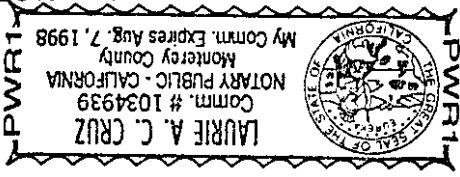


BOOK 310 PAGE 055



Notary Public Commissioned for said County and State (Sign) *Laurie A. Cruz*

Subscribed and Sworn to before me this 30th day of June, 1997

Patricia Loghry
PATRICIA LOGHRY

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 \$ 60,000.00

See Exhibit A, Attached.

Patricia Loghry, of legal age, being first duly sworn, deposes and says:
 That Bill R. Loghry, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Bill R. Loghry named as one of the parties in that certain Grant, Bargain & Sale Deed dated August 11, 1977, executed by Eugene Fox to Bill R. Loghry and Patricia Loghry as joint tenants, recorded as Instrument No. 63571 on September 6, 1977, in Book 60, Page 521, of Official Records of Eureka County, California, covering the following described property situated in the said County, State of California, Nevada:

State of California, County of Monterey } ss.

AFFIDAVIT — DEATH OF JOINT TENANT

SPACE ABOVE THIS LINE FOR RECORDER'S USE

RECORDING REQUESTED BY Michelle Noble McCain, Esq.
 AFTER RECORDING MAIL TO MICHELLE NOBLE MCCAIN
 Attorney at Law
 137 Central Avenue, Suite 1
 Salinas, CA 93901

167502

CERTIFICATE OF DEATH
STATE OF CALIFORNIA
USE BLACK INK ONLY

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER
3 8 9 2 7 0 0 2 0 0 5

1A. NAME OF DECEDENT—FIRST (GIVEN)	B111	1B. MIDDLE	R.	1C. LAST (FAMILY)	Lohry
4. RACE	White	5. SPANISH/HISPANIC	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	6. DATE OF BIRTH—MONTH, DAY, YEAR	January 8, 1929
8. STATE OF B. CITIZEN OF WHAT	USA	10A. FULL NAME OF FATHER	Tom B. Lohry	10B. STATE OF	NB
12. MILITARY SERVICE?	19 58 to 19 78 <input type="checkbox"/> NONE	13. SOCIAL SECURITY NUMBER		14. MARITAL STATUS	Married
16A. USUAL OCCUPATION	Mechanic	16B. USUAL KIND OF BUSINESS OR INDUSTRY	Military	16C. USUAL EMPLOYER	Dept of The Army
17. NUMBER OF HIGHEST GRADE COMPLETED (1-12 OR COLLEGE 13-17)	12 YRS	18A. RESIDENCE—STREET AND NUMBER ON LOCATION	19195 Karner Rd	18B. CITY	Gastoville
18C. ZIP CODE	95012	18D. COUNTY	Monterey	18E. NUMBER OF YEARS IN THIS COUNTY	25 YRS
18F. STATE OR FOREIGN COUNTRY	CA	18G. PLACE OF DEATH S.D. HAYS Army Community Hospital	198. IN HOSPITAL, SNCRY ONE IP, SN/OR, DOA	199. COUNTY	CA
190. STREET ADDRESS—STREET AND NUMBER ON LOCATION	Gilgine Road	191. CITY	Ft Ord	192. STATE	CA
21. DEATH CAUSED BY: ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C—TYPE OR PHASE	Gilling Road				
22. OTHER PROMINENT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21	Hypertension Diabetes Mellitus				
27A. PHYSICIAN'S NAME AND ADDRESS	M.D. Bruce Carter, M.D. S.B. Hays Army Community Hospital				
27B. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS	M.D. Bruce Carter, M.D. S.B. Hays Army Community Hospital				
27C. PHYSICIAN'S LICENSE NUMBER	654585				
27D. DATE SIGNED	12/15/89				
27E. SIGNATURE OF PHYSICIAN	<i>M.D. Bruce Carter</i>				
27F. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS	M.D. Bruce Carter, M.D. S.B. Hays Army Community Hospital				
27G. DATE SIGNED	12/15/89				
27H. SIGNATURE OF COMMON OR DEPUTY COMMONER	<i>Ernest A. Maggini</i>				
28B. DATE SIGNED	12/15/89				
29. MANNER OF DEATH—specify one: natural, accidental, smoke, homicide, pending investigation or could not be determined	Natural				
30A. PLACE OF INJURY	Gilling Road				
30B. INJURY AT WORK	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
30C. DATE OF INJURY	12/15/89				
31. HOUR					
32. LOCATION (STREET AND NUMBER ON LOCATION AND CITY)	Gilling Road				
33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
34A. PLACE OF FINAL DISPOSITION	Queen of Heaven Cemetery				
34B. PLACE OF FINAL DISPOSITION	Salinas, CA				
34C. DATE OF DEPOSITION	Dec. 19, 1989				
34D. MONTH, DAY, YEAR	1989				
35A. SIGNATURE OF REGISTRAR	<i>Ernest A. Maggini</i>				
35B. LICENSE NUMBER	5131				
35C. DATE OF REGISTRATION	DEC 19 1989				
36A. NAME OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH	Healey Mortuary Inc.				
36B. LICENSE NO	F973				
37. SIGNATURE OF LOCAL REGISTRAR	<i>Ernest A. Maggini</i>				
38. REGISTRATION DATE	DEC 19 1989				
39A. NAME OF FUNERAL TRACT					
39B. CENSUS TRACT					

OFFICE OF THE RECORDER
COUNTY OF MONTEREY

DATED FEB 9 1990
This is to certify that, if bearing the seal of the County Recorder of Monterey County, California, this is a true copy of the document filed or recorded in this office.



Ernest A. Maggini
ERNEST A. MAGGINI
RECORDER
Barbara Lohry
DEPUTY

END OF DOCUMENT

BOOK 3 10 PAGE 0 5 6

FILE 2559 PAGE 661

Exhibit A

Northeast one quarter of the Southeast one quarter, Section 5, Township 30 North, Range 50 East, 40 acres, more or less

Subject to the following:

- (1) Covenants, conditions, restrictions, reservations, easements, rights and/or rights of way of record affecting said county.
- (2) Reserving therefrom an easement of thirty feet in width along all exterior boundaries for ingress and egress with power to dedicate.
- (3) Excepting therefrom and reserving to seller all oil, mineral, and product derived therefrom within or underlying said land.

BOOK 310 PAGE 35
 OFFICIAL RECORDS
 RECORDED AT THE REQUEST OF
Michelle Marie McCann, attorney
 97 JUL 11 PM 1:15
 EUREKA COUNTY NEVADA
 M.N. REBALZATI, RECORDER
 FILE NO. FEES \$9.00

167502

BOOK 310 PAGE 057

