

125704

FILED FOR RECORDING
AT THE REQUEST OF

First American Title

A.P.N.: 004-141-22, 004-011-04 and 004-011-05
File No: 152-2231480 (MJ)

2005 DEC 27 PM 1 44

When Recorded return to, and mail Tax Statements to:
Sherrie M. Taylor
P.O. Box 456
Alamo, NV 89001

LINCOLN COUNTY RECORDER
FEE 16.00 DEPT
LESLIE BOUCHER

AFFIDAVIT - TERMINATING JOINT TENANCY

Sherrie M. Taylor, of legal age, being first duly sworn, deposes and says:

That **Robert Lee Chambers**, the decedent mentioned in the attached certified copy of Certificate of Death is the same person as **Robert Lee Chambers and Robert Chambers** named as one of the parties in that certain **Grant Deed** dated **June 9, 1993** executed by **Douglas Miller and Victoria W. Miller**, husband and wife to **Robert Lee Chambers and Sherrie M. Chambers**, husband and wife as joint tenants, recorded as Document No. **100541** on **June 24, 1993** in **Book 106, Page 254**, and the **Grant, Bargain and Sale Deed** dated **September 23, 1996**, executed by **Lee Chandler and Gale Chandler**, husband and wife to **Bruce L. Jacques, an unmarried man**, and **Sherrie Marie Chambers and Robert Chambers**, husband and wife all as **Joint Tenants with Right of Survivorship**, recorded as Document No. **106092**, on **October 21, 1996**, in **Book 121, Page 447** of Official Records of **Lincoln County, Nevada** covering the following described property situated in the County of **Lincoln, State of Nevada** :

PARCEL I:

THAT CERTAIN PARCEL OF LAND SITUATE IN THE SOUTHWEST QUARTER (SW 1/4) OF SECTION 5, TOWNSHIP 7 SOUTH, RANGE 61 EAST, M.D.B.&M., DESCRIBED AS FOLLOWS TO-WIT:

COMMENCING AT THE CORNER OF SAID SECTION 5, AS MARKED ON SIDE OF THE IRRIGATION DITCH, THENCE DUE WEST A DISTANCE OF 443 FEET TO THE TRUE POINT OF BEGINNING; THENCE CONTINUING DUE WEST A DISTANCE OF 120 FEET, THENCE DUE SOUTH A DISTANCE OF 140 FEET, THENCE DUE EAST A DISTANCE OF 120 FEET, THENCE DUE NORTH A DISTANCE OF 140 FEET TO THE TRUE POINT OF BEGINNING AND BEING ALL SITUATE IN LINCOLN COUNTY NEVADA.

APN: 004-011-04

NOTE: LEGAL APPEARED IN DOCUMENT RECORDED JUNE 24, 1993 IN BOOK 106 PAGE, 254 AS FILE 100541

PARCEL II:

A PORTION OF NORTHWEST 1/4, SECTION 5, TOWNSHIP 7 SOUTH, RANGE 61 EAST, MDB&M TOWN OF ALAMO, COUNTY OF LINCOLN, STATE OF NEVADA, BEING MORE SPECIFICALLY DESCRIBED AS FOLLOWS:

COMMENCING AT C 1/4, CORNER OF SAID SECTION 5 BEING AS "X" INSIDE OF CONCRETE DITCH; THENCE NORTH 89°05'36" WEST ALONG THE C1/4 SECTION LINE A DISTANCE OF 279.47 FEET TO THE TRUE POINT OF BEGINNING; THENCE CONTINUING NORTH 89°05'36" WEST A DISTANCE OF 260.13 FEET:

THENCE NORTH 62°03'20" EAST A DISTANCE OF 156.39 FEET; THENCE SOUTH 66°24'03" EAST A DISTANCE OF 119.10 FEET; THENCE SOUTH 75°56'18" EAST A DISTANCE OF 21.00 FEET; THENCE SOUTH 17°04'38" WEST A DISTANCE OF 25.76 FEET TO THE TRUE POINT OF BEGINNING.

APN: 004-141-22

NOTE: LEGAL APPEARED IN DOCUMENT RECORDED OCTOBER 25, 1996 IN BOOK 121 PAGE 447 AS FILE 106092.

PARCEL III:

COMMENCING AT THE CENTER OF SECTION 5, TOWNSHIP 7 SOUTH, RANGE 61 EAST, MOUNT DIABLO BASE & MERIDIAN, AS MARKED ON SIDE OF THE IRRIGATION DITCH; THENCE DUE WEST A DISTANCE OF 443 FEET TO THE TRUE POINT OF BEGINNING; THENCE SOUTH A DISTANCE OF 82 FEET; THENCE NORTH 84° 85 MINUTES EAST (4.85 NORTH) A DISTANCE OF 200.72 FEET, THENCE DUE NORTH A DISTANCE OF 65 FEET, THENCE DUE WEST A DISTANCE OF 200 FEET TO THE TRUE POINT OF BEGINNING.

APN: 004-011-05

NOTE: LEGAL APPEARED IN DOCUMENT RECORDED OCTOBER 25, 1996 IN BOOK 121 PAGE 447 AS FILE 106092

Sherrie M. Taylor 12-22-05
Sherrie M. Taylor Date

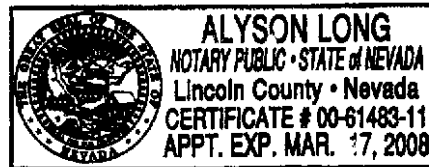
STATE OF NEVADA)
) ss.
COUNTY OF LINCOLN)

This instrument was acknowledged before me on
December 22, 2005

Sherrie M. Taylor

Alyson Long
Notary Public

(My commission expires: March 17, 2008)



**STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH — SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH**

LOCAL FILE NUMBER		DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
1. Robert Lee CHAMBERS		2 February 14, 2004		3a. Clark			
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)		If Hosp. or inst. Indicate DOA, OP/Emer. Rm. Inpatient (Specify)		SEX	
3b. Las Vegas		3c. Health South Hospital		3e. Inpatient		4. Male	
RACE—(e.g., White, Black, American Indian, etc.) (Specify)		Was Decedent of Hispanic Origin? Specify LI yes <input type="checkbox"/> no <input checked="" type="checkbox"/> If yes, specify Mexican, Cuban, Puerto Rican, etc.		AGE—Last Birthday (Years)		UNDER 1 YEAR	
5. Caucasian		6.		7a. 72		7b. : DAYS	
STATE OF BIRTH (If not U.S.A., name country)		CITIZEN OF WHAT COUNTRY		Decedent's Education. Specify highest grade completed.		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)	
9a. Texas		9b. USA		10. 12		11. Married	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired)		KIND OF BUSINESS OR INDUSTRY		DATE OF BIRTH (Mo., Day, Yr.)	
13. [REDACTED]		14a. Pipefitter		14b. Construction		8 Sept. 4, 1931	
RESIDENCE—STATE		COUNTY		CITY, TOWN, OR LOCATION		STREET AND NUMBER	
15a. Nevada		15b. Lincoln		15c. Alamo		15d. 345 N. Main St.	
INSIDE CITY LIMITS (Specify Yes or No)		FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last			
15e. Yes		16. Marvin Charles Chambers		17. Tommie Frances Bryan			
FATHER—NAME (Type or Print)		MOTHER—MAIDEN NAME (Type or Print)		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)			
18a. Sherrie M. Chambers		18b. 345 N. Main Street, Alamo, NV 89001					
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State			
19a. Cremation		19b. Desert Crematory		19c. Las Vegas Nevada			
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY			
20a. [Signature]		20b. 504		20c. Neptune Society of Nevada 8570 Del Webb Blvd., Las Vegas, NV 89134			
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated (Signature and Title)		DATE SIGNED (Mo., Day, Yr.)		HOUR OF DEATH		22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated. (Signature and Title)	
21b. 2-17-04		21c. 2215		22b. [Signature]		22c. [Signature]	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		21d.		22d. ON		22e. AT	
23a. Michael D. Schachter, M.D., 653 TownCenter Dr., #202, Las Vegas, NV				89144		LICENSE NUMBER	
23b. [Signature]		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		DEATH DUE TO COMMUNICABLE DISEASE			
24a. [Signature]		24b. FEB 19 2004		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)							
PART I (a) Cardiopulmonary Arrest						Interval between onset and death: 5 minutes	
(b) Coronary Artery Disease						Interval between onset and death: 15 years	
(c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I							
26. No		27. No					
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED	
28a.		28b.		28c. M		28d.	
INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)		LOCATION.		STREET OR R.F.D. No. CITY OR TOWN STATE	
28e.		28f.		28g.			

STATE REGISTRAR

No. 260211

"CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE DOCUMENT ON FILE WITH THE REGISTRAR OF VITAL STATISTICS, STATE OF NEVADA." This copy was issued by the Clark County Health District from State certified documents as authorized by the State Board of Health pursuant to NRS 440.175.

NOT VALID WITHOUT THE RAISED SEAL OF THE CLARK COUNTY HEALTH DISTRICT

DONALD S. KWALICK, MD, M.P.H.
Registrar of Vital Statistics

By: [Signature]
Date Issued: FEB 23 2004

CLARK COUNTY HEALTH DISTRICT
625 Shadow Lane P.O. Box 3902
Las Vegas, Nevada 89127
702-383-1223

Tax ID# 88-0151573

BOOK 203 PAGE 164
BOOK 210 PAGE 105