

Lincoln County

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA )  
                  ) ss.  
COUNTY OF LINCOLN )

AGNES D. COTTINO, first being duly sworn, deposes and says:

1. That she is the surviving spouse of VICTOR A. COTTINO who died on August 3, 1985, at Caliente, Nevada.
2. That at the time of death of the decedent, affiant and decedent owned property in Joint Tenancy described as follows:

All of lots numbered Six (6), Seven (7), Eight (8), Eleven (11) and Twelve (12) in Block numbered Fifty-Two (52) in the town of Pioche, as delineated and described on the official plat of the Northeast Addition to said town of Pioche, 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.

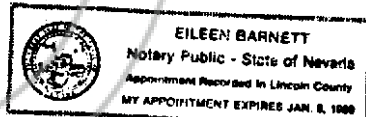
Together with any and all buildings and improvements situate thereof and the contents therein.

3. 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 above described property as her sole and separate property pursuant to Nevada Revised Statutes 40.470 (5).

Agnes D. Cottino  
Affiant  
AGNES D. COTTINO

Subscribed and sworn to before me  
this 10th day of August 1985.

Eileen Barnett  
Notary Public



No. 83234  
FILED AND RECORDED AT REQUEST OF  
Charles G. Cottino  
August 16, 1985  
AT 15 MINUTES PAST 11 O'CLOCK  
A.M. IN BOOK 66 OF OFFICIAL  
RECORDS, PAGE 05 LINCOLN  
COUNTY, NEVADA.

Charles G. Cottino  
COUNTY RECORDER



DEPARTMENT OF HUMAN RESOURCES  
STATE OF NEVADA  
DIVISION OF VITAL STATISTICS  
CERTIFICATE OF DEATH

1	DECEASED - NAME	Victor Albert	COTTINO	2	DATE OF DEATH (Month, Day, Year)	Aug. 3, 1985	3a	COUNTY OF DEATH	Lincoln									
3b	CITY, TOWN, OR LOCATION OF DEATH	Caliente	HOSPITAL OR OTHER INSTITUTION (Name, St. and number, give street and number)		4a	INSIDE CITY LIMITS (Specify City or Town)	4b	IF DEATH IN HOME, indicate DOA OR Entry Per Institution (Specify)	Inpatient									
4c	RACE - (1) White, (2) Black, (3) American Indian, (4) Other (Specify)	White	5a	AGE - Last Birthday (Specify Age)	5b	UNDER 1 YEAR (MOSE - DAYS)	5c	LATER 1 DAY (HOURS - MIN)	6	DATE OF BIRTH (Month, Day, Year)	7	SEX	Male					
7	STATE OF BIRTH (If not U.S.A. name country)	Nevada	8	CITIZEN OF WHAT COUNTRY	U.S.A.	9	MARRIED (1) NEVER MARRIED, (2) WIDOWED, (3) DIVORCED, (4) SEPARATED, (5) REMARRIED	10	SURVIVING SPOUSE (If not give maiden name)	Agnes Slaughter	11	WAS DECEASED EVER IN U.S. ARMED FORCES? (Specify Yes or No)	Yes					
12	SOCIAL SECURITY NUMBER		13	RESIDENCE - STATE	Nevada	14a	OCCUPATION (Give kind of work done during most of working life. If not, leave blank)	14b	END OF BUSINESS OR INDUSTRY	Cattle								
15a	FATHER - NAME	Guido	15b	MOTHER - MAIDEN NAME	Virginia	16	REGISTRATION (1) YES, (2) NO	17	DATE RECEIVED BY REGISTRAR (Month, Day, Year)	August 3, 1985								
18a	DEPOSITED	Yes	18b	DATE DEPOSITED (Month, Day, Year)	Aug 3 1985	19	CAUSE OF DEATH	20	OTHER SIGNIFICANT CONDITIONS (Indicate conditions contributing to death but not related to cause given in PART 1 (a))	21	AUTOPSY (1) YES, (2) NO	22	WAS CASE REFERRED TO CORONER (Specify Yes or No)	No				
23	DATE OF INJURY (Month, Day, Year)		24	HOUR OF INJURY		25	DESCRIBE HOW INJURY OCCURRED	26	LOCATION		27	STREET OR R.F.D. No.	28	CITY OR TOWN		29	STATE	

This is to certify that the above is a true and correct copy of the certificate on file in this office.

By: *Catherine S. Loun* 4237  
Deputy Registrar

Date issued: AUG 12 1985

VITAL RECORDS

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

BOOK 67 PAGE 06