

AFFIDAVIT TERMINATING JOINT TENANCY

1
2 STATE OF NEVADA)
3 COUNTY OF LINCOLN) ss:
4

5 KENDALL RIPPETOE, being first duly sworn, deposes and
6 says:

7 1. That affiant is over the age of 21 years and
8 competent to be a witness as to the matters hereinafter stated.

9 2. That affiant is KENDALL RIPPETOE, the person named
10 as KENDALL RIPPETOE, one of the grantees named in that certain
11 Grant, Bargain, Sale Deed recorded as Instrument No. 92377 in
12 Book 87, of Official Records, in the Office of the County
13 Recorder of Lincoln County, State of Nevada, which property
14 described therein is located in the County of Lincoln, State of
15 Nevada, and which property is known and described as follows, to
16 wit:

17 A parcel of land situate in the Southeast corner of Lot
18 numbered Three (3) in Block numbered Seventeen (17) of
19 said town of Panaca, described as follows:

20 Beginning at the Southwest Corner of said Lot Three (3)
21 and running thence Easterly along the street line a
22 distance of 125 feet, thence running at right angles
23 Northerly 165 feet, thence running at right angles
24 Westerly 125 feet, to the Westerly boundry line of said
25 Lot 3 thence running southerly along said Westerly
26 boundry line distance of 165 feet, to the point of
27 beginning as said lot and block are shown on the official
28 plat of said plat of said town of Panaca, now on file in
the County Recorder's Office.

Also, any and all improvements and building situate
thereon.

Lot Three (3) in Block Seventeen (17) in the town of
Panaca County of Lincoln, State of Nevada, excepting
therefrom the following described parcel to-wit:

Beginning at the Southwest corner of said lot 3, thence
North 165 feet, thence east 125 feet, thence south 165

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feet, thence west 125 to the point of beginning including one wooden house used as a residence, one wooden storage shed, and two shares of irrigation water.

Together with all and singular, the tenements, hereditaments and appurtenances thereto belonging and in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

That JILL RIPPETOE was one of the grantees named in said deed and was the identical person named as JILL RIPPETOE, the decedent in that certain Death Certificate, certified copy of which is annexed hereto and made a part hereof, which person died on the 4th day of September, 1992, in Salt Lake City, County of Salt Lake, Utah.

Kendall Rippetoe
KENDALL RIPPETOE

Subscribed and sworn to before me this 14th day of December, 1992.

Margaret Thomas
NOTARY PUBLIC, in and for said County and State.

(SEAL)

WHEN RECORDED MAIL TO:

Patricia D. Cafferata, Esq.
301 Flint Street
Reno, Nevada 89501

099733

FILED AND RECORDED AT REQUEST OF
Kendall Rippetoe
Dec. 14, 1992
P. 20 MINUTES PAST 12 O'CLOCK
M IN BOOK 104 OF OFFICIAL
RECORDS, PAGE 294 LINCOLN
COUNTY, NEVADA

James Setzer
COUNTY CLERK

STATE OF UTAH — DEPARTMENT OF HEALTH

STATE OF UTAH - DEPARTMENT OF HEALTH 143 92 006691
CERTIFICATE OF DEATH

LOCAL FILE NUMBER 18-3268 STATE FILE NUMBER

1. NAME OF DECEDENT FIRST Ila	MIDDLE Jill	LAST DECK	2. SEX Female	3. DATE OF DEATH (Day, Mo, Yr) September 4, 1992	4. TIME OF DEATH (as in case of sudden death) 0145
5. DATE OF BIRTH (Day, Mo, Yr) Jan 30, 1938	6. AGE (as reported) (Years, Months, Days) 54	7. RACE (as reported) Cedar City, Utah	8. PLACE OF BIRTH (City, State, Country) Cedar City, Utah	9. SOCIAL SECURITY NUMBER [REDACTED]	
10. PLACE OF DEATH (City, State, Country) Salt Lake City, Utah			11. NAME OF HOSPITAL, NURSING HOME OR OTHER FACILITY (If decedent died in a hospital, name and address of hospital) L.D.S. Hospital		
12. COUNTY OF DEATH Salt Lake			13. MANNER OF DEATH (Check one) <input type="checkbox"/> Natural <input type="checkbox"/> Accidental <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Unknown <input type="checkbox"/> Other		
14. MARITAL STATUS (Check one) <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced			15. OCCUPATION (as reported) (If decedent was a member of the U.S. Armed Forces, specify branch and grade) Custodian		
16. RESIDENCE STREET AND NUMBER PO Box 878			17. CITY, STATE AND ZIP CODE Lincoln Nevada 89042		
18. MARITAL STATUS (Check one) <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced			19. RACE (as reported) White		
20. EDUCATION (Check one) <input type="checkbox"/> Less than High School <input type="checkbox"/> High School <input type="checkbox"/> Some College <input type="checkbox"/> College <input type="checkbox"/> Postgraduate			21. YEARS OF SCHOOLING (as reported) 13 Years		
22. NAME OF DECEASED (First Name Last) Edward Joseph Deck			23. NAME OF SURVIVOR (First Name Last) Ila Jay Van Isdale		
24. NAME AND ADDRESS OF INFORMANT R.J. Kearney - Son - 11217 South Sandy Creek Drive - Sandy, Utah 84094					
25. DATE OF DEPOSITION (Day, Mo, Yr) Sept. 5, 1992					
26. PLACE OF DEPOSITION (City, State, Country) Larkin Sunset Lawn Crematory - Salt Lake City, Utah					
27. SIGNATURE OF PHYSICIAN (Print Name) Dr. Darrell Hensleigh MD - 333 South 9th East St - Salt Lake City, Utah					
28. SIGNATURE OF PHYSICIAN (Signature) [Signature]					
29. SIGNATURE OF REGISTRAR (Print Name) John E. Brockert					
30. SIGNATURE OF REGISTRAR (Signature) [Signature]					
31. DATE OF DEATH (Day, Mo, Yr) Sept. 4, 1992					
32. TIME OF DEATH (as in case of sudden death) 0145					
33. PLACE OF DEATH (City, State, Country) Salt Lake City, Utah					
34. MANNER OF DEATH (Check one) <input type="checkbox"/> Natural <input type="checkbox"/> Accidental <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Unknown <input type="checkbox"/> Other					
35. CAUSE OF DEATH (Immediate Cause) Chest Cancer, metastatic					
36. CAUSE OF DEATH (Underlying Cause) Yrs.					
37. OTHER SIGNIFICANT CONDITIONS Contributing to death (as reported) (List only one cause of death) [REDACTED]					
38. PLACE OF DEATH (City, State, Country) Salt Lake City, Utah					
39. MANNER OF DEATH (Check one) <input type="checkbox"/> Natural <input type="checkbox"/> Accidental <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Unknown <input type="checkbox"/> Other					

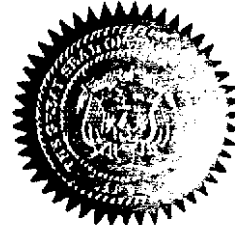
SDH-BHS 94 1/2 88

This is to certify that this is a true copy of the certificate on file in this office. This certified copy is issued under authority of section 26-2-22 of the Utah Code Annotated, 1953 As Amended

Date Issued

OCT 23 1992

John E. Brockert
John E. Brockert
DIRECTOR OF VITAL STATISTICS



S651487

WARNING: IT IS ILLEGAL TO DUPLICATE THIS COPY FOR OFFICIAL PURPOSES.