

January 22, 1987

Lincoln County Recorder
Courthouse
Pioche, NV 89043

To whom it may concern:

Please transfer all the claims that in the name of
Arnold C. Castle to my name DeAubrey J. Castle..

My husband died May 11, 1983. All the legal work--
probate etc. has been done. I am advised that I need
to transfer all claims from his name to mine.

I am enclosing all the names of the claims that I have.
If there are more or these are in error please advise me.
I am also enclosing a death certificate and a copy of my
husband's will..If anything else is needed please let
me know.

I have sent a letter of request to Reno also.

I appreciate any and all help you can give me in this
matter.

My address is 1065 East Flamingo, Las Vegas, NV 89119
and my phone number is (702) 731-6429.

Sincerely,

DeAubrey J. Castle

Address correction: 1065 East Flamingo Apt. 906

CLAIMS TO BE TRANSFERRED FROM ARNOLD C. CASTLE TO DEAUBREY J CASTLE

12 SOUTH 65 EAST

24 N.E.	DeAubrey Jean	1
24 S.E.	DeAubrey Jean	2
24 S.E.	CASTLE	45
24 S.E.	"	46
24 N.E.	"	47
24 N.E.	"	48

12 SOUTH 66 EAST

30 N.W.	DeAubrey Jean	3
30 S.W.	" "	4
30 N.E.	" "	5
30 S.E.	" "	6
29 N.W.	" "	7
29 S.W.	" "	8
31 S.W.	CASTLE	4
31 N.E.	"	5
32 N.W.	"	7
32 S.W.	"	8
20 N.E.	"	35
20 N.E.	"	36
20 N.W.	"	37
20 N.W.	"	38
19 N.E.	"	39
19 N.E.	"	40
19 N.W.	"	41
19 N.W.	"	42
19 S.W.	"	43
19 S.W.	"	44

STATE OF NEVADA DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH - SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH

001458

1. DECEASED NAME: Arnold C. CASTLE		2. DATE OF BIRTH: May 11, 1983		3. COUNTY OF BIRTH: Clark	
4. CITY/TOWN OR LOCATION OF DEATH: Las Vegas		5. HOSPITAL OR OTHER INSTITUTION: Nellis Air Force Base Hospital		6. INPATIENT OR OUTPATIENT: Inpatient	
7. RACE: White		8. ETHNIC OR HISPANIC ORIGIN: American		9. SEX: Male	
10. STATE OF BIRTH: Kentucky		11. COUNTRY OF BIRTH: U.S.A.		12. DATE OF DEATH: May 31, 1984	
13. SOCIAL SECURITY NUMBER: [REDACTED]		14. MARRIAGE STATUS: Married		15. NAME OF SPOUSE: DeAubrey Alewine	
16. RESIDENCE - STATE: Nevada		17. COUNTY: Clark		18. CITY/TOWN: Las Vegas	
19. FATHER'S NAME: Frank E. Castle		20. MOTHER'S NAME: Ella Mae Hoke		21. HOME ADDRESS: 3554 Braewood Dr. Las Vegas Nevada 89121	
22. DECEASED'S OCCUPATION: Colonel-JAG Office		23. EMPLOYER: U.S. Air Force		24. BUSINESS OR INDUSTRY: [REDACTED]	
25. CREMATION: Yes		26. CREMATOR: Palm Crematory		27. LOCATION: Las Vegas Nevada	
28. BURIAL: Yes		29. BURIAL PLACE: Palm Mortuary		30. ADDRESS: 1325 N. Main St. Las Vegas Nevada 89101	
31. SIGNATURE OF PHYSICIAN: Emanuel Manuel, M.D.		32. DATE: MAY 13 1983		33. HOURS: 3:05 P.M.	
34. MEDICAL CAUSE: Cholelithiasis		35. PARTIAL CAUSE: Cholelithiasis		36. ICD-9 CODE: 57.3	
37. OTHER SIGNIFICANT CONDITIONS: Cholelithiasis		38. MARRIAGE CASE FILED TO CORRECT PREVIOUS FILE OR FILE NO: No		39. THIS CASE FILED TO CORRECT PREVIOUS FILE OR FILE NO: No	
40. DATE OF INJURY: May 11, 1983		41. HOUR OF INJURY: 3:05 P.M.		42. PLACE OF INJURY: Nellis Air Force Base Hospital	

45790

VITAL RECORDS

"CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE DOCUMENT ON FILE WITH THE REGISTRAR OF VITAL STATISTICS, STATE OF NEVADA." This copy was issued by the Clark County Health District from State certified documents as authorized by the State Board of Health pursuant to NRS 440.176.

NOT VALID WITHOUT THE RAISED SEAL OF THE CLARK COUNTY HEALTH DISTRICT

OTTO RAVENHOLT, M.D.
Registrar of Vital Statistics

[Signature]

Date Issued: FEB 22 1984

CLARK COUNTY HEALTH DISTRICT
625 Shadow Lane P.O. Box 4426
Las Vegas, Nevada 89127
702-383-1223

LAST WILL AND TESTAMENT
OF
ARNOLD C. CASTLE

I, ARNOLD C. CASTLE, a resident of Dade County, State of Florida, presently on active duty with the United States Air Force, and stationed at Elmendorf Air Force Base, Alaska, being of sound and disposing mind and memory and above the age of twenty-one years, do hereby revoke any and all former wills and codicils made by me, and do make, publish and declare this to be my Last Will and Testament.

FIRST: I am married and my wife's name is DeAUBREY JEAN CASTLE. I have the following children as issue of a prior marriage, namely RONALD C. CASTLE, born 5 January 1946; DRULANA K. MATTSON (nee CASTLE), born 12 December 1947; GARY D. CASTLE, born 14 October 1949; and DAVID R. CASTLE, born 31 December 1951; and the following stepchildren; namely, DeAUBREY L. GRAYSON, born 20 July 1954, and NEILAN S. GRAYSON, born 22 January 1957.

SECOND: I direct my Executor or Alternate Executor hereinafter named to pay as part of the expenses of administering my estate, all estate, inheritance, transfer and succession taxes including interest and penalties thereon, if any, which may become payable by reason of my death, on any property or interests herein included in my gross estate for tax purposes. I hereby waive, on behalf of my estate, any right to recover from any person any part of such inheritance or estate taxes so paid.

Am

WJK

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BOOK

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THIRD: I give, devise and bequeath all of my estate, real, personal, or mixed, of whatsoever character and wheresoever situated, of which I shall die seized or possessed, or of which I shall be entitled to dispose at the time of my death to my wife, DeAUBREY JEAN CASTLE.

FOURTH: In such event as my said wife shall predecease me, or shall die in a common disaster, then, in that event, I hereby give, devise and bequeath all of my estate aforementioned to my children and stepchildren, RONALD C. CASTLE, DRULANA K. MATTSON (nee CASTLE), GARY D. CASTLE, DAVID R. CASTLE, DeAUBREY L. GRAYSON, and NEILAN S. GRAYSON, in equal shares, share and share alike.

In the event a child or children are born or adopted after the execution of this Will, they are to share and share alike in equal shares, with the children above mentioned in this paragraph. In case any or all of the persons named in this paragraph predecease me, then the share of that person or those persons who predecease me shall go to the lawful issue of that person or those persons predeceasing me, per stirpes, and not per capita, and in case the person or persons predeceasing me shall leave no lawful issue, then the share of the person or persons predeceasing me shall go to the aforementioned persons who survive me.

FIFTH: In the event that no person or persons subject to receive under the provisions of the THIRD and FOURTH paragraphs above survive me, then in that event I give, devise and bequeath all

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of my estate aforementioned to my father, FRANK E. CASTLE, of Miami, Florida, and my mother, ELLA M. CASTLE, of Miami, Florida, and my mother-in-law, RUBY R. ALEWINE, of Elmendorf Air Force Base, Alaska, in equal shares, share and share alike, and in the event that one of them is not living at the time of my death, all shall go to the survivor.

SIXTH: I nominate and appoint my wife as independent executrix of this my Last Will and Testament, and direct that she shall act as such executrix without giving bond or any security whatsoever.

In the event my wife predeceases me or is unable or unwilling to act as such executrix, then I nominate and appoint ARTHUR LEVINE, of Miami, Florida, to act as independent executor of this my Last Will and Testament. I direct that said alternate independent executor shall not be required to furnish any bond hereunder. I vest my executor or alternate executor with full power and authority to sell, transfer and convey any property, real or personal, which I may own at the time of my death at such time and place and upon such terms and conditions as he/she may determine.

SEVENTH: I desire that my executor/executrix consult with the Legal Assistance Officer and Personal Affairs Officer of the nearest military installation and the Veterans Administration to ascertain if there are any benefits to which my heirs might be entitled due to the fact that I was a member of the United States Air Force.

IN WITNESS WHEREOF, I have hereto set my hand this

2nd day of September, 1977.

Arnold M. ...

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Book

The within instrument containing four pages, including the page upon which we have signed our names as witnesses, was on the date above signed, published, and declared by the above named Testator to be his Last Will and Testament, and in our presence, who at his request and in his presence, and in the presence of each other, have signed our names as witnesses hereto, and we certify that in our opinion the said Testator is of sound mind.

William J. Kollman Rt 1, Box 50
STUART, NEBR 68780

Richard A. Fisher 940 Clairmont St
Napoleon, Ohio 43545

Bruce R. Harts 29 Janet Terrace
New Hartford, CT 06413

No. 86240
 FILED AND RECORDED AT REQUEST OF
DeAubrey J. Castle
Feb. 17, 1987
 AT 1 MINUTES PAST 1 O'CLOCK
P.M. IN BOOK 73 OF OFFICIAL
 RECORDS, PAGE 574 LINCOLN
 COUNTY, NEVADA.

FRANK C. HULSE
 COUNTY RECORDER
 By Mara Cornejo Deputy