

RECORDING REQUESTED BY

JENNY FOX HOLLAND

AND WHEN RECORDED MAIL TO

JENNY FOX HOLLAND
16434 San Fernando Mission
Blvd.
Granada Hills, CA 91344

127073

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Affidavit - Death of Joint Tenant

TD 426 CA 112 7-61

THIS FORM FURNISHED BY TITLE INSURANCE AND TRUST COMPANY

A.P.N.

NEVADA
STATE OF CALIFORNIA,
COUNTY OF EUREKA

ss.

I, JENNY FOX, of legal age, being first duly sworn, deposes and says:
That SAM FOX, the decedent mentioned in the attached certified copy of
Certificate of Death, is the same person as SAM FOX
named as one of the parties in that certain Corporation Grant Deeded June 6, 1960
executed by Crescent Valley Ranch & Farms
to SAM FOX and JENNY G. FOX, husband and wife

File No. 34876, on August 9, 1960, in
County of Eureka, State of Nevada,
covering the following described property situated in the
County of Eureka, State of Nevada.

Parcel 1: Lot 26 in Block 23 as shown on the map of CRESCENT VALLEY
RANCH & FARMS, UNIT NO. 1, filed in the office of the County Recorder
of Eureka County, Nevada, on April 6, 1959 as File No. 34081.

Parcel 2: The S 1/2 of NE 1/4 of NE 1/4 of Section 29, Township 29
North, Range 48 East, M.D.B. & M., said Section 29 being delineated
on the Record of Survey for CRESCENT VALLEY RANCH & FARMS, UNIT NO. 5,
file in the office of the County Recorder of Eureka County, Nevada on
November 5, 1959, as File No. 34550.

RESERVING, HOWEVER, a right of way over the Western 30 feet of said
property to afford party of the first part its successors or assigns,
access to an ingress from other lands that may be now owned, or that
may be hereafter acquired, by first party or by its successors or
assigns, and further reserving the right to dedicate or convey said
right of way to the public and the right to grant to such persons or
corporations and upon such terms and conditions as first party shall
deem proper the right to use the Western 30 feet of said property for
the purpose of constructing and maintaining, in, under, upon, and
across said property, water mains, sanitary sewer mains, storm sewer
mains, gas lines, electric power transmission lines and communication
lines, and other utility services.
Together with the right to use the appropriate 60 feet in width pro-
posed roadway shown on said Record of Survey.

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 \$ 4,000.00

Dated: December 12, 1988

SUBSCRIBED AND SWORN TO before me

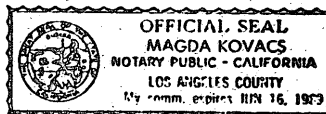
this 10, day of March, 1989

Signature

Magda Kovacs

Jenny Fox Holland nee Jenny Fox

JENNY FOX HOLLAND nee JENNY FOX



(This area for official notarial seal)

Title Order No.

Escrow or Loan No.

