

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF CALIFORNIA)
COUNTY OF VENTURA)SS

SALLY W. YERBY, of legal age, being first duly sworn, deposes and says:

That ALLAN R. YERBY, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as is named as one of the parties in that certain JOINT TENANCY DEED dated May 12, 1966, executed by

Crescent Valley Ranch & Farms, a Nevada Corporation

to

SALLY W. YERBY and ALLAN R. YERBY, husband and wife as joint tenants

recorded as Instrument No. 42012 in Book 10, on Page 471 of the Official Records of EUREKA COUNTY, NEVADA, covering the following described property situated in the County of Eureka, State of Nevada:

Lot 14, Block 12 of CRESCENT VALLEY RANCH & FARMS, Unit No. 1, as per Map recorded in said County as File No. 34081.

SUBJECT TO covenants, conditions, restrictions, reservations, easements, right and/or rights of way of record.

That the value of all real and personal property owned by said decedent at date of death, including the property above described, did not then exceed the sum of \$ _____.

Dated: Sept 27, 1991

Sally W. Yerby
SALLY W. YERBY

STATE OF CALIFORNIA)
COUNTY OF VENTURA)SS



SUBSCRIBED AND SWORN TO before me, a notary public, this 27th day of September, 1991.

Katherine E. Honeycutt
NOTARY PUBLIC



RECORDING REQUESTED BY)
GREGORY M. HULTGREN, ESQ.)
101 Moody Court, Ste. 200)
Thousand Oaks, CA 91360)
Calif. State Bar No. 100910)
AND WHEN RECORDED MAIL TO)
SALLY W. YERBY)
2656 Hartland Circle)
Westlake Village, CA 91361)
MAIL TAX STATEMENTS TO)
Same as above)

Assessor's Parcel #2-032-13, Roll #02610, Dist #2, Lot 14, Block-12

CERTIFICATION OF VITAL RECORD

COUNTY OF ORANGE

SANTA ANA, CALIFORNIA

3000 03461

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

STATE FILE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF DECEDENT—FIRST Allan		2A. DATE OF DEATH (MONTH, DAY, YEAR) March 20, 1985	
1B. MIDDLE Robert		2B. HOUR 1015	
3. SEX Male		4. RACE/ETHNICITY White	
5. SPANISH/Hispanic NO [] YES [X]		6. DATE OF BIRTH March 9, 1929	
7. AGE 56 YEARS		8. IF UNDER 1 YEAR MONTHS DAYS	
9. IF UNDER 24 HOURS HOURS MINUTES		10. BIRTH NAME AND BIRTHPLACE OF MOTHER Leonie M. Drioton - Calif.	
11A. CITIZEN OF WHAT COUNTRY U.S.A.		11B. IF DECEASED WAS EVER IN MILITARY GIVE DATES OF SERVICE 19 TO 19	
12. SOCIAL SECURITY NUMBER		13. MARITAL STATUS Married	
14. NAME OF SURVIVING SPOUSE IF WIFE ENTER BIRTH NAME Sally Boggs		15. PRIMARY OCCUPATION Plant Manager	
16. NUMBER OF YEARS THIS OCCUPATION 35		17. EMPLOYER IF SELF-EMPLOYED, SO STATE Valspar Corporation	
18. KIND OF INDUSTRY OR BUSINESS Paint Manufacturing		19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) 2241 Banyan Place	
19B. CITY OR TOWN Anaheim		19C. COUNTY Orange	
19D. STATE California		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP Richard Yerby - Brother 20871 Beachwood Lane Huntington Beach, California	
21A. PLACE OF DEATH Residence		21B. COUNTY Orange	
21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION) 2241 Banyan Place		21D. CITY OR TOWN Anaheim	
22. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C) IMMEDIATE CAUSE (A) Carcinoma of pancreas with liver metastasis (B) _____ (C) _____		24. WAS DEATH REPORTED TO CORONER? 85-1411-GI	
CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE, STATING THE UNDERLYING CAUSE LAST.		25. WAS SHOPEY PERFORMED? Yes	
23. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 22A		26. WAS AUTOPSY PERFORMED? No	
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? TYPE OF OPERATION Whipple Procedure		28. DATE SIGNED 12-16-82	
28A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. I ATTENDED DECEDENT SINCE (ENTER MO, DA, YR.)		28B. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE Deputy Sheriff-Coroner By John R. Carter	
I LAST SAW DECEDENT ALIVE (ENTER MO, DA, YR.)		28C. DATE SIGNED 3-22-85	
28D. TYPE PHYSICIAN'S NAME AND ADDRESS		28E. PHYSICIAN'S LICENSE NUMBER	
29. SPECIFY ACCIDENT, SUICIDE, ETC.		30. PLACE OF INJURY	
31. INJURY AT WORK		32A. DATE OF INJURY—MONTH, DAY, YEAR	
32B. HOUR		33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)	
34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)		35. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED AS REQUIRED BY LAW I HAVE HELD AN INQUEST- INVESTIGATION	
36. DISPOSITION Cremation		37. DATE—MONTH, DAY, YEAR March 22, 1985	
38. NAME AND ADDRESS OF CEMETERY OR CREMATORY Coastal Cremation, Inc. Pasadena, Calif.		39. EMBALMER'S LICENSE NUMBER AND SIGNATURE Not embalmed	
40A. NAME OF FUNERAL DIRECTOR FOR PERSON ACTING AS SUCH Armstrong Family		40B. LICENSE NO. 380	
41. LOCAL REGISTRAR SIGNATURE Lee A. Branch		42. DATE ACCEPTED BY LOCAL REGISTRAR MAR 22 1985	
STATE REGISTRAR		STATE REGISTRAR	

