

Deborah Davis
916 "G" Ave.
Resperia, CA 92345

Order No. EU-123246
Escrow No. 30543 A
Loan No. _____

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT-DEATH OF JOINT TENANT

STATE OF CALIFORNIA,
County of San Bernardino ss.

Deborah Davis _____, of legal age, being first duly sworn, deposes and says:
That William L. Davis, the decedent mentioned in the attached certified copy of
Certificate of Death is the same person as William L. Davis
named as one of the parties in that certain Grant, Bargain & Sale Deed dated September 15, 1967
executed by Marian Henley Herlihy, now Marian H. Matthews
to William L. Davis and Deborah Davis, his wife
as joint tenants, recorded as Instrument No. 47392 on July 20, 1978 in
Book 25, Page 146 of Official Records of Eureka County, California/Nevada,
covering the following described property situated in the County of Eureka, State of California/Nevada:
TOWNSHIP 30 NORTH, RANGE 48 EAST, MDB&M.

Section 29: S1/2NW1/4, N1/2SW1/4

EXCEPTING THEREFROM all petroleum, oil, natural gas and products derived therefrom,
reserved by SOUTHERN PACIFIC LAND COMPANY, by deed recorded September 24, 1951 in
Book 24 of Deeds, at page 168, Eureka County, Nevada.

Dated: November 4, 1981

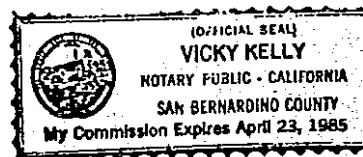
Deborah Davis
Deborah Davis

SUBSCRIBED AND SWORN TO before me, the
undersigned a Notary Public in and for said State,

this 12th day of November, 1981
WITNESS my hand and official seal.

Signature Vicky Kelly
Vicky Kelly

Name (Typed or Printed)



(This area for official notarial seal)

BOOK 99 PAGE 458

Form 1150 (12/84)

CERTIFICATE OF DEATH				3600	6237
STATE OF CALIFORNIA - DEPARTMENT OF HEALTH OFFICE OF THE STATE REGISTRAR OF VITAL STATISTICS					
DECEDENT PERSONAL DATA	1. NAME OF DECEASED - FIRST NAME	2. LAST NAME	3. MIDDLE NAME	4. DATE OF BIRTH	5. TIME OF DEATH
	William	Lee	Davis	July 26, 1894	Dec 23 1977 5:08 P.
	6. SEX	7. COLOR OF HAIR	8. BIRTHPLACE	9. DATE OF DEATH	10. PLACE OF DEATH
	Male	Cauc.	Ohio	83	
FAMILY DATA	11. NAME AND BIRTHPLACE OF FATHER	12. NAME AND BIRTHPLACE OF MOTHER	13. NAME OF SPOUSE, IF ANY	14. NAME OF SPOUSE, IF ANY	15. NAME OF SPOUSE, IF ANY
	Unknown Davis - Unknown	Martha Goodman - Unknown	Married	Deborah Davis	
	16. CITIZEN OF WHAT COUNTRY	17. SOCIAL SECURITY NUMBER	18. MARITAL STATUS	19. NAME OF SPOUSE, IF ANY	20. NAME OF SPOUSE, IF ANY
	U.S.A.		Married	Deborah Davis	
PLACE OF DEATH	21. NAME OF PLACE	22. STREET ADDRESS	23. CITY OR TOWN	24. COUNTY	25. ZIP CODE
	Community Hospital	1500 17th Street	San Bernardino	San Bernardino	92407
	26. PLACE OF DEATH	27. STREET ADDRESS	28. CITY OR TOWN	29. COUNTY	30. ZIP CODE
	San Bernardino	1500 17th Street	San Bernardino	San Bernardino	92407
USUAL RESIDENCE	31. USUAL RESIDENCE	32. STREET ADDRESS	33. CITY OR TOWN	34. COUNTY	35. ZIP CODE
	18345 Arrowhead		San Bernardino	San Bernardino	92407
	36. USUAL RESIDENCE	37. STREET ADDRESS	38. CITY OR TOWN	39. COUNTY	40. ZIP CODE
	Devore		San Bernardino	San Bernardino	92407
PHYSICIAN'S OR CORONER'S CERTIFICATION	41. PHYSICIAN'S CERTIFICATION	42. CORONER'S CERTIFICATION	43. NAME OF PHYSICIAN	44. NAME OF CORONER	45. NAME OF PHYSICIAN
			Dr. W. C. Carr, Jr.	Dr. W. C. Carr, Jr.	Dr. W. C. Carr, Jr.
	46. PHYSICIAN'S CERTIFICATION	47. CORONER'S CERTIFICATION	48. NAME OF PHYSICIAN	49. NAME OF CORONER	50. NAME OF PHYSICIAN
			Dr. W. C. Carr, Jr.	Dr. W. C. Carr, Jr.	Dr. W. C. Carr, Jr.
FURNERAL DISPOSITION AND BURIAL	51. FURNERAL DISPOSITION	52. DATE	53. NAME OF CEMETERY	54. NAME OF CEMETERY	55. NAME OF CEMETERY
	Cremation	12/29/77	MT. View Cemetery	MT. View Cemetery	MT. View Cemetery
	56. FURNERAL DISPOSITION	57. DATE	58. NAME OF CEMETERY	59. NAME OF CEMETERY	60. NAME OF CEMETERY
CAUSE OF DEATH	61. CAUSE OF DEATH	62. ICD-9 CODE	63. ICD-9 CODE	64. ICD-9 CODE	65. ICD-9 CODE
	Acute Myocardial Infarct				
	66. CAUSE OF DEATH	67. ICD-9 CODE	68. ICD-9 CODE	69. ICD-9 CODE	70. ICD-9 CODE
INJURY INFORMATION	71. INJURY INFORMATION	72. INJURY INFORMATION	73. INJURY INFORMATION	74. INJURY INFORMATION	75. INJURY INFORMATION
	76. INJURY INFORMATION	77. INJURY INFORMATION	78. INJURY INFORMATION	79. INJURY INFORMATION	80. INJURY INFORMATION
STATE REGISTRAR					



I hereby certify that this is a true copy of the record if the seal of this office is impressed in purple ink.

ERROL S. MACHAM
Auditor-Recorder
San Bernardino County, Calif.

DEC 2 - 1981

RECORDED AT REQUEST OF
FIRST AMERICAN TITLE CO. OF NEVADA
BOOK 99 PAGE 458

81 DEC 7 AIO:41

OFFICIAL RECORDS
EUREKA COUNTY, NEVADA
WILLIS A. DEPAOLI, RECORDER
FILE NO 82570
FEE \$2.00

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