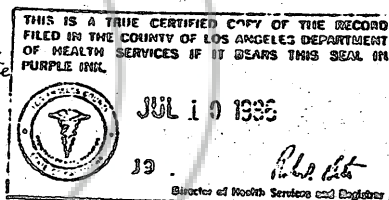
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CERTIFICATE OF DEATH				STATE OF CALIFORNIA				LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER			
STATE FILE NUMBER		1A. NAME OF DECEDENT—FIRST		1B. MIDDLE		1C. LAST		2A. DATE OF DEATH (MONTH, DAY, YEAR)		2B. HOUR	
SAM		FOX		FOX		FOX		JULY 8, 1986		1857	
3. SEX		4. RACE/ETHNICITY		5. SPANISH/SPANISH AND		6. DATE OF BIRTH		7. AGE		8. HOURS	
Male		Caucasian		[X]		February 24, 1914		72		YEARS	
9. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY)		10. NAME AND BIRTHPLACE OF FATHER		11. SOCIAL SECURITY NUMBER		12. MARITAL STATUS		13. NAME OF SURVIVING SPOUSE (IF DECEASED WITH NAME)		14. NAME AND BIRTHPLACE OF MOTHER	
Illinois		Ben Fox - Russia		[REDACTED]		Married		Jenny Guss		Emma Liss - Russia	
11A. COUNTRY OF BIRTH (IF FOREIGN)		11B. IF DECEDENT WAS EVER IN MILITARY GIVE DATES OF SERVICE		12. OCCUPATION		13. MARITAL STATUS		14. NAME OF SURVIVING SPOUSE (IF DECEASED WITH NAME)		15. NAME AND BIRTHPLACE OF MOTHER	
USA		19 TO 19		Adult-Life		Unknown		Jenny Guss		Emma Liss - Russia	
16. USUAL RESIDENCE—STREET ADDRESS, CITY AND COUNTY OF RESIDENCE		17. USUAL RESIDENCE—STREET ADDRESS, CITY AND COUNTY OF RESIDENCE		18. USUAL RESIDENCE—STREET ADDRESS, CITY AND COUNTY OF RESIDENCE		19. USUAL RESIDENCE—STREET ADDRESS, CITY AND COUNTY OF RESIDENCE		20. USUAL RESIDENCE—STREET ADDRESS, CITY AND COUNTY OF RESIDENCE		21. USUAL RESIDENCE—STREET ADDRESS, CITY AND COUNTY OF RESIDENCE	
16414 San Fernando Mission Blvd.		16414 San Fernando Mission Blvd.		16414 San Fernando Mission Blvd.		16414 San Fernando Mission Blvd.		16414 San Fernando Mission Blvd.		16414 San Fernando Mission Blvd.	
17. CITY		18. COUNTY		19. STATE		20. NAME AND ADDRESS OF DECEASED—RESIDENCE		21. NAME AND ADDRESS OF DECEASED—RESIDENCE		22. NAME AND ADDRESS OF DECEASED—RESIDENCE	
Los Angeles		Los Angeles		California		Mrs. Jenny Fox - Wife		Mrs. Jenny Fox - Wife		Mrs. Jenny Fox - Wife	
23. PLACE OF DEATH		24. STREET ADDRESS (IF NOT AND CARRIED ON LICENSE)		25. CITY OF DEATH		26. COUNTY OF DEATH		27. STATE OF DEATH		28. NAME AND ADDRESS OF DECEASED—RESIDENCE	
Kaiser Foundation Hospital		5855 Jesolo Avenue		Woodland Hills		Los Angeles		California		16414 San Fernando Mission Blvd. Granada Hills, CA 91344	
29. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		30. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		31. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		32. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		33. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		34. DEATH WAS CAUSED BY: IMMEDIATE CAUSE	
BRAIN TUMOR		BRAIN TUMOR		BRAIN TUMOR		BRAIN TUMOR		BRAIN TUMOR		BRAIN TUMOR	
35. PERIOD OF ILLNESS		36. PERIOD OF ILLNESS		37. PERIOD OF ILLNESS		38. PERIOD OF ILLNESS		39. PERIOD OF ILLNESS		40. PERIOD OF ILLNESS	
9 MOS.		9 MOS.		9 MOS.		9 MOS.		9 MOS.		9 MOS.	
41. OTHER CAUSE CERTIFIED—CERTIFIED TO DEATH BY NOT RELATED TO CAUSE		42. OTHER CAUSE CERTIFIED—CERTIFIED TO DEATH BY NOT RELATED TO CAUSE		43. OTHER CAUSE CERTIFIED—CERTIFIED TO DEATH BY NOT RELATED TO CAUSE		44. OTHER CAUSE CERTIFIED—CERTIFIED TO DEATH BY NOT RELATED TO CAUSE		45. OTHER CAUSE CERTIFIED—CERTIFIED TO DEATH BY NOT RELATED TO CAUSE		46. OTHER CAUSE CERTIFIED—CERTIFIED TO DEATH BY NOT RELATED TO CAUSE	
NONE		NONE		NONE		NONE		NONE		NONE	
47. PHYSICIAN		48. PHYSICIAN		49. PHYSICIAN		50. PHYSICIAN		51. PHYSICIAN		52. PHYSICIAN	
ALAN EDELMAN M.D.		ALAN EDELMAN M.D.		ALAN EDELMAN M.D.		ALAN EDELMAN M.D.		ALAN EDELMAN M.D.		ALAN EDELMAN M.D.	
6/26/86		7/8/86		7/9/86		7/9/86		7/9/86		7/9/86	
53. LOCATION (STREET AND NUMBER OF LOCATION AND CITY OR TOWN)		54. LOCATION (STREET AND NUMBER OF LOCATION AND CITY OR TOWN)		55. LOCATION (STREET AND NUMBER OF LOCATION AND CITY OR TOWN)		56. LOCATION (STREET AND NUMBER OF LOCATION AND CITY OR TOWN)		57. LOCATION (STREET AND NUMBER OF LOCATION AND CITY OR TOWN)		58. LOCATION (STREET AND NUMBER OF LOCATION AND CITY OR TOWN)	
5855 Jesolo Avenue		5855 Jesolo Avenue		5855 Jesolo Avenue		5855 Jesolo Avenue		5855 Jesolo Avenue		5855 Jesolo Avenue	
59. DATE OF DEATH		60. DATE OF DEATH		61. DATE OF DEATH		62. DATE OF DEATH		63. DATE OF DEATH		64. DATE OF DEATH	
July 8, 1986		July 8, 1986		July 8, 1986		July 8, 1986		July 8, 1986		July 8, 1986	
65. NAME OF FUNERAL DIRECTOR FOR PERSON ACTING AS SUCH		66. LICENSE NO.		67. LOCAL REGISTRY NO.		68. LOCAL REGISTRY NO.		69. LOCAL REGISTRY NO.		70. LOCAL REGISTRY NO.	
Mount Sinai Mortuary		1010		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
71. NAME OF FUNERAL DIRECTOR FOR PERSON ACTING AS SUCH		72. LICENSE NO.		73. LOCAL REGISTRY NO.		74. LOCAL REGISTRY NO.		75. LOCAL REGISTRY NO.		76. LOCAL REGISTRY NO.	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	

RECORDED AT THE REQUEST OF

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Maupin, Cutler, Sepinsky & White
89 APR 14 P2:17

OFFICIAL REGISTRY
EUREKA COUNTY CLERK
M.N. FLEMMING
FILE NO. FILE 1600
127073



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