

Attibavit-Determination of Joint Tenancy (Death of a Joint Tenant)

I, Irene C. Young the Affiant, being of legal age, and being first duly sworn, deposes and says:

That Jon C. Young (Deceased Name as shown on Death Certificate) mentioned in the attached certified copy Certificate of Death, is the same person as Jon c. Young

named as one of the parties in that certain Joint Tenancy Deed (Deceased Name as shown on Deed)

dated on the 15th day of September, 1978, and executed by Jon C. Young and Irene C. Young aka Jean Young

to Jon C. Young & Irene C. Young aka Jean Young & Aneta Garcia, known as "Grantor(s)", on the 15th day of September, 1978, in book 66 Page 88, of Official Records of Eureka County, Nevada, covering the following described property situated in the City of Eureka County of Eureka State of Nevada.

(Set forth legal description and commonly known street address, if known) Lots 3, 4 and 5 Block 0 and Lots 5, 6, 7 and 8 Block 3, as are delineated and described on the Official Plat or map of the Townsite of Eureka, approved by the United States General Land Office, on November 15, 1937, on file in the office of the County Recorder, Eureka County, Nevada.

ASSASSOR'S PARCEL NO. (APN#) 01-077-01 & 01-076-01

That value of all real property owned by decedent at date of death, including the full value of the property above described, did not exceed the sum of \$ 47,720

In Witness Whereof, I/We have hereunto set my hand/our hands this _____ day of _____, 19____

(Signature) Irene C Young aka Jean Young (Signature) Aneta Garcia (Print or type name here) Irene C Young aka Jean Young (Print or type name here) ANETA GARCIA

STATE OF NEVADA COUNTY OF EUREKA On this 14th day of September, 1978 personally appeared before me, a Notary Public Sean Young also known as Fore C/Young Heeta Garcia

personally known to me to be the person whose name(s) is subscribed to the above instrument who acknowledged that s/he executed the instrument. (Notary Public) PHYLLIS WATTER Notary Stamp

Notary Public - State of Nevada Appointment Recorded in Eureka County MY APPOINTMENT EXPIRES DEC. 19, 1990 Nevada Legal Forms, Inc. (702) 670-8977 • Affidavit/Death of Joint Tenant • AFF 111 G C 1991 • 7x 930512 • 14 • 20 pk CAUTION: If the ink on this form is BROWN it is an original. Material may not be reproduced in whole or in part in any form whatsoever. Consult an attorney if you doubt this forms fitness for your purpose.

SPACE BELOW THIS LINE FOR RECORDERS USE ONLY

RECORDING REQUESTED BY AND MAIL TO NAME ADDRESS CITY/ST/ZIP If applicable mail tax statements to NAME ADDRESS CITY/ST/ZIP

STATE OF NEVADA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH
VITAL STATISTICS

STATE FILE NUMBER 96 002898

STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH — SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH

1. DECEASED—NAME—FIRST, MIDDLE, LAST Jon L. YOUNG		2. DATE OF DEATH (Month, Day, Year) March 13, 1996		3a. COUNTY OF DEATH Burke	
3b. CITY, TOWN, OR LOCATION OF DEATH Eureka		3c. 1 Cluff St.		3d. SEX Male	
4. RACE—g. White, Black, American Indian, etc. (Specify) White		5. HISPANIC ORIGIN? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no if yes. No		6. AGE—Last Birthday (Years) 64	
7. STATE OF BIRTH (If not U.S.A., name country) New Hampshire		8. CITIZEN OF WHAT COUNTRY USA		9. DECEASED'S EDUCATION. Specify highest grade completed. High School	
10. SOCIAL SECURITY NUMBER 616		11. USUAL OCCUPATION (Give kind of work done during most of working life. Even if retired) Miner		12. KIND OF BUSINESS OR INDUSTRY Mining	
13. RESIDENCE—STATE Nevada		14. CITY, TOWN, OR LOCATION Eureka		15. STREET AND NUMBER 1 Cluff St.	
16. FATHER—NAME—FIRST, MIDDLE, LAST Shirley Edward Young		17. MOTHER—MAIDEN NAME Sylvia Chandler		18. MAILING ADDRESS P.O. Box 23 Eureka, Nevada 89316	
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Creation		19b. CEMETERY OR CREMATORY—NAME Sunset Crematory		19c. CITY OR TOWN Burke	
19d. STATE Nevada		20. FUNERAL DIRECTOR—NAME AND ADDRESS OF FACILITY Burns Funeral Home, Inc. P.O. Box 689 Eureka, NV 89803		20a. LICENSE NUMBER 7	
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. Myocardial Infarction		21b. DATE SIGNED (Mo., Day, Yr.) 3/15/96		21c. HOUR OF DEATH 17:00	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) Dr. [Signature]		21e. DATE SIGNED (Mo., Day, Yr.) 3-13-96		21f. HOUR OF DEATH 17:33	
21g. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print) Kenneth E. Jones, P.O. Box 736, Eureka, Nevada 89316		21h. LICENSE NUMBER 236		22. On the basis of examination and investigation, death occurred at the time, date and place and due to the cause(s) stated. Myocardial Infarction	
23. REGISTERED BY REGISTERAR (Mo., Day, Yr.) 3/15/96		24. DATE RECEIVED BY REGISTERAR (Mo., Day, Yr.) 3/15/96		25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)) Myocardial Infarction	
26. PART I (a) DUE TO, OR AS A CONSEQUENCE OF Immediate		26. PART I (b) DUE TO, OR AS A CONSEQUENCE OF		26. PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I. None	
27. INTERVAL BETWEEN ONSET AND DEATH Immediate		28. INTERVAL BETWEEN ONSET AND DEATH		29. DATE OF INJURY (Mo., Day, Yr.)	
30. HOUR OF INJURY		31. PLACE OF INJURY—At home, farm, street, factory, office, building, etc. (Specify)		32. CITY OR TOWN	
33. STATE		34. STREET OR R.F.D. No.		35. CITY OR TOWN	



WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

This is to certify that the above is a true and correct copy of the certificate on file in this office.
 Date issued: **JUL 30 1996**

Deputy Registrar

[Signature]
 No. 90663

BOOK 300 PAGE 332

TYPE OR PRINT IN PERMANENT BLACK INK
 PRECEDENT
 OCCURRED IN INSTITUTION
 SEE HANDBOOK REGARDING COMPLETION OF REFERENCE PAGES
 PARENTS
 DISPOSITION
 CERTIFIER
 CAUSE OF DEATH

BOOK 300 PAGE 383

COPY

BOOK 300 PAGE 381
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Jean Young
96 SEP 16 AM 11:33
EUREKA COUNTY NEVADA
M.H. REBALEATI, RECORDER
FILE NO. 164534
FEES 9.00