A.P.N. No.: 002-027-07

Escrow No.: 01415-27030

Recording Requested By:

Stewart Title

Mail Tax Statements To: Same as below
When Recorded Mail To:

Sanders
PO Box 566

Caldwell, ID 83606

EUREKA COUNTY, NV
Rec:\$16.00
\$16.00 Pgs=3 09/08/2017 02:24 PM
STEWART TITLE ELKO
LISA HOEHNE, RECORDER

AFFIDAVIT - DEATH OF JOINT TENANT

State of Idaho)) ss.
County of Canyon)

Fay M. Sanders, of legal age, being first duly sworn, deposes and says. That Martin Richard Sanders, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Martin R. Sanders named as one of the parties in that certain Joint Tenancy Deed dated April 29th, 1977 executed by Cattlemen's Title Guarantee to Martin R. Sanders and Fay M. Sanders, husband and wife as joint tenants with rights of survivorship, recorded as Document No. 62964, on May 5, 1977 in Book 59, Page 70 of Official Records of Eureka County, Nevada, covering the following described property situated in Eureka County, State of Nevada.

Lot 8, Block 2, of CRESCENT VALLEY RANCH & FARMS, UNIT NO. 1, as per map recorded in the office of the County Recorder of Eureka County, Nevada, as File No. 34081.

EXCEPTING THEREFROM all petroleum, oil, natural gas and products derived therefrom, within or underlying said land or that may be produced therefrom, as reserved in deed from SOUTHERN PACIFIC LAND COMPANY to H.I. BUCHENAU and ELSIE BUCHENAU, recorded September 24, 1951 in Book 24, Page 168, Deed Records, Eureka County, Nevada.

APN: 002-027-07

Dated: 4/2/2/

Fay M. Sanders	
State of \mathcal{I}) ss. County of \mathcal{C} any \mathcal{I})	
This instrument was acknowledged before me on	day of <u>Sept 2017</u> .
Signature: The Sold of Signature: State of Idaho, County of Commission Exp! 23 Man	Caryon ch 2018
	NOTAPL ZZ OBLIC



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 01, 20	011			State File No20	11-04797
DECEDENT - LEGAL NAME					
MARTIN RICHARD SAM	NDERS			\ \	÷
SEX	SOCIAL SECURITY NUMBER	AGE	DATE OF BIRTH	/ /	
MALE		89 YEARS	DECEMBER	20, 1921	
BIRTHPLACE			RESIDENCE		
CLARK COUNTY, ILL	INUIS		DWELL, IDAHO	WAS .	DECEDENT EVER IN
MARRIED		NAME OF SURVIVING SPOUSE (If wife, n	naiden name)		DECEDENT EVER IN ARIMED FORCES? ES
FATHER-NAME JOHN WILLIAM SANDE	=PS			BIRTHPLACE	
MOTHER - MAIDEN NAME	- KO			BIRTHPLACE	
NANCY SANDERS	en en la companya de la companya de La companya de la co			MISSOURI	
METHOD OF DISPOSITION CREMATION	FUNERAL SERVI	ICE LICENSEE 6. KRAUSE			
NAME AND ADDRESS OF FUNERAL FACILITY FLAHIFF FUNERAL CI	HAPEL, CALDWELL	., IDAHO	11		
DATE OF DEATH	ME OF DEATH	CITY, TOWN OR LOCATION OF	F DEATH	COUNTY	OF DEATH
MAY 23, 2011	5:30 A.M.	BOISE, IDAH	0 /	ADA	
CAUSE OF DEATH (underlying cause last) a. HEART FAILURE				Approximate in Onset and Des	itarval Between ith
DUE TO (or as a consequence of):			 	9 1LA	
SEVERE CHRONIC OBS	STRUCTIVE PULMO	NARY DISEASE		20 YE.	ARS
DUE TO (or as a consequence of): c.	/ /				
DUE TO (or as a consequence of): d.	The street				
OTHER SIGNIFICANT CONDITIONS CO	NTRIBUTING TO DEATH but no	t resulting in the underlying cause given above			WAS AN AUTOPSY PERFORMED?
ATRIAL FIBRILLATION	ON, SEVERE DEME	NTIA, CLOSTRIDIUM D	IFFICILE COLIT	IS	NO
MANNER OF DEATH NATURAL	N. N. I	OF CERTIFIER DBERT F. SMITH, M.D.		PHYSICIAN	1
HATOKAL		VER SUBSEQUENT CERTIFICATION	IF NECESSARY	THIOTOTAN	
	55,161				
DATE OF INJURY	TIME OF INJUR	EXTERNAL CAUPLS ONLY	PLACE OF INJURY		INJURY AT WORK?
DATE OF INJURY	TIME OF INDOM		PERCEOFINANT		WORK?
LOCATION WHERE INJURY OCCUPATED	WELF				
DESCRIPTION OF HOW INJURY COCUPTED	- (A) * (B)				
10:3					
45.4	() was a				
1/2:	1.68				
		Marije se menerali in direktira di 1900. Marije se Marije	1.AT They		
	3441 10	[[[[[[[[[[[[[[[[[[[[

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

DECEMBER 05, 2011

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

JAMES B. AYDELOTTE STATE REGISTRAR

