

APN # 005-410-28

EUREKA COUNTY, NV
LAND-AFF
Rec:\$37.00
Total:\$37.00

2020-240101
02/24/2020 08:52 AM
Pgs=2

Prepared & recorded by:
Lawrence Benjamin Scott Jr.
3380 South 4th Avenue, #96
Yuma, AZ 85365
(Grantor)

LAWRENCE BENJAMIN SCOTT JR



LISA HOEHNE, CLERK RECORDER E99

When recorded mail to:
Lawrence Benjamin Scott Jr. &
Craig Scott
3380 South 4th Avenue, #96
Yuma, AZ 85365
(Grantee)

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:

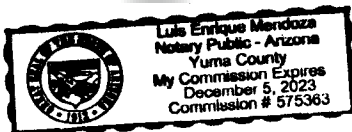
1. NORMA LEE SCOTT aka NORMA L SCOTT is the decedent mentioned in the certified Certificate of Death attached hereto.
2. At the time of the decedent's death, decedent held interest in, as a joint tenant with right of survivorship, of a parcel of real property in Eureka County, Nevada legally described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

Lawrence Benjamin Scott Jr.
Lawrence Benjamin Scott 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.



Luis Enrique Mendoza
Notary Public

STATE OF ARIZONA

CERTIFICATION OF VITAL RECORD

ORIGINAL
STATE COPY

STATE OF ARIZONA DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS CERTIFICATE OF DEATH

State File Number
102-2019-006480

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX) NORMA, LEE, SCOTT		2. AKA'S (IF ANY)		3. DATE OF DEATH 01/29/2019	
4. SEX FEMALE		5. SOCIAL SECURITY NUMBER [REDACTED]		6. DATE OF BIRTH 03/29/1927	
7. AGE 91 YEARS		8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH YUMA, YUMA, 85365			
9. PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY NAME/ADDRESS) RESIDENCE - 3380 S 4TH AVENUE #SPACE96					
10. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) HINTON, OKLAHOMA		11. MARITAL STATUS MARRIED		12. NAME OF SURVIVING SPOUSE PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) LAWRENCE, B., SCOTT	
13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, COUNTY, STATE, ZIP) 3380 S 4TH AVENUE #SPACE96, YUMA, YUMA, AZ, 85365					
14. DECEDENT'S HISPANIC ORIGIN(S) NO, NOT SPANISH/HISPANIC/LATINO		15. DECEDENT'S RACE(S) WHITE		16. EVER IN ARMED FORCES? NO	
17. OCCUPATION HOMEMAKER		18. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX) JAMES, NEWTON, LEWIS			
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) FERN, DAISY, BURCH		20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX) LAWRENCE, B., SCOTT			
21. RELATIONSHIP SPOUSE		22. INFORMANT'S MAILING ADDRESS 3380 S 4TH AVENUE #SPACE96, YUMA, AZ, 85365			
23. NAME AND ADDRESS OF FUNERAL FACILITY OR RESPONSIBLE PERSON NATIONAL CREMATION SOCIETY 4460 E THOMAS ROAD, PHOENIX, AZ, 85018		24. FUNERAL DIRECTOR'S NAME OR RESPONSIBLE PERSON JEFFERY, MARSHALL		25. LICENSE NUMBER F1031	
26. METHOD(S) OF DISPOSITION CREMATION		27. NAME AND LOCATION OF 1ST DISPOSITION FACILITY DESERT LAWN MEMORIAL PARK CREMATOR YUMA, AZ, US		28. NAME AND LOCATION OF 2ND DISPOSITION FACILITY	
29. A. IMMEDIATE CAUSE OF DEATH RESPIRATORY FAILURE				30. APPROXIMATE INTERVAL 01/29/2019	
31. B. DUE TO OR AS A CONSEQUENCE OF: ATHEROSCLEROTIC HEART DISEASE				32. APPROXIMATE INTERVAL UNKNOWN	
33. C. DUE TO OR AS A CONSEQUENCE OF: CHRONIC OBSTRUCTIVE PULMONARY DISEASE				34. APPROXIMATE INTERVAL UNKNOWN	
35. D. DUE TO OR AS A CONSEQUENCE OF:				36. APPROXIMATE INTERVAL	
37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I:			38. INJURY? NO		39. INJURY AT WORK? NO
			40. MANNER OF DEATH NATURAL DEATH		
			41. TIME OF DEATH 10:31 AM		42. WAS AN AUTOPSY PERFORMED? NO
			43. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?		
TO THE BEST OF MY KNOWLEDGE, THE INFORMATION ABOVE IS CORRECT AND THE DEATH OCCURRED DUE TO THE CAUSE(S) AND MANNER STATED.		44. NAME OF PERSON COMPLETING CAUSE OF DEATH WISSAM, FAYAD			45. DATE CERTIFIED 01/29/2019
46. CERTIFIER'S ADDRESS 1025 W 24TH STREET #15, YUMA, AZ, 85364					

Date Registered: 02/12/2019

Date Issued: 02/26/2019

VS-49 Rev. 12/2017



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
**KRYSTAL COLBURN
ASSISTANT STATE REGISTRAR**



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.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE