APN # 005-410-28

Prepared & recorded by:

Lawrence Benjamin Scott Jr. 3380 South 4<sup>th</sup> Avenue, #96 Yuma, AZ 85365 (Grantor)

When recorded mail to:

Lawrence Benjamin Scott Jr. & Craig Scott 3380 South 4<sup>th</sup> Avenue, #96 Yuma, AZ 85365 (Grantee) EUREKA COUNTY, NV LAND-AFF Rec:\$37.00

Total:\$37.00

2020-240101 02/24/2020 08:52 AM

Pgs=2

LAWRENCE BENJAMIN SCOTT JR



LISA HOEHNE, CLERK RECORDER

F99

## AFFIDAVIT OF DEATH OF JOINT TENANT

Exempt: NRS 375.090.10 (Transfer on death of joint tenant)

LAWRENCE BENJAMIN SCOTT JR. aka L.B. SCOTT, JR., of legal age, being duly sworn, deposes and says:

- 1. NORMA LEE SCOTT aka NORMA L SCOTT is the decedent mentioned in the certified Certificate of Death attached hereto.
- 2. At the time of the decedent's death, decedent held interest in, as a joint tenant with right of survivorship, of a parcel of real property in Eureka County, Nevada legally described as:

The Southwest quarter of Section 35, Township 29 North, Range 48 East, M.D.B. & M., as per government survey.

RESERVING THEREFROM an easement of 30 feet along all boundaries for ingress and egress, with power to dedicate.

- 3. Decedent acquired interest in the above described property by the following instrument: Deed recorded with the office of the County Recorder of Eureka County, Nevada on September 1, 1966 bearing file number 42541, Book 12, Page 027.
- 4. I am decedent's widower. I am the surviving joint tenant with right of survivorship under the deed described above.

In witness whereof, I hereby set my hand this 12 day of FEB, 2020:

awrence Benjamin Šcott Jr

Grantor

STATE OF ARIZONA COUNTY OF YUMA

The foregoing instrument was acknowledged before me this 12 day of February 2020 by Lawrence Benjamin Scott Jr.

Notary Public - Arizona
Vurna County
Vurna County
Wy Commission Expires
December 5, 2023
Commission # 575363

