

Lincoln County

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA )  
                  ) ss.  
COUNTY OF LINCOLN )

Evelyn Neagle, first being duly sworn, deposes and says;

1. That she is the surviving spouse of Lloyd Neagle who died on Oct. 7, 1987, at Panaca, Nevada
2. That at the time of death of the decedent, affiant and decedent owned property in Joint Tenancy described as follows:

All of Lot numbered 1 in Block numbered 44, together with all improvements thereon; as said Lot and Block are delineated on the Official Plat of said Town now on file in the Office of the County Recorder of said County of Lincoln.

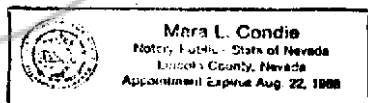
A portion of the Northwest 1/4 of Section 9, T2S, R68E, MDB&N, Lot 17 in Sun Gold Manor in the Town of Panaca.

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).

*Evelyn Neagle*  
Affiant Evelyn Neagle

Subscribed and sworn to before me  
this 3rd day of December 1987.

*Mara L. Condie*  
Notary Public



No. 88116  
FILED AND RECORDED AT REQUEST OF  
Evelyn Neagle  
Dec. 3, 1987  
AT 30 MINUTES PAST 1 O'CLOCK  
P. M. IN BOOK 78 OF OFFICIAL  
RECORDS, PAGE 33 LINCOLN  
COUNTY, NEVADA.

FRANK C. HULSE  
COUNTY RECORDER  
By *Mara L. Condie*, Deputy

**STATE OF NEVADA**  
 DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH  
 STATE OF NEVADA - DEPARTMENT OF HUMAN RESOURCES  
 DIVISION OF HEALTH - SECTION OF VITAL STATISTICS  
**CERTIFICATE OF DEATH**

TYPE OR PRINT IN PERMANENT BLACK INK	LOCAL FILE NUMBER	DECEASED—NAME	First	Middle	LAST	DATE OF DEATH Month, Day, Year	STATE FILE NUMBER	COUNTY OF DEATH
		1	Lloyd		NEAGLE	2 Oct 7, 1987		3a Lincoln
DECEDENT	CITY, TOWN, OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—Name of and address, give street and number			INSIDE CITY LIMITS (Specify Yes or No)	IF Held, or last address DOR, DP, EP, etc. (Specify Yes or No)	
	2b Paraca		2c 225 No. 5th. Street			3b Yes	3c	
IF BEAN REGISTERED IN NEVADA (S) INDICATE REASON, COMPLETION OF ALIENAGE TIES	2d	RACE—(a) White, Black, American Indian, etc. (Specify)	2e	ETHNIC	2f	AGE—Last Birthday (Years)	2g	2h
	4a	White	4b	American	4c	7 1	2i	2j
PARENTS	FATHER—NAME		MOTHER—MAIDEN NAME		MARRIED, NEVER MARRIED, WIDOWER, DIVORCED (Specify)			
	16 Conrad Neagle		17 Ruth Bennett		18 Evelyn Hansen			
DISPOSITION	19a		19b		19c			
	Burial		Panaca Cemetery		Panaca Nevada			
CERTIFIER	21a		21b		21c		21d	
	10/9/87		7:25 A.M.		(Pronounced)		21e	
CAUSE OF DEATH	23		24		25		26	
	Joseph D. Wilkin M.D. P.O. Box 472 Panaca, Nevada 89042		10/9/87		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		27	
CAUSE OF DEATH	28		29		30		31	
	Cardio Pulmonary Arrest		Coronary Artery Disease		Chronic obstructive disease		32	
CAUSE OF DEATH	33		34		35		36	
	DATE OF INJURY		HOUR OF INJURY		PLACE OF INJURY		LOCATION	

No 61959

VITAL RECORDS

This is to certify that the above is a true and correct copy of the certificate on file in this office.  
 Date issued: NOV 2 1987  
 [Signature] Deputy Registrar

**WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT**