

**RECORDING REQUESTED BY**  
First American Title Insurance  
Company of Nevada

**AND WHEN RECORDED  
RETURN TO AND MAIL TAX  
STATEMENTS TO:**  
Connie Sue Bethurum  
12 Flor De Mar  
Ranch Santa Margarita, CA 92688

**DOC# 220316**

05/02/2012

03:08PM

**Official Record**

Requested By  
FIRST AMERICAN TITLE ELKO

**Eureka County - NV**

**Mike Rebaleati - Recorder**

Page: 1 of 3 Fee: \$16.00

Recorded By FS RPTT: \$0.00

Book- 0531 Page- 0159



0220316

Space Above This Line for  
Recorder's Use Only

**A.P.N. 002-021-05**

File No.: 151-2422943 (JH)

**Affidavit - Death of Trustee**

State of CALIFORNIA

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)ss.

County of ORANGE

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**Connie Sue Bethurum** ("Declarant") is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

1. **Thomas S. Groh** ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on 12-7-2007 at Vicquerville, CA (city and state of death).
2. Decedent is the same person named as the trustee named in that certain Declaration of Trust dated **May 16, 1992** executed by **Thomas S. Groh and Merrilee J. Groh** as trustor(s) (the "Trust").
3. Decedent as a trustee is the same person who was named as a grantee in that certain **Grant Deed** dated **February 13, 1995** which was recorded as Instrument No. **157915** in Book **282**, Page **544**, of Official Records of **Eureka County, Nevada** as legally described as follows:

**LOT 9 OF BLOCK 6 OF CRESCENT VALLEY RANCH AND FARMS UNIT NO. 1 AS PER MAP  
RECORDED IN SAID COUNTY AS FILE NO. 34081**

4. Declarant is the successor trustee under the Trust. The Trust was in effect at the date of the death of the Decedent and has not been revoked. Declarant has consented to act as trustee under the Trust.

Dated: April 23, 2012

**DECLARANT:**


Connie Sue Bethurum Successor Trustee  
**Connie Sue Bethurum, Successor Trustee**

State of CALIFORNIA                     )  
                                                           )ss  
County of ORANGE                     )

SUBSCRIBED AND SWORN TO (or affirmed) before me the undersigned, a Notary Public in and for said County ORANGE and State California, this April 30 day of April, 20 12 by Connie Sue Bethurum, personally know to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me..

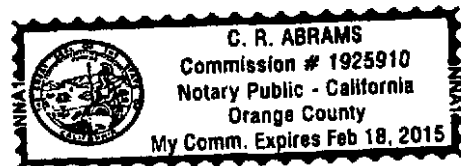
WITNESS my hand and official seal.

*This area for official notarial seal*

Signature 

My Commission Expires: 2/18/15

Notary Name: C. R. ABRAMS Notary Phone: 949-639-0431  
Notary Registration Number: 1925910 County of Principal Place of Business ORANGE



220316

Book: 531 05/02/2012  
Page: 160 2 of 3

# COUNTY of SAN BERNARDINO

DEPARTMENT OF PUBLIC HEALTH  
351 N. MT. VIEW AVENUE, SAN BERNARDINO, CALIFORNIA 92415-0010

## CERTIFICATE OF DEATH

3200736011180

1. NAME OF DECEASED - FIRST (NAME)		2. MIDDLE		3. LAST (Surname)	
THOMAS		S.		GROH	
4. DATE OF BIRTH (month/day/year)					
08/01/1934					
5. AGE (years)					
73					
6. SEX					
M					
8. STATE OF BIRTH		9. SOCIAL SECURITY NUMBER		10. EVER IN U.S. ARMED FORCES?	
OH				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
11. MARRITAL STATUS (at time of death)		12. DATE OF DEATH (month/day/year)		13. HOUR (24 hours)	
WIDOWED		12/04/2007		2250	
14. DECEASED'S RACE		15. YEARS IN OCCUPATION			
CAUCASIAN		30			
16. USUAL OCCUPATION - Type of work for most of life, DO NOT USE RETIRED		17. KIND OF BUSINESS OR INDUSTRY (e.g., poultry, dairy, food distribution, hospital, agency, etc.)		18. YEARS IN OCCUPATION	
TRUCK DRIVER		CONSTRUCTION		30	
19. DECEASED'S RESIDENCE (Street and number or location)					
8301 CRESCENT AVE.					
20. CITY		21. COUNTY		22. STATE	
BUENA PARK		ORANGE		CA	
23. DECEASED'S NAME, RELATIONSHIP					
CONNIE BETHURUM, DAUGHTER					
24. NAME OF SURVIVING SPOUSE - FIRST					
25. MIDDLE					
26. LAST (Surname)					
27. NAME OF FATHER - FIRST					
28. MIDDLE					
29. LAST (Surname)					
30. NAME OF MOTHER - FIRST					
31. MIDDLE					
32. LAST (Surname)					
33. BIRTH STATE					
OH					
34. BIRTH STATE					
OH					
35. DECEASED'S PLACE OF BIRTH		36. PLACE OF FINAL DISPOSITION			
STERLING COMMONS		FOREST LAWN MEMORIAL PARK			
SAN BERNARDINO		4471 LINCOLN AVE., CYPRESS, CA 90630			
37. TYPE OF DISPOSITION		38. SIGNATURE OF REGISTRAR		39. LICENSE NUMBER	
BU		AMY LANERGAN		EMB8927	
40. NAME OF FUNERAL ESTABLISHMENT		41. LICENSE NUMBER		42. SIGNATURE OF LOCAL REGISTRAR	
FOREST LAWN MEMR PRKS & MTYS		ED1051		MARGARET BEED, MD	
43. DATE OF DEATH		44. SIGNATURE OF LOCAL REGISTRAR		45. DATE OF DEATH	
12/07/2007		MARGARET BEED, MD		12/07/2007	
46. PLACE OF DEATH					
STERLING COMMONS					
47. CAUSE OF DEATH					
1. CARDIAC ARREST					
2. CEREBROVASCULAR ACCIDENT					
3. ALZHEIMER'S DEMENTIA					
4. SEIZURE DISORDER DUE TO HISTORY OF MYOCARDIAL INFARCTIONS					
5. OTHER					
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## CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA  
COUNTY OF SAN BERNARDINO

DATE ISSUED Dec 12, 2007

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, SAN BERNARDINO DEPARTMENT OF PUBLIC HEALTH.

ERIC FRYKMAN, M.D.  
COUNTY HEALTH OFFICER  
REGISTRAR OF VITAL STATISTICS

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



220316

Book: 531 05/02/2012  
Page: 161 3 of 3