

WHEN RECORDED MAIL TO  
Ramona P. Foster  
P. O. Box  
Panaca NV 89042

RECORDED & RETURNED

102445

FILED AND RECORDED AT REQUEST OF  
Romona Price Foster  
September 28, 1994

AT 40 MINUTES PAST 2 O'CLOCK  
P.M. IN BOOK 111 OF OFFICIAL  
RECORDS, PAGE 94 LINCOLN  
COUNTY, NEVADA.

Yuriko Setzer

By Lillian Boucher COUNTY REC. Deputy

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA )  
COUNTY OF LINCOLN ) ss:

RAMONA P. FOSTER, being first duly sworn, deposes and says:  
That AVERY WILLIAM FOSTER, the decedent mentioned in the  
attached certified copy of Certificate of Death, is the same  
person as AVERY WILLIAM FOSTER named as one of the parties in  
that certain Grant, Bargain and Sale Deed, dated August 16,  
1989, executed by Edith C. Gappmayer to AVERY WILLIAM FOSTER and  
RAMONA P. FOSTER as joint tenants, recorded as Instrument No.  
92016, on August 17, 1989, in Book 86 Page 459. Office of County  
Recorder, Lincoln County, Nevada, concerning the following  
described real property in the Town of Panaca, County of Lincoln,  
State of Nevada:

All of Lot No. 95, Sun Gold Manor, in the Town of Panaca,  
County of Lincoln, State of Nevada, as said Lot is  
delineated and described on the Official Plat of said Town  
of Panaca, on file and of record in the Office of the County  
Recorder of Lincoln County, at Pioche, Nevada, to which said  
Plat reference is hereby made for further particulars,  
together with any and all improvements situated on the above  
lot.

Dated this 28<sup>th</sup> day of September, 1994.

Ramona P. Foster  
Ramona P. Foster

SUBSCRIBED AND SWORN TO BEFORE ME

this 28<sup>th</sup> day of September, 1994.

Margaret H. Jones  
Notary Public



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

Form with fields for DECEASED (Avery William POSTER), DATE OF DEATH (February 13, 1994), COUNTY OF DEATH (Lincoln), DECEASED'S RESIDENCE (Lincoln), FATHER (Walter Jennings Foster), MOTHER (Cleo Bell Miller), BIRTH (Oklahoma), OCCUPATION (Truck Driver), and CAUSE OF DEATH (Cardiopulmonary arrest).

This is to certify that the above is a true and correct copy of the certificate on file in this office. Date issued: FEB 24 1994. STATE REGISTRAR. Signature: Joanne. No. 052976. Deputy Registrar.