July W Notary Public

**ORIGINAL** 

## STATE OF ARIZONA DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS

State File Number

STATE COPY	CERTIFICA	TE OF DEATH	OI THAT RECO	102-2019-006480	
1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX)		2. AKA'S (IF AN)	0	3. DATE OF DEATH	
NORMA, LEE, SCOTT	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of kanalis	1	01/29/2019	
4 SEX 5. SOCIAL SECURITY	NUMBER	6. DATE OF BIRTH	7. A		
EFAAALE		20/08/4687			
8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH		03/29/1927	191.	YEARS	
				<b>三型新洲</b>	
9 PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY N	IAME/ADDRESS)				
	A CONTROL OF THE CONT		AND THE RESERVE TO THE PARTY OF		
RESIDENCE - 3380 S 4TH AVENUE #SPACI	E96 11. MARITAL STATUS	1 12	NAME OF SURVIVING SPOUSE	PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE,	
		LAS	LAST, SUFFIX)		
HINTON, OKLAHOMA  13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, C	MARRIED	LA\	LAWRENCE, B., SCOTT		
3380 S 4TH AVENUE #SPACE96, YUMA, YU					
14. DECEDENT S RISCANIC CONTROL OF THE PROPERTY OF THE PROPERT	15. DECEDENT'S RACE(8)	**************************************	18.	EVER IN ARMED FORCES	
		I7. OCCUPAT		OCCUPATION.	
NO NOT CRANICULI ISCRANICI ATINO	\A.T. UTTE		1 11	MEMAKER	
NO, NOT SPANISH/HISPANIC/LATINO  18. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX)	WHITE	19 MOTHER'S NAME	and the state of t	AGE (FIRST, MIDDLE, LAST, SUFFIX)	
- Barana - B					
JAMES, NEWTON, LEWIS  20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	FERN, DAISY, B	URCH	21. RELATIONSHIP	
	3a. 4 Bro		V   /		
LAWRENCE, B., SCOTT 22. INFORMANT'S MAILING ADDRESS				SPOUSE	
3380 S 4TH AVENUE #SPACE96, YUMA, AZ 23. NAME AND ADDRESS OF FUNERAL FACILITY OF RESPONSIBLE	7, 85365	24 SIMISPAL DIRECTO	R'S NAME OR RESPONSIBLE P	ERSON 25. LICENSE NUMBER	
NATIONAL CREMATION SOCIETY				20. LIGENSE NOMBEN	
4460 E THOMAS ROAD, PHOENIX, AZ, 850 26. METHOD(S) OF DISPOSITION 27. NAME AND LOC	18 ATION OF 1ST DISPOSITION FACT	JEFFERY, , MAF	RSHALL NAME AND LOCATION OF 2ND I	F1031	
	N MEMORIAL PARK		NAME AND LOCATION OF 2ND	DISPOSITION FACILITY	
CREMATION YUMA, AZ, US	3			And the Miller Country of the Countr	
29. A. IMMEDIATE CAUSE OF DEATH		Alexander (Company)	1. 1874 i 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	30. APPROXIMATE INTERVAL	
				1975 ) 1876   1876   1876   1876   1876   1876   1876   1876   1876   1876   1876   1876   1876   1876   1876   1876	
RESPIRATORY FAILURE  31. B. DUE TO OR AS A CONSEQUENCE OF:				01/29/2019 32. APPROXIMATE INTERVAL	
ATHEROSCLEROTIC HEART DISEASE  33. C. DUE TO OR AS A CONSEQUENCE OF:	Maria Maria		Marianton Marianton	UNKNOWN  34. APPROXIMATE INTERVAL	
	Charles Programme		AND THE PROPERTY OF THE PROPER	34. AFFROMINATE INTERVAL	
CHRONIC OBSTRUCTIVE PULMONARY DISEASE 35. D. DUE TO OR AS A CONSEQUENCE OF:		/_/_		UNKNOWN  36, APPROXIMATE INTERVAL	
33. 5. BOE TO ON AS A CONSEQUENCE OF		a via via		36. APPROXIMATE INTERVAL	
And the second s	and the second s				
37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DE	ATH BUT NOT RESULTING IN TH	E 38. INJURYX	39, INJURY AT WORK?	40. MANNER OF DEATH	
UNDERLYING CAUSE GIVEN IN PART I:					
		NO 41. TIME OF DEAT	TH 42. WAS AN AUTOPSY	NATURAL, DEATH  43. WERE AUTOPSY FINDINGS AVAILABLE	
			PERFORMED?	TO COMPLETE THE CAUSE OF DEATH?	
		10:31 AM	NO		
TO THE DEST OF INVADINGENERAL 44, NAMI	E OF PERSON COMPLETING CAU	SE OF DEATH		45. DATE CERTIFIED	
TO THE BEST OF MY KNOWLEDGE, THE INFORMATION ABOVE IS CORRECT AND THE DEATH OCCURRED DUE	M EAVAD			04/20/2040	
TO THE CAUSE(S) AND MANNER STATED. WISSA 46, CERTIFIER'S ADDRESS	M, FAYAD	ede oproekt		01/29/2019	
1025 W 24TH STREET #15, YUMA, AZ, 8536		A STATE OF THE STA			
Date Registered 03/13/2010		1.08/80/0045		1000	

J0941572



This is a true certification of the facts on file with the Arizona Department of Health Services, Bureau of Vital Records, PHOENIX, ARIZONA.
Revised 07/2016

KRYSTAL COLBURN ASSISTANT STATE REGISTRAN

ARIZONA DEPARTMENT OF HEALTH SERVICES

This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency.