

APN: 001-159-01

EUREKA COUNTY, NV
LAND-ANT
Rec.\$37.00
Total:\$37.00
REBECCA GIBSON

2023-251331
11/29/2023 04:15 PM
Pgs=4

When Recorded, Mail to:
Rebecca Gibson
10225 Grizzly Hill Court
Reno, NV 89521



AFFIDAVIT OF DEATH AND OF PERSONAL REPRESENTATIVE OF SURVIVING JOINT TENANT

STATE OF NEVADA)
) SS
COUNTY OF WASHOE)

JOHN G. BIGRIGG, Deceased, by and through his court-appointed Personal Representative, REBECCA GIBSON, In the Matter of the Estate of: JOHN GEORGE EDMUND BIGRIGG, Second Judicial District Court, Washoe County, Nevada, Case No. PR22-00848, hereby swears under penalty of perjury that the following assertions are true of his own knowledge:

1. I am over the age of twenty-one (21) years and competent to be a witness as to the matters stated.
2. I am REBECCA GIBSON, the Personal Representative of the Estate of John G. Bigrigg who was surviving joint tenant and the person named as a grantee in that certain Quitclaim Deed recorded as Book 530, Page 0053, of the official records in the office of the County Recorder of Eureka County, State of Nevada.
3. The property which is the subject of the above-described Deed is located in the County of Eureka, State of Nevada, and is more particularly described as follows:

All that real property situate within a portion of the Northwest One-Quarter (NW1/4) of Section Twenty-Four (24), Township Nineteen (19) North, Range Fifty-Three (53) East, Mount Diablo Meridian (M.D.M.), County of Eureka, State of Nevada, being a portion of Edwards Street as shown on the Plat of the Townsite of Eureka Nevada as approved by the United States Department of the Interior, General Land Office on November 19, 1937 and recorded as Document Number 127447 in the Official Records of the County of Eureka, State of Nevada, more particularly described as follows:

BEGINNING at the northwest corner of Block 51 of said Plat;

THENCE southerly along the westerly line of said Block 51, South 08°33'00" East, 230.57 feet, to the southwest corner of said Block 51;

THENCE leaving said line, westerly along a line towards the southeast corner of Block 64 of said Plat, South 81°27'00" West, 24.46 feet, to a point on the centerline of said Edwards Street;

THENCE northerly along said centerline, North 08°33'00" West, 230.57 feet, to a point on the line between the northeast corner of said Block 64 and the northwest corner of said Block 51;

THENCE easterly along said line, North 81°27'00" East, 24.46 feet, to the **POINT OF BEGINNING** and the end of this description.

Containing 5,659 square feet, more or less.

RESERVING therefrom, the westerly 20.00 feet of the above described real property, an easement for public access and public utility purposes.

The Basis of Bearings for this description is identical to that of the said Plat of the Townsite of Eureka.

Together, with all tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or

appertaining, and any reversions, remainders, rents, issues, and profits thereof.

which has the address of 521 S. Edwards Street, Eureka, NV 89316.


4. CAROL L. BIGRIGG was one of the grantees named in said Deed and is the identical person named as CAROL L. BIGRIGG, the Decedent, in that certain Certificate of Death, a certified copy of which is attached as Exhibit "1" and incorporated by reference as if fully set forth at this point. I am CAROL L. BIGRIGG'S niece and the Personal Representative of JOHN G. BIGRIGG'S estate who was Carol Bigrigg's husband.

5. As recited in the above-described Certificate of Death, CAROL L. BIGRIGG died on February 19, 2021, in Reno, Washoe County, Nevada.

DATED this 22 day of November, 2023.


REBECCA GIBSON, Personal Representative

Subscribed and sworn to before me
on this 22nd day of November, 2023.


Notary Public



STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
VITAL STATISTICS

CASE FILE NO. 4198858

CERTIFICATE OF DEATH

2021004945
STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK	1a. DECEASED NAME (FIRST, MIDDLE, LAST, SUFFIX) Carol Lee BIGRIGG		2. DATE OF DEATH (Mo/Day/Year) February 19, 2021		3a. COUNTY OF DEATH Washoe	
	3b. CITY, TOWN, OR LOCATION OF DEATH Reno		3c. HOSPITAL OR OTHER INSTITUTION - Name (If not either, give street or number) St Mary's Regional Medical Center		3d. If Hosp. or Inst. Indicate DOA, OP, Emer. Rm. (Optional) (Specify) Intensive Care Unit (ICU)	
PRECEDENT	5. RACE (Specify) White		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE - Last birthday (Years) 72	
	9a. STATE OF BIRTH (If not US/CA name country) Texas		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 12	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	13. SOCIAL SECURITY NUMBER [REDACTED]		14a. USUAL OCCUPATION (Give kind of work done during most of)		14b. KIND OF BUSINESS OR INDUSTRY	
	15a. RESIDENCE - STATE Nevada		15b. COUNTY Eureka		15c. CITY, TOWN OR LOCATION Eureka	
PARENTS	16. FATHER/PARENT - NAME (First Middle Last Suffix) Fritz HOOD		17. MOTHER/PARENT - NAME (First Middle Last Suffix) Shirley E PRESNELL			
	18a. INFORMANT - NAME (Type or Print) John George Edmund BIGRIGG		18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) PO BOX 602 Eureka, Nevada 89316			
POSITION	19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Sunset Crematory		19c. LOCATION City or Town State Elko Nevada 89603	
	20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JASON WUTH SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE NUMBER FD298		20c. NAME AND ADDRESS OF FACILITY Burns Funeral Home PO BOX 689 Elko NV 89603	
TRADE CALL	21a. TRADE CALL - NAME AND ADDRESS Burns Funeral Home PO BOX 689 Elko NV 89603					
	21b. DATE SIGNED (Mo/Day/Yr) February 24, 2021			21c. HOUR OF DEATH 05:30		
CERTIFIER	21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			22a. DATE SIGNED (Mo/Day/Yr)		
	23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Ileana C Deftu MD 235 West 6th Street Reno, NV 89503			23b. LICENSE NUMBER [REDACTED]		
REGISTRAR	24a. REGISTRAR (Signature) KATHERINE J SULLIVAN SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) February 24, 2021		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
CAUSE OF DEATH	PART I				Interval between onset and death	
	(a) Acute Respiratory Failure				Interval between onset and death	
CONDITIONS IF ANY WHICH MAY RISK TO IMMEDIATE CAUSE STATE THE IMMEDIATE CAUSE LAST	(b) Pneumonia				Interval between onset and death	
	(c) Acute Myeloid Leukemia				Interval between onset and death	
	(d) Unknown Etiology				Interval between onset and death	
	PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not remaining in the underlying cause given in Part I.					
26. AUTOPSY (Specify Yes or No) No		27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No				
28a. ACC. SUICIDE HOUL. UNDER OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY		
28d. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE		



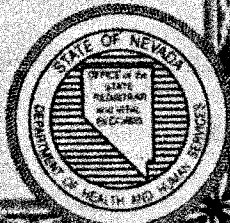
CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

Katherine J Sullivan
STATE REGISTRAR

DATE ISSUED: **4/2/2021**

This copy is not valid unless prepared on engraved border displaying date, seal and signature of Registrar.



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE