

1 NO. _____

2
3 AFFIDAVIT TERMINATING JOINT TENANCY

4
5 STATE OF NEVADA)
6 COUNTY OF EUREKA) SS

7 CLAIRE M. BOSTIC of Carson City, Nevada and LAURIS KAYE BIALE WHITE, of
8 Eureka, Nevada, both having been first duly sworn, deposes and state as follows: That
9 ALBERT F. BIALE of Eureka, Nevada died at Ely, White Pine County, Nevada on December
10 17, 1999, as evidenced by the attached Certificate Of Death, which is incorporated herein as
11 though fully set forth and made part of this affidavit.

12 That this instrument is for the purpose of terminating the joint tenancy interest of the said
13 ALBERT F. BIALE, created by that certain Joint Tenancy Deed executed on March 28, 1977,
14 Recording Number 62808 on file in the office of the County Recorder in Eureka, Eureka County,
15 Nevada and also found at Book 58, page 420.

16 That the demised property under said Joint Tenancy Deed is more particularly described
17 as follows:

18 An undivided one-half interest in Lot 4, and the North 10 feet of lot 9 of Block 21
19 of the town of Eureka, Nevada.

20 TOGETHER with all improvements situate thereon.

21 IN WITNESS WHEREOF, Affiants have hereunto set their hands on this 30th day of
22 May, 2000.

23 Claire M. Bostic
24 CLAIRE M. BOSTIC

25 Lauris Kaye Biale White
26 LAURIS KAYE BIALE WHITE

27 ///
28 ///
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1 STATE OF NEVADA)
2 COUNTY OF EUREKA) SS

3 On this 30th day of May, 2000, personally appeared before me, a notary public,
4 CLAIRE M. BOSTIC and LAURIS KAYE BIALE WHITE, both of whom are personally known
5 to me and who both acknowledged that they executed the above instrument.

Vera Baumann
NOTARY PUBLIC



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COPIES

STATE OF NEVADA

DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH VITAL STATISTICS

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

99 015011

#81-99

LOCAL FILE NUMBER

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK	1. Albert Ferdinand BIALE			2. December 17, 1999		3a. White Pine	
	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/Emer. Rm. Inpatient (Specify)	
	3b. Ely		3c. William Bee Ririe Hospital		3e. Inpatient		4. Male
	5. White		6. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		7a. 96		7b. 581
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	9a. Nevada		9b. U.S.A.		10. 12		11. Widowed
	13. [REDACTED]		14a. Self employed		14b. Hardware		12. April 10, 1903
	15a. Nevada		15b. Eureka		15c. Eureka		15d. County Road
	15e. Yes		15f. Eureka		15g. Eureka		15h. County Road
PARENTS	16. John B. Biale			17. Laura J. Bonetti			
	18a. Arthur Biale (son)			18b. P.O. Box 248 Eureka, NV, 89316			
DISPOSITION	19a. Cremation		19b. Sunset Crematory		19c. Elko, Nevada		
	20a. [Signature]		20b. 12		20c. 450 Mill Street—P.O. Box 367 Ely, Nevada 89301		
CERTIFIER	21a. [Signature] M.D.			22a. [Signature]			
	21b. 12/22/99		21c. 5:20 P.M.		22b. [Signature]		
	21d. Yousri Gadallah, M.D. 802 Ave E Suite #3 Ely, Nevada 89301			22d. ON			
	23a. Yousri Gadallah, M.D. 802 Ave E Suite #3 Ely, Nevada 89301			23b. 8837			
CAUSE OF DEATH	24a. [Signature]		24b. December 27, 1999		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)						
	PART I (a) CARDIOPULMONARY ARREST		Interval between onset and death				
	(b) Severe Cerebrovascular Accident		Interval between onset and death 4 days				
PART II (c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.		26. No		27. No			
28a. ACC. SUICIDE, HOM. UNDET., OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo., Day, Yr.)		28c. HOUR OF INJURY		28d. DESCRIBE HOW INJURY OCCURRED	
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION. STREET OR R.F.D. No. CITY OR TOWN STATE		28h. STATE	

No.155828

STATE REGISTRAR

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

Date Issued: JUN 12 2000

Yvonne Sylva
State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

BOOK 335 PAGE 022
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Arthur Biale
00 JUN 16 PM 1:08

EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. **174714** FEES \$10.00

COPY

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