When recorded mail to:

R. Joseph Collet 2330 Guardian Circle St. George, UT 84790

Mail Tax Notice to:

James R. Collet 4074 Mountain Loop Pocatello, ID 83204 FILED FOR RECORDING AT THE REQUEST OF

Richard Joseph Callet 2004 OCT 22 PM 3 00

LINCOLN COUNTY RECORDER

FEE 1 1 0 DEP

LESLIE BOUCHERAIS

AFFIDAVIT OF SURVIVING JOINT TENANT RE: DEATH OF JOINT TENANT

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STATE OF STA

Richard Joseph Collet, of legal age, being first duly sworn, declares as follows:

That he is the guardian and conservator for Bernal June Collet, surviving joint tenant (nee Rippe, hereinafter, "June"), and the biological son of June Collet and Rudolph Joseph Collet ("RJ"), the decedent mentioned hereinafter.

Further, that Rudolph Joseph Collet mentioned in the attached certified copy of Certificate of Death (Exhibit "B"), who was found dead May 31, 2002, and Bernal June Collet are the same persons as R.J. Collet and June Collet, respectively, named as the parties in that certain Deed dated November 24, 1999, executed by Rippe Family Trust dated March 30, 1989, June Rippe Collet Trustee as to an undivided 50% to R. J. Collet and June Collet, husband and wife, as joint tenants with the right of survivorship recorded as Entry No. 113697, in Book 145, at Page 235 of Official Records of Lincoln County,

Nevada covering the following described property situated in the City of Panaca, Lincoln County, State of Nevada:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF FOR THE COMPLETE LEGAL DESCRIPTION

TOGETHER WITH the tenements, hereditaments and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

Dated this 22nd day of **Manage**, 2004

Richard Joseph Collet Guardian and Conservator for and on behalf of Bernal June Collet, a protected woman

SUBSCRIBED AND SWORN to before me this 22nd day of October, 2004.

Notary Public

AMY ELMER
Motory Public State of Meyade
Mo. 04-90228-71
My appt. exp. July 9, 2008

EXHIBIT "A"

LEGAL DESCRIPTION

Parcel I:

Beginning at the Southeast corner of Lot Three (3) in Block Twenty-Two (22) and running thence North along the East line of said Lot 3 as distance of 130 feet to the true point of beginning, thence continuing North along said East line of said Lot 3 a distance of 8 feet; thence at right angles West a distance of 95 feet to a point; thence at right angles West a distance of 95 feet to a point; thence at right angles South a distance of 8 feet to the Northwest corner of the property now owned by said grantees; thence running East a distance of 95 feet to the true point of beginning.

Parcel II:

Beginning, at the Southwest corner of the parcel which is the Southeast corner of Block 22, Panaca Townsite from which the ¼ corner common to Section 4 (South ¼ cor.) and Section 9 (North ¼ cor.) all T 2 S, R68 E, M.D.M., bears N 87°11'40" E a distance of 1,997.56 feet; thence N 0°22'06" E a distance of 138.00 feet along the Easterly boundary of said Block 22 to the Northwest corner; thence S 89°37'54" E to a point a distance of 20.00 feet to the Northeast corner; thence S 0°22'06" W a distance of 138.00 feet, to the Southeast corner; thence N89°37'54" W along the Northerly boundary of Ernst Street a distance of 20.00 feet, to the Southwest corner, which is the point of beginning. Said parcel contains 2,760.0 square feet, (.0634 acres), more or less.

Ref: Book 145, Page 235 as Instrument No. 113697 Official Records, Recorded November 24, 1999.

