65678

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF CALIF)
) ss.
COUNTY OF Los Angeles)

MARIE E. LUXTON, being first duly sworn, deposes and says:

That Affiant was the husband of MARIE E. LUXTON, one of the Grantees in that certain Deed dated March 26, 1960, wherein [illegible] FARMS was the Grantor, and ROBERT S. LUXTON and MARIE E. LUXTON, husband and wife, were the Grantees, as joint-tenants with right of survivorship and not as tenants in common, conveying those certain lots, pieces or parcels of land situate in the County of Eureka, State of Nevada, that are described in said Deed, recorded APRIL 12, 1960, in Book 25 of Officials Records, Page 365, File No. 34561, Eureka County Recorder's Office.

That the said ROBERT S. LUXTON, one of the Grantees in said Deed, died in the City of INGLEWOOD, County of Los Angeles, State of CALIFORNIA, on Feb. 11, 1977, and is the identical person named as ROBERT S. LUXTON in that Certified Copy of Certificate of Death marked as Exhibit "A" and attached hereto; that said Certified Copy of the Death Certificate is hereby referred to and by such reference is incorporated into this paragraph as though herein fully set forth.

X Marie E. Luxton

Subscribed and sworn to before me,
this 10th day of July, 1978.

NOTARY PUBLIC

OFFICIAL SEAL
GORDON R. ANDERSON
NOTARY PUBLIC — CALIFORNIA
PRINCIPAL OFFICE IN
LOS ANGELES COUNTY
My Commission Expires April 18, 1981

BOOK 65 PAGE 1

CERTIFICATE OF DEATH

STATE OF CALIFORNIA — DEPARTMENT OF HEALTH
OFFICE OF THE STATE REGISTRAR OF VITAL STATISTICS

STATE FILE NUMBER | LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

DECEDENT PERSONAL DATA

1a. NAME OF DECEASED—FIRST	1b. MIDDLE	1c. LAST	2a. DATE OF DEATH—MONTH, DAY, YEAR	2b. HOUR
Robert	Shirley	Luxton	February 11, 1977	12:15 P.

3. SEX	4. COLOR OR RACE	5. BIRTHPLACE (STATE OR FOREIGN COUNTRY)	6. DATE OF BIRTH	7. AGE (IN YEARS)	UNDER 1 YEAR	UNDER 24 HOURS
Male	Caucasian	Illinois	April 20, 1912	64 YEARS		

8. NAME AND BIRTHPLACE OF FATHER: George H. Luxton - Illinois

9. MAIDEN NAME AND BIRTHPLACE OF MOTHER: Ena L. Field - Wisconsin

10. CITIZEN OF WHAT COUNTRY	11. SOCIAL SECURITY NUMBER	12. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)	13. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME)
United States	[redacted]	Married	Marie Horner

14. LAST OCCUPATION	15. NUMBER OF YEARS IN THIS OCCUPATION	16. NAME OF LAST EMPLOYING COMPANY OR FIRM (IF SELF EMPLOYED SO STATE)	17. KIND OF INDUSTRY OR BUSINESS
Crane & Hoist Specialist	26 years	Northrop Corporation	Aircraft Manufacturing

PLACE OF DEATH

18a. PLACE OF DEATH—NAME OF HOSPITAL OR OTHER INSTITUTIONAL FACILITY	18b. STREET ADDRESS—STREET AND NUMBER OR LOCATION	18c. INSIDE CITY CORPORATE LIMITS (SPECIFY YES OR NO)
Centinela Valley Community Hospital	555 East Hardy Street	Yes

18d. CITY OR TOWN	18e. COUNTY	18f. LENGTH OF STAY IN COUNTY OF DEATH	18g. LENGTH OF STAY IN STATE OF DEATH
Inglewood	Los Angeles	42 YEARS	42 YEARS

USUAL RESIDENCE (IF DEATH OCCURRED IN INSTITUTION, ENTER RESIDENCE BEFORE ADMISSION)

19a. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION)	19b. INSIDE CITY CORPORATE LIMITS (SPECIFY YES OR NO)	20. NAME AND MAILING ADDRESS OF INFORMANT
4727 West 147th Street #128	Yes	Marie E. Luxton 4727 West 147th Street #128 Lawndale, Ca. 90260

19c. CITY OR TOWN	19d. COUNTY	19e. STATE
Lawndale	Los Angeles	California

PHYSICIAN'S OR CORONER'S CERTIFICATION

21a. CORONER	21b. PHYSICIAN	21c. PHYSICIAN OR CORONER—SIGNATURE AND DEGREE OR TITLE	21d. DATE SIGNED
	1950 / 10 / 2/11/77 AND 2/11/77	N. Lawton M.D	2/14/77

21e. ADDRESS: 510 Manchester Inglewood Calif 31

21f. [illegible]

FUNERAL DIRECTOR AND LOCAL REGISTRAR

22a. SPECIFY BURIAL, ENTOMBMENT OR CREMATION	22b. DATE	23. NAME OF CEMETERY OR CREMATORY	24. SIGNATURE, TITLE AND LICENSE NUMBER OF EMBALMER
Burial	2/15/77	Pacific Crest Cemetery	George E. Clark 4643

25. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)	26. IF NOT CERTIFIED BY CORONER, WAS THIS CASE REFERABLE TO CORONER (SPECIFY YES OR NO)	27. LOCAL REGISTRAR—SIGNATURE	28. DATE RECEIVED BY LOCAL REGISTRAR
McCormick Mortuary	No	Liston A. Wilhardt	FEB 15 1977

MEDICAL AND HEALTH DATA

CAUSE OF DEATH

29. PART I. DEATH WAS CAUSED BY: ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C.

		APPROX. INTERVAL BETWEEN ONSET AND DEATH
IMMEDIATE CAUSE (A)	acute coronary occlusion	2 hrs
DUE TO, OR AS A CONSEQUENCE OF (B)	Coronary sclerosis Arteriosclerosis	5 yrs
DUE TO, OR AS A CONSEQUENCE OF (C)		

CONDITIONS IF ANY WHICH GAVE RISE TO THE IMMEDIATE CAUSE (A) STATING THE UNDERLYING CAUSE LAST

30. PART II. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO THE IMMEDIATE CAUSE GIVEN IN PART I

31. AUTOPSY (YES OR NO)	32a. [illegible]	32b. [illegible]
No	9yrs	

INJURY INFORMATION

33. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE	34. PLACE OF INJURY (SPECIFY HOME, FARM, FACTORY, PUBLIC BUILDING, ETC.)	35. INJURY AT WORK (SPECIFY YES OR NO)	36a. DATE OF INJURY—MONTH, DAY, YEAR	36b. HOUR

37a. PLACE OF INJURY (STREET AND NUMBER OR LOCATION AND CITY OR TOWN) | 37b. IF OUTSIDE CITY LIMITS OR TOWN, DISTANCE FROM (MILES) | 38. [illegible] | 39. [illegible]

40. DESCRIBE HOW INJURY OCCURRED (ENTER NATURE OF ESTATE BUSINESS OR INDUSTRY IN ITEM 17 IF INJURY OCCURRED IN COURSE OF WORK)

10-F

STATE REGISTRAR

A	B	C	D	E	
					01-3-1-DHS

65678

RECORDED AT THE REQUEST OF
Marie E. Luxton
ON July 17 19 78
AT 35 MINS. PAST 2 P. M.
IN BOOK 65 OF OFFICIAL RECORDS, PAGE 01-02 RECORDS OF EUREKA COUNTY, NEVADA
WILL A. DaPAOLI
Recorder
FILE NO. 65678 FEE $ 4.00

THIS IS A TRUE CERTIFIED COPY OF THE RECORD FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES IF IT BEARS THIS SEAL IN PURPLE INK.

FEB 16 1977

FEE $2.00

Liston A. Wilhardt, Director of Health Services and Registrar

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