

TERMINATION OF JOINT TENANCY  
WARRANTY DEED

RPTT-0

Know All Men by These Presents: to, George Casper, deceased,

for and in consideration of the sum of one dollar and other good and valuable consideration to have in law conveyed unto Genevieve B. Casper, the surviving joint tenant and surviving spouse of George Casper,

located at 2200 East 40th Street, Des Moines, Iowa 50317 Nevada  
County, Eureka Book

to 10 of Block 6 of CRESCENT VALLEY RANCH & FARMS, Unit No. 1, as per map recorded Eureka County, as File No. 34081,  
3 in Block 35 of CRESCENT VALLEY RANCH & FARMS, UNIT No. 1, as per map recorded Eureka County as File No. 34081,

subject to: 1. Taxes due not heretofore paid, and  
2. Covenants, conditions, restrictions, reservations, easements, rights and/or rights of way filed of record.

Attached is a certified copy of the death certificate of George Casper who passed away April 22, 1966, in Polk County, Iowa. AP. for lot 3,02-046-02 (Lot 10, 02-021-04)

And the grantors do hereby Covenant with the said grantees and successors in interest, that said grantors hold said real estate by title in fee simple that they have good and lawful authority to sell and convey the same, that said premises are Free and Clear of all Liens and Encumbrances Whatsoever except as may be above stated; and said grantors Covenant to Warrant and Defend the said premises against the lawful claims of all persons whatsoever, except as may be above stated.

Each of the undersigned hereby relinquishes all rights of dower, homestead and distributive share in and to the described premises.

Words and phrases herein including acknowledgment hereof shall be construed as in the singular or plural number and as masculine or feminine gender according to the context.

Signed this 22nd day of January 19 90

STATE OF Iowa  
Polk COUNTY, ss:

Genevieve B. Casper  
Genevieve B. Casper, surviving joint tenant  
and surviving spouse of George Casper

2200 East 40th Street

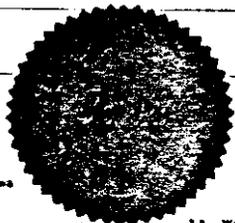
Des Moines, Iowa 50317

On the 22nd day of January, 19 90, before me, the undersigned, a Notary Public in and for said State, personally appeared Genevieve B. Casper,  
a widow, AFTER FILING RETURN TO:  
DAVID HANCE  
ATTORNEY AT LAW  
103 - 8th ST. S.E.  
ALTOONA, IOWA 50009  
PHONE: 616-867-5984

is well known to be the identical persons named in and who executed the foregoing instrument, and acknowledged that they executed the same as their voluntary act and deed.

Elvin David Hance  
Elvin David Hance  
Notary Public in and for the State of Iowa

My commission expires on 8-10-92



STATE OF IOWA DEPARTMENT OF HEALTH  
 DIVISION OF PUBLIC HEALTH  
**BOOK 57 PAGE 89** **CERTIFICATE OF DEATH** (Form No. 116-79)

1. PLACE OF BIRTH: **POLE**  
 a. CITY, TOWNSHIP OR PARISH: **Des Moines**  
 b. STATE OF BIRTH: **Iowa**  
 c. COUNTY OF BIRTH: **Folk**

2. DATE OF BIRTH: **April 22, 1911**  
 a. DAY, MONTH AND YEAR: **2-4-11**  
 b. PLACE OF BIRTH: **Des Moines, Iowa**  
 c. U.S.A. OR FOREIGN: **U.S.A.**

3. PLACE OF DEATH: **VA Center, Des Moines, Iowa**  
 a. CITY, TOWNSHIP OR PARISH: **Des Moines**  
 b. STATE OF DEATH: **Iowa**  
 c. COUNTY OF DEATH: **Folk**

4. NAME OF DECEASED: **GEORGE CASPER**  
 a. SEX: **Male**  
 b. RACE: **white**  
 c. OCCUPATION: **Janitor**  
 d. EDUCATION: **Tech High School**

5. MARITAL STATUS: **Will**  
 a. MARRIED:  **Will**  
 b. SINGLE:   
 c. DIVORCED:   
 d. WIDOWED:

6. NAME OF SPOUSE: **Martha Marcinkewich**  
 a. NAME: **Martha Marcinkewich**  
 b. ADDRESS: **VA Hospital Records**

7. CAUSE OF DEATH: **Septo Renal Syndrome, acute**

8. DATE OF DEATH: **March 28, 1966 - April 22, 1966**  
 a. DATE: **March 28, 1966 - April 22, 1966**  
 b. TIME: **10:50 A.M.**

9. SIGNATURE OF PHYSICIAN: **David M. James**  
 a. NAME: **David M. James**  
 b. ADDRESS: **VA Center, Des Moines, Iowa**  
 c. DATE: **4-22-66**

10. SIGNATURE OF FUNERAL HOME: **W. H. Harkins**  
 a. NAME: **W. H. Harkins**  
 b. ADDRESS: **Des Moines, Iowa**  
 c. DATE: **4-23-1966**

11. SIGNATURE OF BURIAL PLACE: **Laurel Hill Cemetery**  
 a. NAME: **Laurel Hill Cemetery**  
 b. ADDRESS: **Des Moines, Iowa**  
 c. DATE: **4-23-1966**

12. SIGNATURE OF FUNERAL HOME: **Cheney**  
 a. NAME: **Cheney**  
 b. ADDRESS: **Des Moines, Iowa**  
 c. DATE: **4-23-1966**

13. SIGNATURE OF FUNERAL HOME: **284**

Physician must be typed on certificate  
 (Signature must also appear)  
 I.A.C. Code 1953 Sub. 10.10  
 as amended by 1966 I.A.

OFFICIAL RECORDS  
 RECORDED AT THE REQUEST OF  
 BOOK 207 PAGE 189  
**David Hance**  
 30 JUN 29 1966

EUREKA COUNTY, NEW YORK  
 M.N. RE-RECORDING  
 FILE NO. FEE 1.00

131271

BOOK 207 PAGE 490