

1 STATE OF CALIFORNIA)
2 COUNTY OF KERN) ss: AFFIDAVIT OF SURVIVORSHIP

3 MARY R. GUNTER, being first duly sworn, on oath deposes and states that
4 she resides at 1719 Baker, Bakersfield, California 93305

5 This Affiant was the wife of LOUIS EDWARD GUNTER in his lifetime. He
6 died on May 20, 1988 and a certified copy of the official certificate of his
7 death is attached hereto and made a part hereof by this reference.

8 At the time of the death of LOUIS EDWARD GUNTER as aforesaid, he and this
9 Affiant were the owners of the following described real property situated in
10 the County of Lincoln and State of Nevada, to-wit:

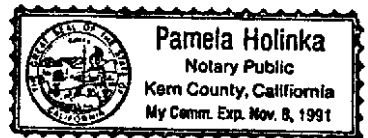
11 Lot Numbered Five (5) in ROWAN SUBDIVISION, as shown by the Map
12 thereof on file in the Office of the County Recorder of Lincoln County,
13 Nevada;
14 pursuant to deed which conveyed title to them as "LOUIS E. GUNTER and MARY R.
15 GUNTER, husband and wife as Joint Tenants" with the consequent right of
16 survivorship therein, said deed being dated September 21, 1978 and recorded
17 October 26, 1978 in the Office of County Recorder of Lincoln County, Nevada in
18 Book 27 on page 538 as Instrument No. 63009.

19 This Affiant is the sole surviving joint owner of said real estate, and
20 this Affidavit is made and given pursuant to the provisions of Nevada Revised
21 Statutes, for the purpose of establishing the termination of the aforesaid
22 joint tenancy and establishing this survivorship as a matter of record.

23 Subscribed and sworn to before me
24 this 21st day of March,
1989.

25 Pamela Holinka
26 Notary Public

Mary R. Gunter
MARY R. GUNTER



28

STATE OF NEVADA DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH VITAL STATISTICS

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

88:003630

Form with sections: DECEASED, DECEASED NAME, DATE OF DEATH, COUNTY OF DEATH, DECEASED, DECEASED NAME, DATE OF BIRTH, SEX, STATE OF BIRTH, CITIZEN OF WHAT COUNTRY, MARRIED, NEVER MARRIED, DIVORCED, SURVIVING SPOUSE, SOCIAL SECURITY NUMBER, RESIDENCE, PARENTS, DISPOSITION, CERTIFIER, REGISTRAR, CAUSE OF DEATH.

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: MAR 13 1989 Deputy Registrar: William Campbell No 71984 56

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Return to:
THOMAS M. STARK
302 Carson #900
Las Vegas, NV 89101

COPY

98955

FILED AND RECORDED AT REQUEST OF
Thomas M. Stark
April 5, 1989
A. 30 MAY 1989 P. 3
P. 84
SERIAL PAGE 396
LINCOLN COUNTY, NEVADA

FRANK C. HULSE
COUNTY RECORDER

By *Mara Conner*, Deputy