

APN: 005-010-11; 005-010-29

**Send Tax Statements To:**

Name: Kathleen L. Jones

Address: P.O. Box 927

City, State, Zip: Elko, NV 89803

**Recording Requested By:**

Name: Robert J. Wines, Prof. Corp.

Address: 687 6<sup>th</sup> Street, Suite 1

City, State, Zip: Elko, NV 89801

**DOC # 0229881**

09/25/2015 01:43 PM

**Official Record**

Recording requested By  
ROBERT J WINES

Eureka County - NV  
Sara Simmons - Recorder

Fee: \$15.00 Page 1 of 2

RPTT: Recorded By: LH

Book- 584 Page- 0114



0229881

**Letters of Special Administration - Helen M. Kline**

Pursuant to NRS 141.010, Decedent owns the following real property, located in the County of Eureka, State of Nevada:

005-010-11 - Township 31 North, Range 48 East, Section 5, SE<sup>1</sup>/<sub>4</sub>

005-010-29 - Township 31 North, Range 48 East, Section 17, NW<sup>1</sup>/<sub>4</sub>

**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:

*Robert J. Wines*  
ROBERT J. WINES

\_\_\_\_\_  
Attorney  
Title

IN THE DISTRICT COURT OF THE FOURTH JUDICIAL DISTRICT  
OF THE STATE OF NEVADA, IN AND FOR THE COUNTY OF ELKO

FILED

2015 SEP 17 PM 4:22

ELKO CO DISTRICT COURT

IN THE MATTER OF THE ESTATE OF )  
HELEN M. KLINE, aka HELEN )  
MARIE KLINE, )  
Deceased. )

CASE NO. PR-P1-15-107  
Dept. I

CLERK \_\_\_\_\_ DEPUTY \_\_\_\_\_

LETTERS OF SPECIAL ADMINISTRATION

STATE OF NEVADA )  
: ss.  
COUNTY OF ELKO )

This is to certify that by an order of the named Court made and entered on the 10<sup>th</sup> day of September, 2015, KATHLEEN L. JONES was appointed Special Administrator of the Estate of HELEN M. KLINE, aka HELEN MARIE KLINE, Deceased by virtue, of which these Letters are issued this the 17<sup>th</sup> day of September, 2015; she having duly qualified.

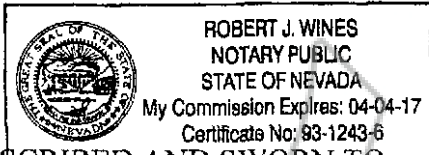
WITNESS my hand and the seal of said Court this 17 day of September, 2015.

CAROL FOSMO, COUNTY CLERK

By: [Signature]  
Deputy Clerk

OATH OF OFFICE

I, KATHLEEN L. JONES, do solemnly swear that I will perform according to law, the duties of Personal Representative of the Estate of HELEN M. KLINE, aka HELEN MARIE KLINE, Deceased.



[Signature]  
KATHLEEN L. JONES

SUBSCRIBED AND SWORN TO  
before me by KATHLEEN L. JONES  
this 17 day of September, 2015.

[Signature]  
NOTARY PUBLIC  
Commission Expires: 4/4/17

CERTIFIED COPY  
DOCUMENT ATTACHED IS A  
TRUE AND CORRECT COPY  
OF THE ORIGINAL ON FILE  
17 day of Sept, 2015

[Signature]

CLERK