

165984

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF NEVADA)
 : SS.
COUNTY OF *E/ko*)

ELWOOD WRIGHT, being first duly sworn, deposes and says:

That he is the Executor of the Estate of ELNA RUTH SCHROEDER, Deceased, one of the joint tenants named in the following Deed:

That certain Deed dated January 22, 1970, and recorded in Book 34 of Official Records, Page 244, File No. 52083, Office of the Eureka County Recorder, Eureka, Nevada, on January 29, 1970, wherein NEVADA TITLE GUARANTY COMPANY, a Nevada corporation, is the Grantor, and ELMER F. SCHROEDER and ELNA RUTH SCHROEDER, husband and wife, are the Grantees, as joint tenants with right of survivorship, of the following described real property situate in the County of Eureka, State of Nevada:

Lot 10 in Block 4, of CRESCENT VALLEY RANCH & FARMS, UNIT NO. 1, as per map recorded in said County as File No. 34081.

TOGETHER with any and all buildings and improvements situate thereon.

TOGETHER with the tenements, hereditaments and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

That ELNA RUTH SCHROEDER, named as one of the Grantees in the above mentioned Deed, died on March 24, 1994, at Crescent Valley, Nevada, and is the same person as ELNA RUTH SCHROEDER named in the

-1-

ROSS P. EARDLEY
ATTORNEY AT LAW
469 IDAHO STREET
ELKO, NEVADA 89801

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TELEPHONE (702) 738-4046 - FAX (702) 738-6286

certified copy of the Certificate of Death attached hereto as Exhibit "A", which Exhibit is hereby referred to and incorporated herein as though set forth in full.

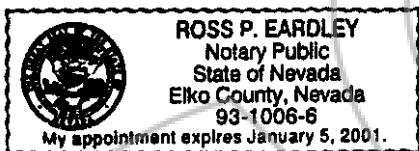
That by reason of the death of ELNA RUTH SCHROEDER, the title to the above described property is now vested in ELMER F. SCHROEDER, as surviving joint tenant.

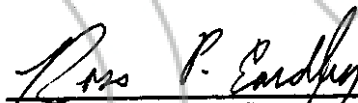
DATED: 1-29-, 1997.


ELWOOD WRIGHT

STATE OF NEVADA)
 : SS.
COUNTY OF ELKO)

Signed and sworn to before me on January 29, 1997, by
ELWOOD WRIGHT.




NOTARY PUBLIC

Address:
P.O. Box 211069
Crescent Valley, NV 89821

APN

STATE OF NEVADA

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

94 003038

LOCAL FILE NUMBER		DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
		1. Elna Ruth SCHROEDER		2. March 24, 1994		3. Eureka	
CITY, TOWN, OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)		If Hosp. or Inst. indicate DOA, OP/Emar, Rm. Inpatient (Specify)		SEX	
3a. Crescent Valley		3b. 2nd St. & Eureka Ave.		3c. 7		3d. female	
RACE—(e.g., White, Black, American Indian, etc) (Specify)		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.		AGE—Last Birthday (Years)		DATE OF BIRTH (Mo., Day, Yr.)	
5. white		6. no		7a. 65		8. February 15, 1929	
STATE OF BIRTH (If not U.S.A., name country)		CITIZEN OF WHAT COUNTRY		Decedent's Education. Specify highest grade completed.		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	
9a. Mississippi		9b. USA		10. 12		11. Married	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired)		KIND OF BUSINESS OR INDUSTRY		SURVIVING SPOUSE (If wife, give maiden name)	
13. [REDACTED]		14a. Rural Carrier		14b. Postal Service		12. Elmer Schroeder	
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		STREET AND NUMBER	
15a. Nevada		15b. Eureka		15c. Crescent Valley		15d. 2nd St. & Eureka Ave.	
FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last		INSIDE CITY LIMITS (Specify Yes or No)			
16. William Warren		17. Dirick		15e. Yes			
INFORMANT—NAME (Type or Print)				MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)			
18a. Elmer Schroeder				18b. P.O. Box 6 Crescent Valley, NV 89821			
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State			
19a. Burial		19b. Burns Memorial Garden		19c. Elko Nevada			
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY			
20a. [Signature]		20b. 7		20c. Burns Funeral Home, Inc. P.O. Box 689 Elko, NV 89803			
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated (Signature and Title)		22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated (Signature and Title)		21b. DATE SIGNED (Mo., Day, Yr.)		22b. DATE SIGNED (Mo., Day, Yr.)	
21c. HOUR OF DEATH		22c. HOUR OF DEATH		21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22d. ON 03-24-94	
21e. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print)		22e. PRONOUNCED DEAD (Mo., Day, Yr.)		22f. PRONOUNCED DEAD (Hour)		22g. AT 07:30	
21f. Kenneth E. Jones, P.O. Box 736, Eureka, Nevada 89316		22f. 04-01-94		22g. 04:00 AM		22h. Coroner	
21g. LICENSE NUMBER		22i. NAME AND ADDRESS OF REGISTRAR (Mo., Day, Yr.)		22j. DEATH DUE TO COMMUNICABLE DISEASE			
21h. 23b		22i. 4-1-94		22j. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
21i. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		21j. PART I		21k. PART II		21l. AUTOPSY (Specify Yes or No)	
(a) Myocardial Infarction		(b) Rheumatic Heart Disease		(c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.		21m. WAS CASE REFERRED TO CORONER (Specify Yes or No)	
21j. 410		21k. no		21l. no		21m. yes	
21k. ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		21l. DATE OF INJURY (Mo., Day, Yr.)		21m. HOUR OF INJURY		21n. DESCRIBE HOW INJURY OCCURRED	
21k. 28a		21l. 28b		21m. 28c		21n. 28d	
21k. 28e		21l. 28f		21m. 28g		21n. 28h	

This is to certify that the above is a true and correct copy of the certificate on file in this office.

STATE REGISTRAR

Date Issued:

AUG 09 1994

By:

Deputy Registrar

No. 064736

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Ross P. Cardley
97 JAN 31 PM 1:20

EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES 10.00

165984

COPY