APN 003-321-04

Recording requested by: Frankie G. McGuire 155 Bali Street Morro Bay, CA 93442

Mail tax statements to: Frankie G. McGuire 155 Bali Street Morro Bay, CA 93442 EUREKA COUNTY, NV

Rec \$35 00 Total \$35 00

FRANKIE G MCGUIRE

2017-234139

11/29/2017 01:26 PM

Pgs=3

LISA HOEHNE, RECORDER

AFFIDAVIT OF DEATH OF JOINT TENANT

STATE OF) ss COUNTY OF)

On the <u>15</u> day of <u>November</u>, 2017, I, FRANKIE G. MCGUIRE being of lawful age, being duly sworn, state as follows:

On the 17th day of September, 2012, property was conveyed to FRANKIE G. MCGUIRE and DONALD J. HODSON, as joint tenants pursuant to court Order Setting Aside Estate Without Administration; and was recorded on September 24, 2012 with the County Recorder; following described real property, to wit: 1 Parcel of land located in the Crescent Valley Ranch & Farms, situated in the County of Eureka, State of Nevada and legally described as:

LOT 1 OF BLOCK 2 OF CRESCENT VALLEY RANCH & FARMS, UNIT NO. 3, AS PER MAP RECORDED IN SAID COUNTY AS FILE NO. 34551.

A certified copy of the death certificate of DONALD J. HODSON, deceased, issued by the Department of Health for the State of Oregon showing that the deceased joint tenant died on the 31st day of August, 2015, is attached to this affidavit.

Affiant further states that Frankie G. McGuire is the surviving joint tenant in the described property, and that the decedent is one and the same person as the joint tenant/remainderman named in the deed recorded as described above. That the property is now transferred to the surviving joint tenant, Frankie G. McGuire, a married woman, in full as her sole and separate property.

If this Affidavit is signed and acknowledged by the surviving joint tenant, personal representative or duly appointed attorney-in-fact of the surviving joint tenant.

| • • • • | O, |
|---|--|
| DATED this <u>15</u> day of <u>970</u> Frankie G | <u>vember</u> , 2017. |
| (2-1) | which Magazza |
| Frankia C | McCried Account |
| Flankle G | . McGuire, Arriant. |
| A 114 | |
| California STATE OF NEVADA) | |
| STATE OF NEVADA; | |
|)ss | |
| COUNTY OF San Lus) Obispo | |
| | 70.7 1.0 |
| On this 15 day of 100/mber | in the year 20.7 , before me, |
| personally appeared Frankie G. McGuire, personal | ry public in and for the State of Nevada, Californ |
| of satisfactory evidence) to be the person who | nally known to me (or proved on the basis |
| and acknowledged that he/she executed it. I | |
| person whose name is ascribed to this instru | |
| duress, fraud, or undue influence. | ment to be of sound mind and under no |
| duress, rradd, or undue mirdenee. | |
| WITNESS my hand and official seal. My | y Commission Expires: |
|) in the second of the second | Commission Expires. |
| SISSIEN Cusii | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| Notary Public | JESSICA CRESCI |
| | Commission # 2073494 |
| Jessica Cresci | Notary Public - California San Luis Obispo County |
| Printed Name | My Comm. Expires Jul 3, 2018 |
| | |
| 7 / / | |
| | / / |
| | |
| | |
| | F |
| | |

734643

OREGON HEALTH AUTHORITY CENTER FOR HEALTH STATISTICS

136-2015-022211

| . ID TAG NO |) | | CERTIFICATE | OF DEATH | | STATE FILE NUMBER | |
|---|----------------------|--------------|--|--|-----------------------|---------------------------------------|--|
| 4 | irst Donald | Middle J. | Last Hodson | | Suffix | Death Date | |
| 0 | | · · · | - 10 110 131 | · · · · · · · · · · · · · · · · · · · | | August 31, 2015 | |
| Sex | Age | | Social Security Numbe | r . | County of Dea | ath | |
| Male | | 83 years | | | I Marion | | |
| Birthdate | | nplace | Yanana : | / | Was D | ecedent Ever in U.S. Forces? | |
| May 27, 1932 | j no | pewell, I | Karisas | lou et | | No | |
| | | | : . | City/Town | | | |
| 3597 Carmelle Co Residence County | ourt INE | i Ta | 51-4 Fi 0 | Salem | | | |
| • | | | State or Foreign Country | Zip Code + 4: | OF. | Inside City Limits? | |
| Marion Marital Status at Time of | Donth | | Oregon Spause's Name Prior to First | 973 | 005 | Yes | |
| Married | Dealli | | - Table | wamage | N | | |
| Father's Name | | | Anna Paszkowski | Mother's Name Prior to | | | |
| William Hodson | | | | 4 400 | | | |
| Informant's Name | | Telephone | Number Pelationship | Gladys E. Phillips to Decedent Mailing Address | | · · · · · · · · · · · · · · · · · · · | |
| Robert C. Hodson | • | Not Av | | 76. | and the second second | Periob Protein WA 0000 | |
| Place of Death | | HAOLYA | Facility Name | 110127 149 | E Capies Road | , Brush Prairie, WA 98606 | |
| Nursing Facility | | | 76. | Care Center | / / | | |
| Location of Death | | <u></u> | City/Town or Loc | | State | . Zip Code + 4 | |
| 4254 Weathers S | t NE | <u> </u> | ا مُنْ الْمُعَالِينَ الْمُنْ الْمُعَالِينَ الْمُعَالِينَ الْمُعَالِينَ الْمُعَالِينَ الْمُعَالِينَ ا | | Oreg | | |
| Method of Disposition | Pla | ce of Dispos | sition | | Location (City/T | own and State) | |
| Cremation | ŀO | akleaf Cr | rematory | | Salem, Ore | eaon | |
| Name and Complete Add | lress of Funeral Fac | cility | | | 1 | | |
| Virgil T Golden Funeral Service 605 Commercial Street SE, Salem, Oregon 97301 | | | | | | | |
| Date of Disposition | : Fun | eral Directo | r's Signature | | ÓR Lic | ense Number : . | |
| TBD | /> | | William D Blis | is a second | Signed CO- | 3571 | |
| Registrar's Signature | 1.5 | 1 . | | Date Received | Local I | File Number | |
| Jennifer A. Woo | odward | : . | | Septembe | er 02, 2015 | | |
| Amendment | - | \ .:: | | | | | |

45-2CCS (01/06)



I CERTIFY THAT THIS IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORD FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS OR A DELEGATED LOCAL OFFICE.

DATE ISSUED

September 03, 2015

JENNIFER A. WOODWARD, Ph.D. STATE REGISTRAR THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER.