129497

STATE OF CALIFORNIA
COUNTY OF ORANGE

CERTIFIED COPY OF VITAL RECORDS

BOOK 227 PAGE 320

DATE ISSUED OCT 03 1991

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Orange County Recorder.

Lee A. Branch
LEE A. BRANCH, Recorder
ORANGE COUNTY, CALIFORNIA

This copy not valid unless prepared on engraved border displaying seal and signature of Recorder.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

COPY

BOOK 227 PAGE 319
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Gregory Hultgren
'91 OCT 21 P423

EUREKA COUNTY, NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEE \$ 700

138262

BOOK 227 PAGE 321

EUREKA COUNTY NEVADA - AFFIDAVIT DEATH OF JOINT TENANT

SBE-ASD AH 502-A FRONT 5-2-91

PRELIMINARY CHANGE OF OWNERSHIP REPORT

[To be completed by transferee (buyer) prior to transfer of subject property in accordance with Section 480.3 of the Revenue and Taxation Code.] A Preliminary Change of Ownership Report must be filed with each conveyance in the County Recorder's office for the county where the property is located; this particular form may be used in all 58 counties of California 10/8/91 THIS FORM IS ACCEPTABLE TO EUREKA COUNTY RECORDERS OFFICE PER TELEPHONE CONFERENCE THIS DATE

SP		
FOR RECORDER'S USE ONLY		
DOC.DT		
DOC.NR		
FOR ASSESSOR'S USE ONLY		
EMP.NR	SITE.USE	DIST
APL.CO	PCT.INT.APL	NGW
EFF.DOC.DT		CL
SQ.FT.I		

SELLER/TRANSFEROR: SALLY W. YERBY AND ALLAN R. YERBY, HUSBAND
 WIFE AS JOINT TENANTS.
 BUYER/TRANSFEE: SALLY W. YERBY, A WIDOW
 ASSESSOR'S PARCEL NUMBER(S) 2-032-13. Roll #02610, Dist #2, Lot 14
 PROPERTY ADDRESS OR LOCATION: Crescent Vally Ranch & Farms Unit #1
 Bldg #12
 MAIL TAX INFORMATION TO: Name SALLY W. YERBY
 Address 2656 Hartland Circle
 Westlake Village, CA 91361

NOTICE: A lien for property taxes applies to your property on March 1 of each year for the taxes owing in the following fiscal year, July 1 through June 30. One-half of these taxes is due November 1, and one-half is due February 1. The first installment becomes delinquent on December 10, and the second installment becomes delinquent on April 10. One tax bill is mailed before November 1 to the owner of record. IF THIS TRANSFER OCCURS AFTER MARCH 1 AND ON OR BEFORE DECEMBER 31, YOU MAY BE RESPONSIBLE FOR THE SECOND INSTALLMENT OF TAXES DUE FEBRUARY 1.

The property which you acquired may be subject to a supplemental assessment in an amount to be determined by the Eureka Nevada County Assessor. For further information on your supplemental roll obligation, please call the Wentura County Assessor at 805-554-2181 Eureka

PART I: TRANSFER INFORMATION

Please answer all questions.

