

BOOK 433 PAGE 190-193
OFFICIAL RECORDS
RECORDED AT THE OFFICE OF
Citywide Title Service
2006 MAR 21 PM 1:01

EUREKA COUNTY, NEVADA
M.H. REBALEAN, RECORDER
FILE NO. FEES 17⁰⁰

203996

APN 5-070-24

Recording Requested By:

Name Mary Turi

Address 3255 N. Los Coyotes Diag.

City / State / Zip Long Beach, CA 90808

Affidavit-Death of Joint Tenant/Spouse
(Title of Document)

Please complete the cover page, check one of the following and sign below.

☐ I the undersigned hereby affirm that this document submitted for recording does not contain a social security number.

OR

☒ I the undersigned hereby affirm that this document submitted for recording contains a social security number of a person as required by law: 40.525 (Law).

Mary Turi
Signature

Rec'd Office
Title

This page is added to provide additional information required by NRS 111.312 Sections 1-2.
(Additional recording fees applies)
This cover page must be typed or printed.

BOOK 433 PAGE 190

RECORDING REQUESTED BY
SAME AS BELOW
AND WHEN RECORDED MAIL TO:

MARY TURI
3255 N. LOS COYOTES DIAG.
LONG BEACH, CA 90808

Space Above This Line for Recorder's Use Only

A.P.N.: 5-070-24

Order No.:

Escrow No.:

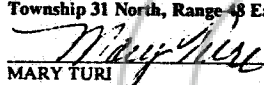
AFFIDAVIT - DEATH OF JOINT TENANT/SPOUSE

STATE OF CALIFORNIA }
 } ss.
COUNTY OF ORANGE }

MARY TURI, of legal age, being first duly sworn, deposes and says:

That JOSEPH TURI, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as JOSEPH TURI named as one of the parties in that certain JOINT TENANCY GRANT DEED dated OCTOBER 17, 1979, executed by RUBY DALTON THOMAS, PRESIDENT to JOSEPH TURI AND MARY TURI, HUSBAND AND WIFE AS JOINT TENANTS, recorded as Instrument No. 70815, on OCTOBER 23, 1979, of Official Records of EUREKA county, NEVADA covering the following described property located in EUREKA County, State of Nevada:

Township 31 North, Range 48 East, M.D.B. & M, Section 35; SW 1/4 of Lot 11 (SW 1/4, SW 1/4, SW 1/4)



MARY TURI

Document Date February 7, 2006

(SEE ATTACHMENT FOR NOTARIZATION)

Subscribed and Sworn to (or affirmed) before me the undersigned, a Notary Public in and
for said County and State, this 17th day of February, 20 06

by Mary Turi

personally known to me or proved to me on the basis of satisfactory evidence to be the
person(s) who appeared before me.

This area for official notarial seal

Witness my hand and official seal.



Signature Michelle Cook

My commission expires: 12.16.07

Notary name: Michelle Cook

Notary phone number: 562.799.1490

Commission number: 1456531

County of principal place of business: Orange, CA

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD
CITY OF LONG BEACH
 DEPARTMENT OF HEALTH AND HUMAN SERVICES
 LONG BEACH, CALIFORNIA

