

DOC # 0229887

09/28/2015

11:55 AM

Official Record

Recording requested By  
JAMES E GROTH

Eureka County - NV

Sara Simmons - Recorder

Fee: \$41.00

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RPTT:

Recorded By: LH

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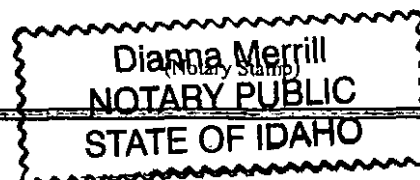
# Affidavit-Termination of Joint Tenancy (Death of a Joint Tenant)

ASSESSOR'S PARCEL NO. (APN#): \_\_\_\_\_

## RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: James E. GrothAddress: 3984 E. 200 N.City/State/Zip: Rigby, ID 83442I, James Everett Groth, the Affiant, being of legal age, and being first duly sworn, deposes and says:That Verna Jean Groth, the decedent mentioned in the  
(Deceased Name as shown on Death Certificate)attached certified copy Certificate of Death, is the same person as Verna Jean Groth  
(Deceased Name as shown on Deed)named as one of the parties in that certain Grant, Bargain and Sale Deed,  
(Type of Document)dated on the 16th day of February, 1983, and executed by  
Claudia Baggett, known as "Grantor(s)" to James E. Groth and Verna J. Groth  
known as "Grantee(s)", as Joint Tenants, and recorded as Instrument No. 87253, on the  
28th day of February, 1983, in book 109, 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)

See Attached

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 \$ 400,000.00In witness Whereof, I/We have hereunto set my hand/our hands this 16 day of Sept, 2015James Everett Groth  
(Signature)  
James Everett Groth  
(Print or type name here)  
(Signature)  
  
(Print or type name here)STATE OF ~~NEVADA~~ IdahoCOUNTY OF ~~EUREKA~~ JeffersonThis instrument was acknowledged before me on (date) September 16, 2015By (person(s) appearing before notary public) James Everett GrothDianna Merrill  
(Notary Public)My Commission expires: 02-23-2016

Township 21 North, Range 54 East, MDB&M

Section 4: Lot 4 (NW1/4NW1/4); SW1/4NW1/4

EXCEPTING THEREFROM Parcel No. 1 as shown on Parcel Map of the W1/2NW1/4 of Section 4, T. 21 N., R. 54 E., MDB&M, filed in the Office of the County Recorder of Eureka County, Nevada, on August 20, 1979 as File No. 69034.

TOGETHER WITH all water, water, rights, rights to the use of water, dams, ditches, canals, pipelines, reservoirs, wells, pumps, pumping stations, and all other means for the diversion or use of water appurtenant to the said land or any part thereof, for irrigation, stockwatering, domestic or any other use.

TOGETHER WITH all improvements situate thereon.

TOGETHER WITH the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.



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**STATE OF IDAHO**  
**CERTIFICATION OF VITAL RECORD**

**STATE OF IDAHO**  
IDAHO DEPARTMENT OF HEALTH AND WELFARE  
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS  
**CERTIFICATE OF DEATH**

Date Filed JUNE 18, 2015

State File No. 2015-05913

DECEDENT - LEGAL NAME <b>VERNA J. GROTH</b>			
SEX <b>FEMALE</b>	SOCIAL SECURITY NUMBER <b>7</b>	AGE <b>75 YEARS</b>	DATE OF BIRTH <b>AUGUST 08, 1939</b>
BIRTHPLACE <b>UCON, IDAHO</b>		PLACE OF RESIDENCE <b>RIGBY, IDAHO</b>	
MARITAL STATUS AT TIME OF DEATH <b>MARRIED</b>		NAME OF SURVIVING SPOUSE (If wife, maiden name) <b>JAMES EVERETT GROTH</b>	WAS DECEDENT EVER IN U.S. ARMED FORCES? <b>NO</b>
FATHER - NAME <b>JOSEPH LEMOND TYLER</b>			BIRTHPLACE <b>IDAHO</b>
MOTHER - MAIDEN NAME <b>LUVENDA HARRIET BARKER</b>			BIRTHPLACE <b>IDAHO</b>
METHOD OF DISPOSITION <b>BURIAL</b>		FUNERAL SERVICE LICENSEE <b>LAINÉ A. ECKERSELL</b>	
NAME AND ADDRESS OF FUNERAL FACILITY <b>ECKERSELL MEMORIAL CHAPEL, RIGBY, IDAHO</b>			
DATE OF DEATH <b>JUNE 09, 2015</b>	TIME OF DEATH <b>8:36 A.M.</b>	CITY, TOWN OR LOCATION OF DEATH <b>IDAHO FALLS, IDAHO</b>	COUNTY OF DEATH <b>BONNEVILLE</b>
CAUSE OF DEATH (underlying cause last) <b>SHOCK</b>			Approximate Interval Between Onset and Death <b>24 HOURS</b>
DUE TO (or as a consequence of): <b>INTRA-ABDOMINAL HEMORRHAGE</b>			<b>24 HOURS</b>
DUE TO (or as a consequence of):			
DUE TO (or as a consequence of):			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above <b>NONE STATED</b>			WAS AN AUTOPSY PERFORMED? <b>NO</b>
MANNER OF DEATH <b>NATURAL</b>	NAME OF CERTIFIER <b>JENNIFER H. EDWARDS, M.D.</b>		TITLE <b>PHYSICIAN</b>
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
<b>EXTERNAL CAUSES ONLY</b>			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			



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This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

**JUNE 18, 2015**

DATE ISSUED:

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

PRNC 07/18/10/13

*James B. Aydelotte*

**JAMES B. AYDELOTTE**  
STATE REGISTRAR