- YES NO
- A. Is this transfer solely between husband and wife (Addition of a spouse, death of a spouse, divorce settlement, etc.)?
 - B. Is this transaction only a correction of the name(s) of the person(s) holding title to the property (For example, a name change upon marriage)?
 - C. Is this document recorded to create, terminate, or reconvey a lender's interest in the property?
 - D. Is this transaction recorded only to create, terminate, or reconvey a security interest (e.g. cosigner)?
 - E. Is this document recorded to substitute a trustee under a deed of trust, mortgage, or other similar document?
 - F. Did this transfer result in the creation of a joint tenancy in which the seller (transferor) remains as one of the joint tenants?
 - G. Does this transfer return property to the person who created the joint tenancy (original transferor)?
 - H. Is this transfer of property:
 - 1. to a trust for the benefit of the grantor, or grantor's spouse?
 - 2. to a trust revocable by the transferor?
 - 3. to a trust from which the property reverts to the grantor within 12 years?
 - I. If this property is subject to a lease, is the remaining lease term 35 years or more including written options?
 - J. Is this a transfer from parents to children or from children to parents?
 - K. Is this transaction to replace a principal residence by a person 55 years of age or older?
 - L. Is this transaction to replace a principal residence by a person who is severely disabled as defined by Revenue and Code Section 69.5?

If you checked yes to J, K, or L, an applicable claim form must be filed with the County Assessor.

Please provide any other information that would help the Assessor to understand the nature of the transfer.

IF YOU HAVE ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS EXCEPT J, K, OR L, PLEASE SIGN AND DATE, OTHERWISE COMPLETE BALANCE OF THE FORM.

PART II: OTHER TRANSFER INFORMATION

- A. Date of transfer if other than recording date _____
- B. Type of transfer. Please check appropriate box.
 - Purchase Foreclosure Gift Trade or Exchange Merger, Stock, or Partnership Acquisition
 - Contract of Sale - Date of Contract _____
 - Inheritance - Date of Death _____ Other: Please explain: _____
 - Creation of Lease Assignment of a Lease Termination of a Lease
 - Date lease began _____
 - Original term in years (including written options) _____
 - Remaining term in years (including written options) _____
- C. Was only a partial interest in the property transferred? Yes No
 If yes, indicate the percentage transferred _____ %.

PRELIMINARY CHANGE OF OWNERSHIP REPORT

Please answer, to the best of your knowledge, all applicable questions, sign and date. If a question does not apply, indicate with "N/A."

PART III: PURCHASE PRICE AND TERMS OF SALE

A. CASH DOWN PAYMENT OR Value of Trade or Exchange (excluding closing costs) Amount \$
B. FIRST DEED OF TRUST @ % interest for years. Pymts./Mo. = \$ (Prin. & int. only) Amount \$
C. SECOND DEED OF TRUST @ % interest for years. Pymts./Mo. = \$ (Prin. & int. only) Amount \$
D. OTHER FINANCING: Is other financing involved not covered in (b) or (c) above?
E. IMPROVEMENT BOND
F. TOTAL PURCHASE PRICE (or acquisition price, if traded or exchanged, include real estate commission if paid.)

G. PROPERTY PURCHASED Through a broker Direct from seller Other (explain)
If purchased through a broker, provide broker's name and phone number:
Please explain any special terms or financing and any other information that would help the Assessor understand the purchase price and terms of sale.

PART IV: PROPERTY INFORMATION

A. IS PERSONAL PROPERTY INCLUDED IN PURCHASE PRICE (other than a mobilehome subject to local property tax)?
B. IS THIS PROPERTY INTENDED AS YOUR PRINCIPAL RESIDENCE?
C. TYPE OF PROPERTY TRANSFERRED:
D. DOES THE PROPERTY PRODUCE INCOME?
E. IF THE ANSWER TO QUESTION D IS YES, IS THE INCOME FROM:
F. WHAT WAS THE CONDITION OF PROPERTY AT THE TIME OF SALE?

I certify that the foregoing is true, correct and complete to the best of my knowledge and belief.

Signed Gregory M. Hultgren Date 10/8/91
NEW OWNER/CORPORATE OFFICER

Please Print Name of New Owner/Corporate Officer GREGORY M. HULTGREN

Phone Number where you are available from 8:00 a.m. - 5:00 p.m. 805 495-1393

(NOTE: The Assessor may contact you for further information)

If a document evidencing a change of ownership is presented to the recorder for recordation without the concurrent filing of a preliminary change of ownership report, the recorder may charge an additional recording fee of twenty dollars (\$20).