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1 NAME OF DECEDENT - FIRST NAME JOSEPH		2 MIDDLE TURI	
3 LAST NAME TURI		4 DATE OF BIRTH - MONTH DAY YEAR 01/19/1934	
5 SEX M		6 AGE 71	
7 BIRTH STATE/PROVINCE/COUNTRY NJ		8 SOCIAL SECURITY NUMBER 2009	
9 EDUCATION SOME COLLEGE		10 MARITAL STATUS MARRIED	
11 DATE OF DEATH - MONTH DAY YEAR 11/07/2005		12 HOUR OF DEATH 2030	
13 DECEASED'S RACE WHITE		14 YEARS IN OCCUPATION 20	
15 USUAL OCCUPATION OWNER/OPERATOR		16 CONSTRUCTION	
17 USUAL RESIDENCE 3255 LOS COYOTES DIAGONAL		18 CITY LONG BEACH	
19 COUNTY LOS ANGELES		20 ZIP CODE 90808	
21 STATE/PROVINCE/COUNTRY CA		22 INFORMANT'S NAME MARY TURI - WIFE	
23 INFORMANT'S ADDRESS 3255 LOS COYOTES DIAGONAL, LONG BEACH, CA 90808		24 NAME OF SURVIVING SPOUSE - FIRST MARY	
25 MIDDLE A.		26 LAST NAME GALLO	
27 NAME OF FATHER - FIRST PASQUALIE		28 MIDDLE TURI	
29 LAST NAME ITALY		30 NAME OF MOTHER - FIRST LUCIA	
31 MIDDLE CICOLA		32 LAST NAME ITALY	
33 DATE OF DEATH 11/11/2005		34 PLACE OF FINAL DISPOSITION FOREST LAWN MEMORIAL PARK, 4471 LINCOLN AVE. CYPRESS, CA 90630	
35 TYPE OF DISPOSITION BU		36 SIGNATURE OF FURNISHER <i>Lisa Bravante</i>	
37 NAME OF FUNERAL ESTABLISHMENT FOREST LAWN MORTUARY, CYPRESS		38 LICENSE NUMBER FD-1051	
39 DATE OF DEATH 11/07/2005		40 SIGNATURE OF LOCAL REGISTRAR <i>David M. Sexton</i>	
41 PLACE OF DEATH LONG BEACH		42 PLACE OF DEATH LONG BEACH	
43 CAUSE OF DEATH CARDIOPULMONARY ARREST		44 CAUSE OF DEATH PROFOUND ANEMIA	
45 CAUSE OF DEATH METASTATIC PROSTATE CANCER		46 CAUSE OF DEATH CORONARY ARTERY DISEASE	
47 CAUSE OF DEATH PROSTATECTOMY 04/08/2003		48 CAUSE OF DEATH PROSTATECTOMY 04/08/2003	
49 DATE OF DEATH 10/21/1999		50 DATE OF DEATH 10/23/2005	
51 DATE OF DEATH 10/21/1999		52 DATE OF DEATH 10/23/2005	
53 DATE OF DEATH 10/21/1999		54 DATE OF DEATH 10/23/2005	
55 DATE OF DEATH 10/21/1999		56 DATE OF DEATH 10/23/2005	
57 DATE OF DEATH 10/21/1999		58 DATE OF DEATH 10/23/2005	
59 DATE OF DEATH 10/21/1999		60 DATE OF DEATH 10/23/2005	
61 DATE OF DEATH 10/21/1999		62 DATE OF DEATH 10/23/2005	
63 DATE OF DEATH 10/21/1999		64 DATE OF DEATH 10/23/2005	
65 DATE OF DEATH 10/21/1999		66 DATE OF DEATH 10/23/2005	
67 DATE OF DEATH 10/21/1999		68 DATE OF DEATH 10/23/2005	
69 DATE OF DEATH 10/21/1999		70 DATE OF DEATH 10/23/2005	
71 DATE OF DEATH 10/21/1999		72 DATE OF DEATH 10/23/2005	
73 DATE OF DEATH 10/21/1999		74 DATE OF DEATH 10/23/2005	
75 DATE OF DEATH 10/21/1999		76 DATE OF DEATH 10/23/2005	
77 DATE OF DEATH 10/21/1999		78 DATE OF DEATH 10/23/2005	
79 DATE OF DEATH 10/21/1999		80 DATE OF DEATH 10/23/2005	
81 DATE OF DEATH 10/21/1999		82 DATE OF DEATH 10/23/2005	
83 DATE OF DEATH 10/21/1999		84 DATE OF DEATH 10/23/2005	
85 DATE OF DEATH 10/21/1999		86 DATE OF DEATH 10/23/2005	
87 DATE OF DEATH 10/21/1999		88 DATE OF DEATH 10/23/2005	
89 DATE OF DEATH 10/21/1999		90 DATE OF DEATH 10/23/2005	
91 DATE OF DEATH 10/21/1999		92 DATE OF DEATH 10/23/2005	
93 DATE OF DEATH 10/21/1999		94 DATE OF DEATH 10/23/2005	
95 DATE OF DEATH 10/21/1999		96 DATE OF DEATH 10/23/2005	
97 DATE OF DEATH 10/21/1999		98 DATE OF DEATH 10/23/2005	
99 DATE OF DEATH 10/21/1999		100 DATE OF DEATH 10/23/2005	

203996

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CERTIFIED COPY OF VITAL RECORDS

000285558

STATE OF CALIFORNIA
 CITY OF LONG BEACH

SS DATE ISSUED NOV 09 2005

This is a true and exact reproduction of the document officially registered and placed on file in the office of the VITAL RECORDS SECTION, LONG BEACH DEPARTMENT OF HEALTH AND HUMAN SERVICES.

This copy not valid unless prepared on engraved border displaying seal and signature of the Registrar

Darryl M. Sexton, M.D.
 CITY HEALTH OFFICER
 REGISTRAR OF VITAL RECORDS

