where signed.)

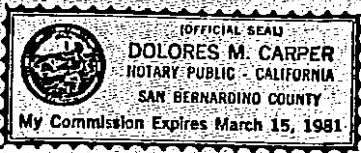
Helen M. Nielsen
(Personal signature of the individual who is swearing that the contents of the Affidavit are true.)

Form 300 (Individual) First American Title Company

STATE OF CALIFORNIA
COUNTY OF San Bernardino
On August 22, 1977
before me, the undersigned, a Notary Public in and for
said State, personally appeared Helen M. Nielsen

Known to me to be the person whose name
subscribed to the within instrument and acknowledged to me
that she executed the same.

WITNESS my hand and official seal
Signature *Dolores M. Carper*
Dolores M. Carper



Name (Typed or Printed) (This area for official notarial seal)

COPIES

LOS ANGELES COUNTY
HEALTH DEPARTMENT

This is to certify that
this is a true copy
of the document
filed in this office.

ROY O. GILBERT, M.D.
County Health Officer
and Local Registrar of
Vital Statistics

Leona S. Sayler
Deputy Registrar

Date *April 11, 1960*

Certification:
 Fee paid \$2.00

CERTIFICATE OF DEATH				
STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH				
NAME OF DECEASED Harold		SUFFIX A		DATE OF BIRTH April 10, 1911
SEX Male	COLOR Caucasian	CITIZENSHIP U.S.	PLACE OF BIRTH U.S.	
NAME AND ADDRESS OF DECEASED Hans B. Nielsen, 25 Truck Driver		NAME AND ADDRESS OF NEXT OF KIN Helan Marie Nielsen, Los Angeles, California		
MANNER OF DEATH Heart Disease		CAUSE OF DEATH 3750 Coronado		
PLACE OF DEATH Los Angeles		COUNTY OF DEATH Los Angeles		
DATE OF DEATH April 11, 1960		HOURS OF DEATH 10:47		
SIGNATURE OF DECEASED <i>Harold A. Nielsen</i>				
SIGNATURE OF NEXT OF KIN <i>Helan Marie Nielsen</i>				
SIGNATURE OF REGISTRAR <i>Leona S. Sayler</i>				
DATE OF DEATH April 11, 1960				

RECORDED AT THE REQUEST OF Mrs. Karen Burgum
on September 1, 19 77, at 47 mins. past 10 A.M. in
Book 60 of OFFICIAL RECORDS, page 506-508, RECORDS OF
EUREKA COUNTY, NEVADA. WILLIS A. DePAOLI Recorder
File No. 63560 Fee \$ 5.00

63560

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