Assessor's Parcel Numbers: 002-031-07 and 002-031-13



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

TYPE	LOCAL FILE NUMBER DECEASED—NAME First Middle									STATE FILE NUMBER		
OR PRINT	т		Middle		Last		TH (Month, Day, Ye	ar}	COUNTY OF DEATH			
PERMANENT BLACK INK	1. Rudolph CITY, TOWN OR LOCATION OF DEAT		Joseph HOSPITAL OR	COLLET	COLLET		² Found May 31,		2002 %Lincoln			
DECEDENT	». Рапаса		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and 3c. 369 Ernst Street			street and number)	Rm. Inpatient (or Inst. indicate DOA, OP/Emer. SEX oatlent (Specify)				
DECEDENT	RACE(e.g., White, Blace		Was Decedent of Hispanic Origin? Specify (1) use 51 no 15 year 1 ACC 1 and			act UNDER	1 YEAR UND	ER 1 DAY D.		4 Male		
	Indian, etc.) (Spe 5. White		specify Mexican, Cuban, 6.	Puerto Rican, etc.	Birthday	Birthday (Years) MOS DAYS HO			HS : MINS			
IF DEATH	STATE OF BIRTH	L	CITIZEN OF WHAT COUN- Decedent's Edi		7a. 81	ation. Specify highest MARRIED NEVER M		November 13, 1920 SURVIVING SPOUSE (If wife, give maiden name				
occurred in Institution	(If not U.S.A., name country) !Pa. California		9b. U.S.A.	grade complete	grade completed.		WINDWED DWORCED					
SEE HANDBOOK Regarding	SOCIAL SECURITY NUMBER		USUAL OCCUPATIO	N (Give Kind of Work Dor	Kind of Wark Done During Most of		(Specify) Married KIND OF BUSINESS OR INDUSTRY		12 Bernal June Rippe			
COMPLETION OF Residence Items	3.		Working Life, Even if Retired)				The second second	the same of the sa	\ \			
1	RESIDENCE—STATE COU		NTY Contractor CITY, TOWN,		BLOCATION 14b. Construc							
→	15a. Nevada	1535	T = T	İ	and the same of th		EET AND NUMBER		(Specify	CITY LIMITS Yes or No)		
		rst	Lincoln Middle	15c. Pana	Ca MOTHER-MAI	†5d.	369 Erns		15e. Y	es		
PARENTS	16. Dh.i.	lipp	T #			DEN NAME	First	Middle	,	Last		
	INFORMANT—NAME (Ty)	De or Print)	Josef Collet 17.			Julianna Punzenberger (Street or R.F.D. No., City or Town, State, Zip)						
	18a James R.	Co11o+			7				•			
•	BURIAL, CREMATION, AL	MOVAL, OTHER	R (Specify) CEM	ETERY OR CHEMATORY	633 Tinta	<u>Lane La</u>	s Vegas,	<u>Nevada</u>	89144			
	19a Burial	,	$\overline{}$	- N		/	LOCATION	City or T	OWN	State		
DISPOSITION	FUNERAL DIRECTOR (Or Person Acting as Such	IGNATURE /	FUNI	Panaca Ceme	etery E AND ADDRESS OF	SACILITY		naca, N				
Į	20a,	"_>>\友	LICE 20b.	NSE NUMBER	N	W1	scombe Fi	uneral	Home,	Inc.		
(21a. To the best of	my knowledge, d	eath occurred at the time	15 20c.	730 Front	Street	Caliente	<u> ⊇. Neva</u>	<u>da 8900</u>)8		
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6 de la lace	DATE SIGNED	(Mo., Day, Yr.)	HOUR O	F DEATH		(Signature and Titl DATE SIGNED (M	1) Marie	HOUR OF		PUTY CORONE		
	ნე 0¦≌ 21b.		21c.		empli er's (DATE SIGNED (III	74.	Ť				
CERTIFIER	21a 10 the best of my knowledge, death occurred due to the cause(s) stated. (Signature and Title) DATE SIGNED (Mo., Day, Yr.) 21b. NAME OF ATTENDING PHYSICIAN IF OTHER						=02 22c. Before 1240 DEAD (Mo., Day, Yr.) PRONOUNCED DEAD (Hour)					
	S 21d.						- N		•	ourj		
	NAME AND AD	DRESS OF CER	ITIFIER (PHYSICIAN, AT	TENDING PHYSICIAN, M	EDICAL EXAMINER, C	22d, ON ()5-()	31-02 pe or Priot i	22e. AT	1240 LICENSE NUMI	PED .		
Ĺ			ley P.O.		- N - 1		~ //	J)EN		
CONDITIONS	REGISTRAR	Dati Oow			oche Nev	ada 8904. SISTRAR (Mo. Dav	Yell DEATH DUE		23b,			
IF ANY WHICH GAVE	24a. (Signature)	-the	- DIT		1	(.) 50),		_	MOLE DISEASE	-		
IMMEDIATE CAUSE	HISE TO 246. YES NO. 246. YES NO. 100									onset and death		
IMMEDIATE CAUSE STATING THE UNDERLYING	PART (a) Card	iopulmo	nary Arres	F	1	1		•				
CAUSE LAST	DUE TO, OR AS A CONSEQUENCE OF:						Interval between onset and death					
	b) Organ	nic Hear	rt Disease			/		:		nset and death		
1	DUE TO, O	R AS A CONSEC	QUENCE OF:		//			- 1 E	ars erval between o	riset and death		
CAUSE OF	(c)		1					÷				
DEATH	PART OTHER SIGNIF	CANT CONDITION	ONS—Conditions contribu	iting to death but not resu	lling in the underlying o	ause given in Part 1	AUTOPSY	(Specify WAS	S CASE REFER	IRED TO		
							^{26.} No	es or No) COF	RONER (Specif)	/ Yes or No)		
	ACC., SUICIDE, HOM., UNI OF PENDING INVEST.	DET. DATE OF	INJURY (Mo., Day, Yr.)	HOUR OF INJURY	DESCRIBE HOW IN	JURY OCCURRED	I NO		res			
	(Specify) 28. ₃ .	2 8 b.			1 28d.							
1	INJURY AT WORK (Specify Yes or No)	PLACE (OF INJURY—At home, fa building, etc.	irm, street, factory, office (Specify)	LOCATION.	STREET OR F	I.F.D. No.	CITY OR TOV	WN STA	.TE		
1	280.	28f.		\-FF)	28g.							
1	. LAMAS .			/				.				
	THE WAY		STATE	REGISTRAR		-9		No . 2	231	78		
							,			· -		

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

Date Issued:

JUN 26 2002

THE SYNTESTAL SULL SURVEYIA

Sylva

State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT