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AFFIDAVIT IN RE  
LELAND DONOHUE, DECEASED

TERMINATION OF JOINT TENANCY (NRS 111.365)

STATE OF NEVADA )  
COUNTY OF Lincoln ) SS

OWEN DONOHUE, being first duly sworn, deposes and says:

That affiant is the son of LELAND DONOHUE, Deceased. That Decedent died on the 3rd day of June, 1967. 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 LELAND DONOHUE and SADIE DONOHUE were the Grantees. That under the laws of the State of Nevada, upon the death of LELAND DONOHUE, the title and ownership of said real property became vested in SADIE DONOHUE as the surviving joint tenant. That said real property was acquired by a Deed dated 22nd day of October, 1974, and LELAND DONOHUE and SADIE DONOHUE were the Grantees.

That said Deed was recorded in Book M-1, Page 336, Lincoln County Records.

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

All of Lots Numbered Two (2), Three (3), Four (4) and Five (5) in Block Numbered Thirty-Nine (39), as said lots and Block are delineated on the official plat of said Town of Pioche, now on file and of record in the office of the County Recorder of said Lincoln County, Nevada, and to which plat and the records thereof, reference is hereby made for further description.

Together with any and all buildings and improvements situate thereon and the contents therein.

LAW OFFICES  
GARY D. FAIRMAN  
A PROFESSIONAL CORPORATION  
488 FIFTH STREET - P. O. BOX 8  
ELY, NEVADA 89301  
(702) 289-4428



STATE OF NEVADA DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH STATE OF NEVADA DEPARTMENT OF HEALTH AND WELFARE DIVISION OF HEALTH - SECTION OF VITAL STATISTICS

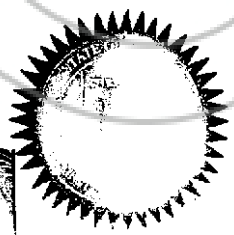
REGISTRAR'S NO. 163 CERTIFICATE OF DEATH STATE FILE NO. 67-001615

1. PLACE OF DEATH: STATE OF NEVADA A. COUNTY Lincoln B. CITY, TOWN, OR LOCATION Pioche C. Length of stay Life D. NAME OF HOSPITAL OR INSTITUTION Mill St. at Pioche Ave. E. IS PLACE OF DEATH INSIDE CITY LIMITS? YES [X] NO [ ] F. IS RESIDENCE ON A FARM YES [ ] NO [X] 2. USUAL RESIDENCE (If here document filed. If institution: Residence before admission) A. STATE Nevada B. COUNTY Lincoln C. CITY, TOWN, OR LOCATION Pioche 3. NAME OF DECEASED (First, Middle, Last) Leland Edgar Donohue 4. DATE (Month, Day, Year) OF DEATH June 3, 1967 5. SEX M. 6. COLOR OR RACE White 7. MARRIED [X] NEVER MARRIED [ ] WIDOWED [ ] DIVORCED [ ] 8. DATE OF BIRTH Sept. 1, 1902 9. AGE (In years last birthday) 64 10. USUAL OCCUPATION Rtd. Miner 11. BIRTHPLACE Pioche, Nevada 12. CITIZEN OF WHAT COUNTRY U.S.A. 13. FATHER'S NAME Francis Robert Donohue 14. MOTHER'S MAIDEN NAME Anna Viola Hammond 15. WAS DECEASED EVER IN U.S. ARMED FORCES? NO 16. SOCIAL SEC. NO. [REDACTED] 17. INFORMANT Sadie Donohue ADDRESS Box 343 Pioche, Nev 18. CAUSE OF DEATH PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) Coronary Occlusion Interval between onset and death Instant DUE TO (b) DUE TO (c) PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO THE TERMINAL DISEASE 19. WAS AUTOPSY PERFORMED? YES [ ] NO [X] 20A. ACCIDENT [ ] SUICIDE [ ] HOMICIDE [ ] 20B. DESCRIBE HOW INJURY OCCURRED 20C. TIME OF INJURY 20D. INJURY OCCURRED WHILE AT WORK [ ] NOT WHILE AT WORK [ ] 20E. PLACE OF INJURY 20F. CITY, TOWN, OR LOCATION Pioche, Nevada 20G. COUNTY Lincoln 20H. STATE Nevada 21. I attended the deceased from the time of death until the time of burial. I investigated the death. Death occurred at 9:00 P.M. on the date stated above; and to the best of my knowledge, from the causes stated 22A. SIGNATURE Rodney L. Chalkey (Degree or Title) Coroner 22B. ADDRESS Pioche, Nevada 22C. DATE SIGNED June 6, 67 23A. BURIAL CREATION, REMOVAL (Specify) Burial 23B. DATE 6-6-67 23C. NAME OF CEMETERY OR LOCATION (City, town, or county) Pioche Catholic Cem. Pioche, Lincoln, Nevada (State) 24. FUNERAL DIRECTOR Lincoln Co. Mortuary 98 Caliente 25. EMBALMER'S LIC. NO. ADDRESS 26. DATE REC'D BY LOCAL REG. 6-6-67 27. REGISTRAR'S SIGNATURE M.D.

BIRTH NO.

MEDICAL CERTIFICATION

VE-3 193



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

Date issued: MAY 14 1968

BOOK 135 390 M. D. State Registrar

COPY

NO. 111205

FILED AND RECORDED AT REQUEST OF  
GARY FAIRMAN

JUNE 26, 1998

AT 55 MINUTES PAST 10 O'CLOCK

AM IN BOOK 135 OF OFFICIAL

RECORDS PAGE 388 LINCOLN

COUNTY, NEVADA.

YURIKO SETZER

COUNTY RECORDER

BY *Julie Brucher* DEPUTY