AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF NEVADA)

SS.
COUNTY OF ELKO) 4

LEONA A. SMITH, being first duly sworn, deposes and says:

That she is one of the surviving joint tenants of the property described and granted in the following Deed:

That certain Deed Dated March 22, 1974, and recorded in Book 47 of Official Records, Page 376, Office of the Eureka County Recorder, Eureka, Nevada, on March 29, 1974, wherein FIRST AMERICAN TITLE COMPANY OF NEVADA is Grantor and BYRON F. SMITH and LEONA A. SMITH are the Grantees, as joint tenants with right of survivorship, of the following described real property situate in the County of Eureka, State of Nevada:

Lot 2 of Block 36 of CRESCENT VALLEY RANCH & FARMS, UNIT NO. 1, as per map recorded in Eureka County, Nevada as File No. 34081.

TOGETHER with any and all buildings and improvements situate thereon.

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 BYRON F. SMITH, named as one on the Grantees in the above mentioned Deed, died on June 23, 1980, at Elko, Nevada, and is the same person as BYRON F. SMITH named in the certified copy of the Certificate of Death attached hereto as Exhibit "A", which Exhibit is hereby referred to and incorporated herein as though set forth in full.

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RDSS P. EARDLEY
ATTORNEY AT LAW
469 IDAHO STREET - P. O. BOX 391
ELKO. NEVADA 89801
(702) 738-4046

That by reason of the death of BYRON F. SMITH, the title to the above described property is now vested in LEONA A. SMITH as surviving joint tenant.

DATED: August /825, 1980.

LEONA A. SMITH

Subscribed and sworn to before me this ______ day of August, 1980.

NOTARY PUBLIC

ROSS P. EARDLEY

NOTARY PUBLIC, STATE OF NEVADA

EIXO COUNTY

My Commission, Expires Jan. 5, 19 8

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(STAVIE OF NEVAUA)

DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH



r'	THE STATISTICS
BAY.	STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES
39 0-10	5,208 71 DIVISION OF HEALTH — SECTION OF VITAL STATISTICS
	LOCAL FILE NUMBER STATE TRE NUMBER
DA PRINT	DECEASED—NAME First Mode Last DATE OF DEATH (More), Day, Young COUNTY OF DEATH
PRIMANENT BLACK INK	1. Byron F SMITH 2 June 23, 1980 3s E1ko CITY, TOWN, OR LOCATION OF DEATH HOSPITAL OR OTHER INSTITUTION—Name (If rock in enter), give sized and number). If Hoop of test indicate DOA OP-Enter
1000011	∞ Elko seneral Hospital self-inpatient
30303111	MACE LEG WINE BOX AFFORM FTHNICS ACE LEGY LINDREY VILLE UNDER LINDREY TO DATE OF BRITHING, Day YOU SEX
	4a White 4b Sa 67 So : March 9, 1913 7 Male
IF DEATH	STATE OF BRITH STATE OF BRITH (CTIZEN OF WHAT COUNTRY MODAGE DESCRIPTION MARKED MARKED. SURVIVING SPOUSE (I wide pier majorin name) WAS DECEDENT FUEL OF MICH. IN U.S. ARRIVED FOR THE PIER MARKED. U.S. ARRIVED FOR THE PIER
STITUTION	8 Idano 9 USA 16 Married 11 Leona Williams 177 No
E HANDBOOK HEGARDING MPLETION OF	Working Life Even & Rebred)
DENCE ITEMS	RESIDENCE STATE COUNTY CITY, TOWN OR LOCATION STREET AND NUMBER RISIDE CITY LIMITS
	15a Nevada 15b Lander 15c Crescent Valley 15d 15b No
20000	FATHER-NAME First Middle Last MOTHER-MAIDEN NAME First Middle Last
STIMPHES (Ross Smith Ada Fleming
	INFORMANT—NAME (Type or First) MAILTYS ADDRESS (Sweet or RFO No. Cay or Town, State, Zop) Description of the Company of the
	186 Leona Smith 186 Box 649, Crescent Valley, Nevada 89821 RUFIAL CREMATION PENDVAL OTHER (Specify) CEMETERY OF CREMATIONY—NAME [LOCATION City of Town State]
	Entembrant Duner Maravial Carden Elle Marada
30801000	TURERAL DIRECTOR—SIGNATURE (O, Person Acing is Such) NAME AND ADDRESS OF FACULTY.
	Burns Funeral Home, Inc. Box 689 Elko, Nevada 89801
1	Z 21a To the best of sy knowledge, peach occurred at the sine, date and pace and due to the task of evanuation and/or investigation, in my opinion death occurred at the sine, date and place and due to the cause(s) stated.
	FO (Squalure and Title) (C.C. (A) (L.C. (Squalure and Title) (E.C. (Squalur
	8 2 June 24, 1980 7:50 p.m. 22c 22c
	Signature and Title; DATE SIGNED IMB, Dark (1) POUR OF DEATH
	75 21c 226 CN 22e AT
	NAME AND ADDRESS OF CERTIFIER PHYSICIAN, MEDICAL EXAMINER OR CORDINER(17) pe of Firm)
,	Hugh S. Collett, M.D. 762-14th Street. Elko, Nevada 89801
DADITIONS IF ANY	24 Sprace Colores 1a. aturnal Ocasita, 240 June 25, 1980
HICH GAVE	25. IMMEDIATE CAUSE [ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c)) Interval between orset and death
CAUSE LATING THE	PART (a) Carcinoma of the lung : One Year
NOTEFLYING AUSE LAST	DUE 10, CR AS A CONSEQUENCE OF Interval between onset and death
L	(b) : DUE TO, OR AS A CONSEQUENCE OF Internal between order and peath.
THE OF	(c) OTHER SIGNIFICANT CONDITIONS—Congrous contributing to death but not related to cause given in PART 1 (a) AUTOPSY (Specify WAS CASE REFLIRED TO MEDICAL YES ON NOT LEARNING CONDITIONS—CONDITIONS
17511111	PART OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not related to cause given in PART 1 (a) AUTOPSY (Specify Ves or No) 10 10 10 10 10 10 10 10 10 10 10 10 10 1
	ACC, SUICOE HOM LINET. DATE OF INJURY (M6, Day, Yr.) HOUR OF INJURY DESCRIBE HOW INJURY OCCURRED CEPPENDING INVEST.
	786 786 786 786 786 W 286 PLACE OF HUURY—At home, farm, street, factory, office touring, LOCATION STREET OF RED, No. OLTY OR TOWN STATE
	(Specify Yes or hip) etc (Specify)
	Nº 01396
	This is to certify that the above is a true and obried copy of the certificate on the in this citice.
130	
(an	Date issued: JUL 2 2 1980
THE PARTY	

005049

WARNINGS THIS LEASOAL TO ALTER OR COPYCHIS DOGUMENTA ///-

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RECORDED AT REQUEST OF Ross P. Fardley
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OFFICIAL RECORDS
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WILLIS A. ELFAGIL - ST CORDER
FILE NO. 49506
FEE S. 6-00

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