

AFFIDAVIT IN RE JUSTINE J. LYTLE, DECEASED

TERMINATION OF JOINT TENANCY (NRS 111.365)

STATE OF NEVADA)
COUNTY OF LINCOLN) SS

FARREL W. LYTLE, being first duly sworn, deposes and says:

That affiant is the son of JUSTINE J. LYTLE, Deceased. That Decedent died on the 28 day of August, 1990. That a certified copy of the Death Certificate is attached hereto as Exhibit "A".

That during the lifetime of said Decedent, certain real property was acquired in joint tenancy wherein F. WAYNE LYTLE and JUSTINE J. LYTLE were Grantees. That under the laws of the State of Nevada, upon the death of JUSTINE J. LYTLE, the title and ownership of said real property became vested in F. WAYNE LYTLE as the surviving joint tenant. That said real property was acquired by a Deed dated the 3 day of July, 1980, wherein Larry K. and Sandra Lytle was the Grantor(s), and F. WAYNE LYTLE and JUSTINE J. LYTLE were the Grantees.

That said Deed was recorded in Book 39, Page 317, Lincoln ~~White Pine~~ County Records.

That the real property conveyed therein, in joint tenancy, is more particularly described as follows, to-wit:

See Exhibit "B" attached hereto.

That by reason of the foregoing, affiant hereby declares that the title and interest of JUSTINE J. LYTLE, Deceased in the above-described real property has vested in F. WAYNE LYTLE, in fee simple, and that F. WAYNE LYTLE is the sole and absolute owner thereof, together with the tenements, hereditaments, and appurtenances, thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues

WONNIE J. CLARKSON
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483 FIFTH STREET, P.O. BOX 8
ELY, NEVADA 89301
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1 and profits thereof.

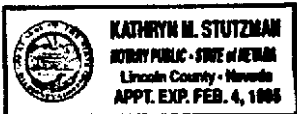
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Farrel W. Lytle
FARREL W. LYTLE

3 Subscribed and sworn to before me

4 this 1st day of June, 1993.

5 *Kathryn M. Stutzman*
6 NOTARY PUBLIC



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GARY D. FAIRMAN
A PROFESSIONAL CORPORATION
488 FIFTH STREET - P. O. BOX 8
ELY, NEVADA 89301
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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

90 006382

LOCAL FILE NUMBER		DECEASED—NAME First Middle Last Justine LYTLE		DATE OF DEATH (Month, Day, Year) Aug. 28, 1990	STATE FILE NUMBER
CITY, TOWN, OR LOCATION OF DEATH Caliente		HOSPITAL OR OTHER INSTITUTION—Name (if not other, give street and number) Grover C. Dills Medical Center		IF Hosp. or inst. indicate OCA, OP, Etc. Impatient	COUNTY OF DEATH Lincoln
RACE—(e.g., White, Black, American Indian, etc.) White		Was Decendant of Hispanic Origin? Specify (if not other, give street and number) No		AGE—Last Birthday (Years) 75	DATE OF BIRTH (Mo., Day, Yr.) Oct. 1, 1914
STATE OF BIRTH (if not U.S. give country) Utah		CITIZEN OF WHAT COUNTRY U.S.A.		Decendant's Education. Specify highest grade completed 2	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED Married
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give kind of Work Done During Week of Reporting Ltd. Even if Retired) Secretary		KIND OF BUSINESS OR INDUSTRY Sand & Gravel 580	SURVIVING SPOUSE (if wife, give maiden name) Wayne
RESIDENCE—STATE Nevada		COUNTY Lincoln	CITY, TOWN, OR LOCATION Rural Alamo	STREET AND NUMBER Lytle Blvd.	INSIDE CITY LIMITS (Specify City or No.) No
FATHER—NAME First Middle Last Seth M. Jones		MOTHER—MAIDEN NAME First Middle Last Clariessa Adair			
INFORMANT—NAME (Type or Print) Wayne Lytle		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) P.O. Box 442 Alamo, Nevada 89001			
BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		CEMETERY OR CREMATORY—NAME Lytle Cemetery		LOCATION City or Town State Eagle Valley Nevada	
FUNERAL DIRECTOR—SIGNATURE (If Private Act, so Specify) <i>[Signature]</i>		FUNERAL DIRECTOR LICENSE NUMBER 16		NAME AND ADDRESS OF FACILITY P.O. Box 236 Caliente, Nevada 89	
21a. To the best of my knowledge, death occurred at the place and place and (due to the coroner's) issued. DATE SIGNED (Mo., Day, Yr.) Aug 29, 90		21c. HOUR OF DEATH 2:00 P.M.		22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the causes and manner stated. (Signature and Title) <i>[Signature]</i>	
21b. NAME OF ATTENDING PHYSICIAN OR OTHER THAN CERTIFIER (Type or Print) Lisa J. Bechtal M.D. P.O. Box 305 Caliente, Nevada 89008		21c. DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) Aug 29, 90		22b. DATE SIGNED (Mo., Day, Yr.) Aug 29, 90	
21d. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print)		22c. PRONOUNCED DEAD (Mo., Day, Yr.)		22d. AT	
21e. LICENSE NUMBER 5844		23a. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
24a. (Signature) <i>[Signature]</i>		24b. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)) Respiratory arrest		Interval between onset and death immediate	
PART I		(b) DUE TO, OR AS A CONSEQUENCE OF: Pneumonia		Interval between onset and death two weeks	
PART II		(c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I		Interval between onset and death	
25a. ACC., SUICIDE, HOMICIDE, UNDET. OR PENDING INVEST. (Specify) 25a		DATE OF INJURY (Mo., Day, Yr.) 25b		HOUR OF INJURY 25c	
25c. INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office, building, etc. (Specify) 25d		DESCRIBE HOW INJURY OCCURRED 25e	
26a. LOCATION		STREET OR R.F.D. No.		CITY OR TOWN STATE	



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

Date Issued: **MAY 26 1993**

Deputy Registrar

No. 028861



WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

EXHIBIT B

The following described real property, including all improvements, in the COUNTY OF LINCOLN, STATE OF NEVADA:

Beginning at a point 217.8 feet North of the East quarter corner of Section 8, T7S. R61E., MDB&M, said point being on the East boundary line of said Section 8, thence running West at right angles a distance of 400.0 feet to the TRUE POINT OF BEGINNING, thence continuing on the same course West a distance of 200.0 feet, thence running North at right angles a distance of 217.8 feet, thence running East at right angles a distance of 200.0 feet, thence running South at right angles a distance of 217.8 feet to the TRUE POINT OF BEGINNING, and containing One acre, more or less. Parcel No. 8-031-19.

100428

FILED AND RECORDED AT REQUEST OF
Farrel Lytle

June 1, 1993

11 MINUTES PAST 10 O'CLOCK

A.M. IN BOOK 106 OFFICE

RECORDS, PAGE 94 LINCOLN

COUNTY, NEVADA

Charles J. Lytle
COUNTY RECORDER