

Lincoln County

AFFIDAVIT TERMINATING JOINT TENANCY
AFFIDAVIT DEATH OF JOINT TENANT

STATE OF NEVADA)
) ss:
COUNTY OF LINCOLN

JOHN T. FISHER, first being duly sworn, deposes and says:
That he is the surviving spouse of Gloria V. Fisher, who died on July 27, 1976
at Caliente, Nevada, County of Lincoln, State of Nevada.

That at the time of death of the decedent, affiant and decedent owned property
as Joint Tenants described as follows:

All of lot number Sixteen (16) in Block "A" of the James H. Gottfredson Addition
to the City of Caliente, Nevada, as shown on the official plat of said addition
now on file and of record in the office of the County Recorder of said Lincoln
County, and to which plat and the records thereof reference is hereby made for
further particular description.

Attached Exhibit "A" Death Certificate.

That proof of death is affixed hereto as Exhibit "A" in the form of a certified
copy of the death certificate and affiant claims the following described property
as sole and separate property pursuant to Nevada Revised Statutes 40.470 (5).

John T. Fisher

JOHN T. FISHER

Subscribed and sworn to before me
this 18 day of October 1979

John H. Ginnsey

Notary Public



Notary Public, State of Nevada
LINCOLN COUNTY
John H. Ginnsey
My Commission Expires Sept. 19, 1980

66082

FILED AND RECORDED AT REQUEST OF
JOHN T. FISHER
OCT. 18, 1979
AT 45 MINUTES PAST 1 O'CLOCK
P. IN ROOM 33 OF OFFICIAL
RECORDS, PAGE 150 LINCOLN
COUNTY, NEVADA

Spurlock School

COUNTY RECORDER

Lincoln County

STATE OF NEVADA
DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH
CAPITOL COMPLEX
SECTION OF VITAL STATISTICS
CARSON CITY, NEVADA 89710

STATE OF NEVADA—DEPARTMENT OF HEALTH, WELFARE, AND REHABILITATION

Altered: August 17, 1976
DIVISION OF HEALTH—SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH

DECEASED—NAME		FIRST		MIDDLE		LAST		SEX	DATE OF DEATH (MONTH, DAY, YEAR)		
Gloria		Jeanne		FISHER				Fem.	July 27, 1976		
RACE		AGE—LAST BIRTHDAY (YEARS)		LENGTH OF TIME IN NEVADA (MONTHS)		HOURS		DATE OF BIRTH (MONTH, DAY, YEAR)		COUNTY OF DEATH	
White		29						Aug. 24, 1946		Lincoln	
CITY, TOWN, OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN OTHER, ONE STREET AND NUMBER)									
Caliente		Yes		Lincoln County Hospital							
STATE OF BIRTH (IF NOT IN U.S.A., NAME AND COUNTRY)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		SURVIVING SPOUSE (IF WIFE, GIVE MARRIAGE NAME)					
Louisiana		U.S.A.		Married		John Timothy Fisher					
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF SEVERAL)		KIND OF BUSINESS OR INDUSTRY							
		Home Maker		At Home							
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		INSIDE CITY (YES OR NO)		STREET AND NUMBER			
Nevada		Lincoln		Caliente		Yes		640 Holt Ave			
FATHER—NAME		MOTHER—NAME		MOTHER—MAIDEN NAME							
Jeffrey		Veillon		Helene Lorraine		Baxley					
INFORMANT—NAME		MARRIAGE ADDRESS		CITY OR TOWN, STATE, ZIP							
John Timothy Fisher		P. O. Box 533		Caliente, Nevada		89008					
PART I DEATH WAS CAUSED BY		IMMEDIATE CAUSE		INTERMEDIATE CAUSE		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH					
6314		Purp. Blood loss				30 min					
		Ectopic pregnancy				3 1/2 hrs					
PART II OTHER SIGNIFICANT CONDITIONS		CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)		AUTOPSY (YES OR NO)		IF YES, WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH (YES OR NO)					
				Yes		Yes					
ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)		DATE OF INJURY (MONTH, DAY, YEAR)		HOUR		HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 1E)					
INJURY AT WORK (SPECIFY YES OR NO)		PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY))		LOCATION		CITY OR TOWN, STATE					
CERTIFICATION—PHYSICIAN		I AFFIRMED BY		DATE		AND LAST SAW HIM/HER ALIVE ON		DID/DID NOT VIEW THE BODY AFTER DEATH (HOURS)		DEATH OCCURRED AT THE PLACE, ON THE DATE, AND, TO THE BEST OF MY KNOWLEDGE, DUE TO THE CAUSE(S) STATED.	
S. E. Deal M.D.		July 20, 76		July 27, 76		7 - 27 - 76		Yes		6:30A	
CERTIFICATION—MEDICAL EXAMINER OR CORONER		ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR OF THE INVESTIGATION, IN MY OPINION, I		HOUR OF DEATH		THE DECEASED WAS PROHIBITED FROM		DATE SIGNED (MONTH, DAY, YEAR)			
								7/29/76			
CERTIFIER—NAME (TYPE OF PRINT)		SIGNATURE		TITLE OR TITLE		DATE SIGNED (MONTH, DAY, YEAR)					
S. E. Deal M.D.		<i>S. E. Deal</i>		M.D.		7/29/76					
MARRIAGE ADDRESS—CERTIFIED		STATE OF BIRTH		CITY OR TOWN		STATE					
P. O. Box 556		Caliente		Nevada		89008					
BURIAL, CREMATION, REBURIAL (SPECIFY)		CEMETERY OR CREMATORY—NAME		LOCATION		CITY OR TOWN		STATE			
Burial		Milford Cemetery		Milford		Utah					
DATE (MONTH, DAY, YEAR)		FUNERAL HOME—NAME AND ADDRESS		CITY OR TOWN, STATE, ZIP							
July 30, 76		Lincoln County Mortuary		Box 236 Caliente, Nevada							
FUNERAL DIRECTOR—SIGNATURE		REGISTRAR—SIGNATURE		DATE RECEIVED BY LOCAL REGISTRAR							
<i>J. F. J...</i>		<i>Jack H...</i>		Aug 2, 1976							

Alteration: Item #8: State of Birth: Louisiana
Item #11: Surviving Spouse: John Timothy Fisher
Item #14e: Street and Number: 944 Holt Avenue
Authority: Affidavits of: John Timothy Fisher
George T. Rowe
Date: August 17, 1976 • State Affidavit #13656

I, HEREBY CERTIFY THIS TO BE A TRUE AND CORRECT COPY OF THE ORIGINAL RECORD ON FILE WITH THE SECTION OF VITAL STATISTICS, NEVADA DIVISION OF HEALTH.



Issued AUG 17 1976

NOT VALID WITHOUT THE RAISED SEAL OF THE NEVADA DIVISION OF HEALTH

Jack Homeyer
JACK HOMEYER
Biostatistician
Chief, Section of Vital Statistics

By: *Zelda Remond*

"EXHIBIT A"