

APN: _____

FILED FOR RECORDING
AT THE REQUEST OF

When recorded, mail to:
(here insert name and ANNE DEL VECCHIO Anne Del Vecchio
(address of the surviving 276-UNION-HILL RD.
(joint tenant) MANALAPAN, N.J. 2005 JAN 12 PM 3 29

LINCOLN COUNTY RECORDER
FEE 15.00
LESLIE BOUGHNER

AFFIDAVIT OF SURVIVING JOINT TENANT

STATE OF NEVADA)
) ss.
COUNTY OF LINCOLN)

ANNE DEL VECCHIO hereby swears (or affirms) under penalty of perjury, that the following assertions are true of his/her own personal knowledge:

- 1. I am over the age of twenty-one (21) years and competent to be a witness as to the matters hereinafter stated
- 2. I am ANNE DEL VECCHIO the same person named as ANNE DEL VECCHIO one of the grantees named in that certain _____ Deed recorded as Document No. _____ in Book _____, Page _____ of the Official Records, in the Office of the County Recorder of LINCOLN County, State of Nevada.
- 3. The real property which is the subject of the above-described deed is located in the County of LINCOLN, State of Nevada, and is known as BROCKHE- _____, _____, LINCOLN County, Nevada, and more specifically described as follows, to wit:

(legal description) LOT-14 - HIGHLAND KNOLLS
Assessor's Parcel No. 13-041-12

3. RONALD DEL VECCHIO (decedent), also one of the grantees named in said deed, is the identical _____ (decedent's name as shown on death certificate), named as decedent in that certain Death Certificate, a certified copy of which is annexed hereto and made a part hereof. I am WIFE's (describe family relationship, if any, of affiant to deceased joint tenant).

4. As recited in the above-described Certificate of Death, Ronald Del Vecchio died on Aug 17 2001 in (city) Neptune County, Ocean (state) N.J.

Anne Del Vecchio
(type affiant's name here)

(JURAT)

Lorraine Spitalnic 1/6/05
LORRAINE SPITALNIC
Notary Public, State of New Jersey
My Commission Expires 12/04/05





State of New Jersey
Office of Registrar of Vital Statistics
Township of Neptune, County of Monmouth

This is to certify that the following is correctly copied from a record of Death in my office.

**** Amended - Correction(s) on File ****

NAME OF DECEASED		DATE OF DEATH	
DONALD DEL VECCHIO		8/12/2001	
PLACE OF DEATH			
Jersey Shore Medical Center		Neptune Twp.	NJ
DECEASED'S RESIDENCE			
276 Union Hill Road, Manalapan, NJ 07726			
DATE OF BIRTH	AGE	Place of Birth	
7/15/1931	70	Newark, NJ	
SOCIAL SECURITY NUMBER	SEX	COLOR/RACE	MARITAL STATUS
[REDACTED]	Male	White	Married
MODE OF DEATH			
Natural			

Steven P. Hinds

Registrar of Vital Statistics

NEPTUNE MUNICIPAL COMPLEX
25 Neptune Blvd., Neptune, NJ 07753

7/26/2002

Date of Issue



Do not accept this copy unless the raised seal of the Board of Health of the Township of Neptune is affixed hereon