

AFFIDAVIT TERMINATING JOINT TENANCY

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

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

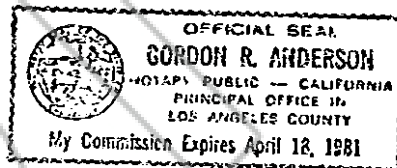
That Affiant was the husband of MARIE E. LUXTON, one of the Grantees in that certain Deed dated MARCH 28, 1960, wherein ROBERT S. LUXTON was the Grantor, and ROBERT S. LUXTON and MARIE E. LUXTON, husband and wife, were the Grantees, as joint-tenants with right of survivorship and not as tenants in common, 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 385, 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.

J. R. [Signature]
NOTARY PUBLIC



STATE OF CALIFORNIA - DEPARTMENT OF HEALTH

OFFICE OF THE STATE REGISTRAR OF VITAL STATISTICS

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE SET NUMBER		14 NAME OF DECEASED - FIRST NAME		15 MIDDLE NAME		16 LAST NAME		17 DATE OF DEATH - MONTH DAY YEAR		18 HOUR	
Robert		Shirley		Luxton		February 11, 1977		12:15 P.			
3 SEX		4 COLOR OR RACE		5 BIRTHPLACE		6 DATE OF BIRTH		7 AGE		8 YEARS	
Male		Caucasian		Illinois		April 20, 1912		64		YEARS	
8 NAME AND BIRTHPLACE OF FATHER						9 MAIDEN NAME AND BIRTHPLACE OF MOTHER					
George H. Luxton - Illinois						Ena L. Field - Wisconsin					
10 CITIZEN OF WHAT COUNTRY				11 SOCIAL SECURITY NUMBER				12 MARRIED NEVER MARRIED WIDOWED			
United States								Married			
13 OCCUPATION				14 NUMBER OF YEARS IN THIS OCCUPATION				15 NAME OF LAST EMPLOYING COMPANY OR FIRM			
Cardiologist				26 years				Northrop Corporation			
16 KIND OF INDUSTRY OR BUSINESS				17 NAME OF SURVIVING SPOUSE (IF WIFE ENTER MARRIED NAME)				18 NAME OF SURVIVING SPOUSE (IF WIFE ENTER MARRIED NAME)			
Aircraft Manufacturing				Marie Horner							
19a PLACE OF DEATH - NAME OF HOSPITAL OR OTHER IN-PATIENT FACILITY		19b STREET ADDRESS - STREET AND NUMBER OR LOCATION		19c CITY OR TOWN		19d COUNTY		19e STATE		19f ZIP CODE	
Cintinella Valley Community Hospital		555 East Hardy Street		Inglewood		Los Angeles		California		90260	
20a USUAL RESIDENCE - STREET ADDRESS (STREET AND NUMBER OR LOCATION)		20b INSIDE CITY CORPORATE LIMITS (SPECIFY YES OR NO)		20c NAME AND MAILING ADDRESS OF INFORMANT		20d CITY OR TOWN		20e COUNTY		20f STATE	
4727 West 147th Street #128		Yes		Marie E. Luxton		4727 West 147th Street #128		Lawndale		California	
21a CORONER - I HEREBY CERTIFY THAT DEATH OCCURRED AT THE PLACE STATED ABOVE AND THAT I HAVE MADE THE NECESSARY RECORDS AND THAT I HAVE MADE THE NECESSARY RECORDS AND THAT I HAVE MADE THE NECESSARY RECORDS		21b PHYSICIAN - I HEREBY CERTIFY THAT DEATH OCCURRED AT THE PLACE STATED ABOVE AND THAT I HAVE MADE THE NECESSARY RECORDS AND THAT I HAVE MADE THE NECESSARY RECORDS		21c PHYSICIAN OR CORONER - SIGNATURE AND PRINTED NAME		21d DATE SIGNED		21e ADDRESS		21f CITY OR TOWN	
				N. J. Tammam M.D.		2/14/77		5110 Manchester Avenue		ATC 31	
22a SPECIFY BURIAL ENTOMBMENT OR CREMATION		22b DATE		22c NAME OF CEMETERY OR CREMATORY		22d REGISTERED		22e ADDRESS		22f CITY OR TOWN	
Burial		2/15/77		Pacific Crest Cemetery		No		L. A. Withard		FEB 15 1977	
23 PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE		23a ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		23b ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		23c ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		23d ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		23e ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C	
(A) acute coronary occlusion		2 hrs.		(B) chronic ischemic heart disease		5 yrs.		(C)			
24 PART II. OTHER SIGNIFICANT CONDITIONS - CONTRIBUTING TO DEATH		24a ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		24b ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		24c ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		24d ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		24e ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C	
25 SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		25a PLACE OF INJURY - STREET AND NUMBER OR LOCATION		25b INJURY AT WORK		25c DATE OF INJURY		25d HOUR		25e HOUR	
26 PLACE OF INJURY - STREET AND NUMBER OR LOCATION AND CITY OR TOWN		26a PLACE OF INJURY - STREET AND NUMBER OR LOCATION		26b INJURY AT WORK		26c DATE OF INJURY		26d HOUR		26e HOUR	
27 DESCRIBE HOW INJURY OCCURRED - ENTER TEXT OF STATE WHEN REPORTED IN FULL - NAME OF HEALTH GROUP TO BE ENTERED IN FULL		27a ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		27b ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		27c ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		27d ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C		27e ENTER ONLY ONE CAUSE PER LINE FOR A, B AND C	

65678

RECORDED AT THE REQUEST OF
Marie E. Luxton

July 17 1978
at 35 min. 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

L. A. Withard, Director of Health Services

BOOK 65 PAGE 2