

DOC # 0214607

02/12/2010

11:49 AM

Official Record

Recording requested By
GRANT CRUTCHLEYEureka County - NV
Mike Rebaleati - Recorder

Fee: \$15.00

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RPTT:

Recorded By: FES

Book- 497 Page- 0370



0214607

Affidavit-Termination of Joint Tenancy
(Death of a Joint Tenant)

ASSESSOR'S PARCEL NO. (APN#): 01-193-03

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Grant E. Crutchley

Address: P. O. Box 176

City/State/Zip: Eureka, NV 89316

I, Grant E. Crutchley, the Affiant, being of legal age, and being first duly sworn,
deposes and says:That Charlotte Ann Crutchley, the decedent mentioned in the
(Deceased Name as shown on Death Certificate)attached certified copy Certificate of Death, is the same person as Charlotte Crutchley
(Deceased Name as shown on Deed)

named as one of the parties in that certain Grant Bargain and Sale Deed,

dated on the 29th and 11th day of December/February, 1976, and executed by Lenore

Nemyier & Valentine C. Martin known as "Grantor(s)" to Grant and Charlotte Crutchley,

known as "Grantee(s)", as Joint Tenants, and recorded as Instrument No. 0062766 & 0062765, on the

2nd day of March, 1977, in book 58, 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)

All of Block 48, Town of Eureka
(Parcel C File #120758)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 \$ 75,570.00

In Witness Whereof, I/We have hereunto set my hand/our hands this 12 day of Feb, 20 10

(Signature)
GRANT E Crutchley
(Print or type name here)

(Signature)

(Print or type name here)

STATE OF NEVADA

COUNTY OF EUREKA

This instrument was acknowledged before me on (date) February 12, 2010

By (person(s) appearing before notary public) Grant E. Crutchley

(Notary Public)

My Commission expires: July 10, 2010

LADY GOICOECHEA
Notary Public - State of Nevada
Appointment Recorded in Eureka County
No. 94-0329-8 - Expires July 10, 2010

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT

VITAL STATISTICS

Reno, Nevada

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

ROLL 89 IMAGE 403

TYPE OR PRINT IN PERMANENT BLACK INK		LOCAL FILE NUMBER 2561		STATE FILE NUMBER	
DECEASED—NAME First Middle Last 1. Charlotte Ann CRUTCHLEY		DATE OF DEATH (Month, Day, Year) 2. December 4, 1996		COUNTY OF DEATH 3a. Washoe	
CITY, TOWN, OR LOCATION OF DEATH 3b. Reno		HOSPITAL OR OTHER INSTITUTION—Name (if not either, give street and number) 3c. Washoe Care Center		SEX 4. Female	
RACE—(e.g., White, Black, American Indian, etc.) (Specify) 5. White		Was Decedent of Hispanic Origin? Specify Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, specify Mexican, Cuban, Puerto Rican, etc. 6.		AGE—Last Birthday (Years) 7a. 51	
STATE OF BIRTH (if not U.S.A. name country) 9a. Nevada		CITIZEN OF WHAT COUNTRY 9b. U.S.A.		Decedent's Education Specify highest grade completed 10. 13	
SOCIAL SECURITY NUMBER 13.		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) 14a. Secretary		KIND OF BUSINESS OR INDUSTRY 14b. County Government	
RESIDENCE—STATE 15a. Nevada		COUNTY 15b. Eureka		CITY, TOWN, OR LOCATION 15c. Eureka	
FATHER—NAME First Middle Last 16. Angelo Toognoni		MOTHER—MAIDEN NAME First Middle Last 17. Emilia Segura		STREET AND NUMBER 15d. 235 Bullion St.	
INFORMANT—NAME (Type or Print) 18a. Grant Crutchley		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 18b. P.O. Box 176 Eureka, Nevada 89316		INSIDE CITY LIMITS (Specify Yes or No) 15e. Yes	
BURIAL, CREMATION, REMOVAL, OTHER (Specify) 19a. Burial		CEMETERY OR CREMATORY—NAME 19b. Catholic Cemetery		LOCATION City or Town State 19c. Eureka Nevada	
FUNERAL DIRECTOR—SIGNATURE (If Person Acting as Such) 20a.		FUNERAL DIRECTOR LICENSE NUMBER 20b. 16		NAME AND ADDRESS OF FACILITY 20c. 875 West Second Street Reno, Nevada 89503	
To be completed by CERTIFYING PHYSICIAN 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) DATE SIGNED (Mo., Day, Yr.) 21b. 12/4/96		To be completed by Coroner's Office 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) DATE SIGNED (Mo., Day, Yr.) 22b.		HOUR OF DEATH 21c. 0735 22c.	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) 21d.		PRONOUNCED DEAD (Mo., Day, Yr.) 22d. ON		PRONOUNCED DEAD (Hour) 22e. AT	
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) 23a. William O'Neill, M.D. 50 Kirman Ave., Reno, NV. 89502		LICENSE NUMBER 23b. 4832			
REGISTRAR 24a. (Signature) <i>[Signature]</i> Dep		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) 24b. December 5, 1996		DEATH DUE TO COMMUNICABLE DISEASE 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) Metastatic adenocarcinoma to liver DUE TO, OR AS A CONSEQUENCE OF: (b) DUE TO, OR AS A CONSEQUENCE OF: (c)		Interval between onset and death 3-5 minutes			
PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I. End stage renal disease		AUTOPSY (Specify Yes or No) 26. No		WAS CASE REFERRED TO CORONER (Specify Yes or No) 27. No	
ACC., SUICIDE, HOMICIDE, UNDET., OR PENDING INVEST. (Specify) 28a.		DATE OF INJURY (Mo., Day, Yr.) 28b.		HOUR OF INJURY 28c. M	
INJURY AT WORK (Specify Yes or No) 28d.		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify) 28f.		LOCATION 28g.	
		STREET OR R.F.D. No.		CITY OR TOWN STATE	

STATE REGISTRAR

No. 103803

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

Deputy Registrar: *Leticia Lovell*

DEC 11 1996

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT