

APN #: 005-020-16

EUREKA COUNTY, NV

2019-239717

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\$35.00 Pgs=4

11/20/2019 04:10 PM

WESTERN OUTDOOR PROPERTIES, LLC

LISA HOEHNE, CLERK RECORDER

Recording Requested by and Return to:

Debra Phillips Sundberg, Trustee on behalf of

Phillips Family Trust

13916 230th Street Ct East

Graham, WA 98338

Document Title: Affidavit of Death of Trustees

Property Affected:

Real Property in Eureka County, State of Nevada

Legal Description:

Township 31 North, Range 48 East, MDB&M

Section 27: NW ¼ SW ¼

Excepting therefrom all petroleum oil, natural gas and products derived therefrom, within or underlying said land or that may be produced therefrom, all rights thereto, together with the exclusive right at all times to enter upon or in said land to prospect for and to drill, bore, recover and remove the same, as reserved by SOUTHERN PACIFIC LAND CO., in deed recorded September 24, 1951, in Book 24, Page 168, Deed Records, Eureka County, Nevada.

APN # 005-020-16 (+/- 40 Acres)

STATE OF WASHINGTON, COUNTY PIERCE, ss:

1. Debra Phillips Sundberg is over the age of 21 and competent to testify to the matter here within;
2. Anthony R. Phillips, Marshall L. Phillips and Debra Phillips Sundberg, entered into Co-Trustees of the Phillips Family Trust, Established August 11, 1988 on a document titled "Order Setting Aside Estate without Administration" to "Phillips Family Trust" signed on January 06, 1997 in the Seventh Judicial Court of the State Of Nevada, In and for the County of Eureka, and recorded and made

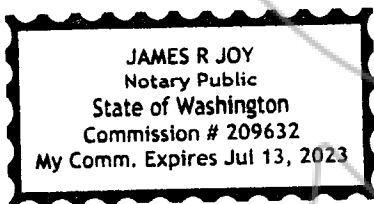
official record on January 08, 1997 as document number 165877 regarding 40 Acres in Eureka, NV described in this agreement (005-020-16).

3. On January 12, 2013 at 0020 Mr. Anthony R. Phillips was declared deceased as evidenced by the attached certified copy of the death certificate issued by California State Department of Health as Local No. 3201344000087 state file No. 3052013009189. The death certificate is a certified copy as evidenced by bar code # 000390669 and issued on October 21, 2019.
4. On March 02, 2013 at 1100 Mr. Marshall L. Phillips was declared deceased as evidenced by the attached certified copy of the death certificate issued by California State Department of Health, Santa Cruz County, CA as Local No. 3201344000342, state file No. 3052013046518. The Certificate of Death is a certified copy as evidenced by bar code # 000390668 and issued on October 21, 2019.
5. I, Debra Phillips Sundberg, according to the terms in the Phillips Family Trust, dated August 11, 1988, am the sole surviving Trustee named in the Phillips Family Trust, and possess all powers granted there within to act as sole Trustee.

Signed: Debra Phillips Sundberg Date: 11-06-2019
Debra Phillips Sundberg

STATE OF WASHINGTON, COUNTY OF Pierce, ss:

This instrument was acknowledged before me on this 6 day of November, 2019 by Debra Phillips Sundberg Trustee on behalf of The Phillips Family Trust.



Jim Joy
Notary Public

Signature of person taking acknowledgment

James Joy Notary Public

Title (and Rank)

My commission expires 7/13/23

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SANTA CRUZ

SANTA CRUZ, CALIFORNIA

3052013009189

CERTIFICATE OF DEATH

3201344000087

Form containing fields for decedent's personal data, usual residence, informant, spouse and parent information, funeral director, place of death, cause of death, physician's certification, and coroner's use only.



CERTIFIED COPY OF VITAL RECORDS STATE OF CALIFORNIA, COUNTY OF SANTA CRUZ

This is a true and exact reproduction of the document officially registered and placed on file in the OFFICE OF THE SANTA CRUZ COUNTY RECORDER.

Sean Saldivia SEAN SALDIVIA COUNTY RECORDER

DATE ISSUED October 21, 2019 BY DEPUTY

PHONE (805) 687

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF SANTA CRUZ
SANTA CRUZ, CALIFORNIA

3052013046518 STATE FILE NUMBER
3201344000342 LOCAL REGISTRATION NUMBER
CERTIFICATE OF DEATH
1. NAME OF DECEDENT: MARSHALL
2. MIDDLE: LEWIS
3. LAST FAMILY: PHILLIPS
4. DATE OF BIRTH: 11/25/1953
5. AGE Yrs: 59
6. UNDER ONE YEAR: 59
7. UNDER NINETY: 59
8. SEX: M
9. BIRTH STATE/FOREIGN COUNTRY: CALIFORNIA
10. SECURITY NUMBER: [REDACTED]
11. EVER IN U.S. ARMED FORCES? [X] YES [] NO
12. MARITAL STATUS: DIVORCED
13. EDUCATION: SOME COLLEGE
14. WAS DECEDENT HISPANIC/LATINO/SPANISH? [X] YES [] NO
15. DECEDENT'S RACE: CAUCASIAN
16. USUAL OCCUPATION: CASHIER
17. KIND OF BUSINESS OR INDUSTRY: SUPERMARKET
18. YEARS IN OCCUPATION: 26
19. RESIDENCE: 1704 LOTTMAN DRIVE
20. CITY: SANTA CRUZ
21. COUNTY: SANTA CRUZ
22. ZIP CODE: 95062
23. YEARS IN COUNTY: 50
24. STATE/FOREIGN COUNTRY: CALIFORNIA
25. INFORMANT'S NAME: MICHELLE PHILLIPS, DAUGHTER
26. INFORMANT'S RELATIONSHIP: DAUGHTER
27. INFORMANT'S MAILING ADDRESS: 1704 LOTTMAN DRIVE, SANTA CRUZ, CA 95062
28. NAME OF SURVIVING SPOUSE: NONE
29. MIDDLE: -
30. LAST BIRTH NAME: -
31. NAME OF FATHER: RALPH JUNIOR
32. MIDDLE: JUNIOR
33. LAST: PHILLIPS
34. BIRTH STATE: IOWA
35. NAME OF MOTHER: MARILYN
36. MIDDLE: ELETHA
37. LAST: ANDERSON
38. BIRTH STATE: IOWA
39. DATE OF DEATH: 03/11/2013
40. PLACE OF DEATH: SANTA CRUZ MEMORIAL PARK, 1927 OCEAN STREET, SANTA CRUZ, CA 95060
41. TYPE OF DISPOSITION: CR/BU
42. SIGNATURE OF EMBALMER: JOSEPH SMITH
43. LICENSE NUMBER: EMB9054
44. NAME OF FUNERAL ESTABLISHMENT: SANTA CRUZ MEMORIAL
45. LICENSE NUMBER: FD1476
46. SIGNATURE OF LOCAL REGISTRAR: LISA B HERNANDEZ, MD, MPH
47. DATE: 03/06/2013
101. PLACE OF DEATH: RESIDENCE
102. COUNTY: SANTA CRUZ
103. FACILITY ADDRESS OR LOCATION WHERE FOUND: 1704 LOTTMAN DRIVE
104. CITY: SANTA CRUZ
105. CAUSE OF DEATH: (A) CARDIAC ARREST
106. IMMEDIATE CAUSE: 5 MIN
107. MYOCARDIAL INFARCTION: 10 MIN
108. CORONARY ARTERY DISEASE: YRS
109. HYPERTENSION: YRS
110. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH: OBSTRUCTIVE SLEEP APNEA, MORBID OBESITY
111. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 110? NO
112. FEMALE, PREGNANT IN LAST YEAR? NO
113. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE PLACE AND DATE STATED BY THE CORONER OR DEPUTY CORONER.
114. DATE OF DEATH: 03/11/2013
115. SIGNATURE AND TITLE OF CERTIFIER: JACK ROBERT WATSON M.D.
116. LICENSE NUMBER: A65310
117. DATE: 03/06/2013
118. TYPE AFTER DEATH: JACK ROBERT WATSON M.D., 550 WATER STREET SUITE A, SANTA CRUZ, CA 95060
119. MANNER OF DEATH: Natural
120. INJURED AT WORK? NO
121. PLACE OF INJURY: NONE
122. DESCRIBE HOW INJURY OCCURRED: NONE
123. LOCATION OF INJURY: NONE
124. SIGNATURE OF CORONER/DEPUTY CORONER: [REDACTED]
125. DATE: 02/25/2013
126. TYPE NAME, TITLE OF CORONER/DEPUTY CORONER: [REDACTED]



CERTIFIED COPY OF VITAL RECORDS
STATE OF CALIFORNIA, COUNTY OF SANTA CRUZ

* 000390668 *

This is a true and exact reproduction of the document officially registered and placed on file in the OFFICE OF THE SANTA CRUZ COUNTY RECORDER.

DATE ISSUED: October 21, 2019 BY: Sean Saldavia, DEPUTY COUNTY RECORDER

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE