

EUREKA COUNTY, NV
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06/27/2023 08:23 AM
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GERBER LAW OFFICES, LLP



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KATHERINE J. BOWLING, CLERK RECORDER

Mail Tax Statements to:

Karen W. Haslett
324 Garden Lilly Lane
Summerville, South Carolina 29485

When Recorded Return to:

GERBER LAW OFFICES, LLP
491 4th Street
Elko, Nevada 89801

AFFIDAVIT OF SUCCESSOR CO-TRUSTEE

I, the undersigned, hereby affirm that this document submitted for recording **does** contain a Social Security number of at least one person, as required by law. Legal requirement cited in the following specific statute: NRS 440.380(1)(a).



ZACHARY A. GERBER, ESQ.

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491 4th Street
Elko, Nevada 89801

AFFIDAVIT OF SUCCESSOR CO-TRUSTEE

I, KAREN W. HASLETT, the undersigned, affirm under penalty of perjury under the law of the State of Nevada that the following is true and correct:

(1) By instrument dated November 18, 2005, and all amendments thereto, CECILIA K. ANCHOR executed THE CECILIA K. ANCHOR TRUST as Trustor and Co-Trustee.

(2) MARY ELIZABETH VILLAREAL was also named as Co-Trustee of THE CECILIA K. ANCHOR TRUST.

(3) Said trust appointed KAREN W. HASLETT, to serve as successor Co-Trustee upon the death or incapacity of Co-Trustee CECILIA K. ANCHOR.


(4) CECILIA K. ANCHOR died on June 12, 2020, in Frederick County, Maryland. A certified copy of the Death Certificate of said Decedent is attached to this Affidavit as Exhibit "A" and made a part hereof.

(5) Pursuant to the terms of the Trust, I have assumed the responsibilities of successor Co-Trustee.

(6) I am authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as the successor Co-Trustee with MARY ELIZABETH VILLAREAL with

respect to the trust's interest in real property and all assets of THE CECILIA K. ANCHOR TRUST,
dated November 18, 2005.

Executed on this 30 day of March, 2023, at The Bank of SC.


KAREN W. HASLETT, Successor Co-
Trustee of THE CECILIA K. ANCHOR
TRUST, dated November 18, 2005

STATE OF South Carolina
: ss.
COUNTY OF Dorchester

On this 30 day of March, 2023, personally appeared before me, a Notary
Public, KAREN W. HASLETT, Successor Co-Trustee of THE CECILIA K. ANCHOR TRUST,
dated November 18, 2005, who acknowledged to me that she executed the foregoing instrument.



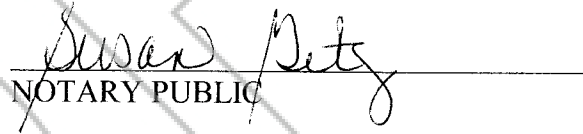

NOTARY PUBLIC

EXHIBIT A

COPY

EXHIBIT A

CERTIFICATION OF VITAL RECORD

VIEW PRESENCE OF WATERMARK HOLD TO LIGHT TO VIEW

STATE OF MARYLAND

**Maryland Department of Health
Division of Vital Records**

320200270940000

Certificate of Death

File Number *32020MD027093*

1. Decedent's Name, AKA Name (if any) CECILIA ANCHOR CECILIA KENLY ANCHOR		2. Date of Death 06/12/2020	3. Time of Death 0145
4a. Facility Name EDENTON ASSISTED LIVING		4b. City, Town or Location of Death FREDERICK	4c. County of Death FREDERICK
5. Social Security Number [REDACTED]	6. Sex F	7. Age 94 YR	8. Date of Birth 11/26/1925
9. Birthplace VIRGINIA		10a. State MARYLAND	
10b. County MONTGOMERY		10c. City, Town or Location ROCKVILLE	
10e. Address 1 PACA PLACE			10d. Inside City Limits? YES
10f. Zip Code 20852			
11. Marital Status WIDOWED (AND NOT REMARRIED)	12. Ever in U.S. Armed Forces? NO	13. Hispanic Origin? NO	14. Race WHITE
15. Decedent's Education HS OR GED		16a. Decedent's Usual Occupation BUDGET ANALYST	16b. Business/Industry US FEDERAL GOVERNMENT
17. Father's Name THEODORE KENLY		18. Mother's Name Prior to First Marriage EVA MARTIN	
19. Surviving Spouse's Name			
20a. Informant's Name KAREN HASLETT		20b. Informant's Relationship DAUGHTER	20c. Informant's Mailing Address 1 PACA PLACE, ROCKVILLE, MARYLAND 20852
21a. Method of Disposition CREMATION	21b. Place of Disposition STAUFFER CREMATORY, INC.	21c. Date of Disposition 06/18/2020	21d. Location 1621 OPOSSUMTOWN PIKE, FREDERICK, MARYLAND 21702
22a. Signature of Funeral Service Licensee SHAWN MICHAEL JOHNSON		22b. License No MD1473	22c. Name and Address of Funeral Facility STAUFFER FUNERAL HOMES, P.A. 1621 OPOSSUMTOWN PIKE, FREDERICK, MD 21702
23a. Part I. Disease, injuries, or complications that directly caused the death DEMENTIA			Approximate Interval Between Onset and Death 8 YEARS
Immediate Cause (final disease or condition resulting in death) a. Due to (or as a consequence of):			
Conditions, if any, leading to immediate cause b. Due to (or as a consequence of):			
c. Due to (or as a consequence of):			
d. Due to (or as a consequence of):			
Part II. Other significant conditions contributing to death but not resulting in the underlying cause in Part I CARDIOMYOPATHY			23b. Did tobacco use contribute to the cause of death? NO
24a. Was an autopsy performed? NO	24b. Were autopsy findings available prior to completion of cause of death? NO	25a. Was case referred to medical examiner? NO	25b. Medical Examiner Countersignature
26. Place of Death NURSING HOME/LTC		27. Manner of Death NATURAL	28a. Date of Injury
			28b. Time of Injury
28c. How injury occurred		28d. Injury at work?	28e. Transportation Injury?
		28f. Place of injury	
28g. Location of Injury			
29a. Certifier Type CERTIFYING PHYSICIAN		29b. Signature and Title of Certifier HEMEN P SHAH, MD	29c. License No D60417
			29d. Date signed 06/17/2020
30a. Name of person who completed cause of death HEMEN PINAKIN SHAH		30b. Address of person who completed cause of death 65 THOMAS JOHNSON DR C, FREDERICK, MARYLAND 21702	
For Office Use Only:			
31. Date Filed 06/17/2020	32. Registrar at Filing CRYSTAL D. WEAVER	33. Date Issued 06/23/2020	34. This is to certify that this is a true and correct copy of the official record on file in the office of the Maryland Division of Vital Records. Registrar's Signature <i>Crystal D. Weaver</i>

4134756

DO NOT ACCEPT UNLESS ON SECURITY PAPER WITH SEAL OF VITAL RECORDS CLEARLY EMBOSSED.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

