A.P.N. # 02-074-09 FILED FOR RECORDING ESCROW NO. 19032570 AT THE REQUEST OF RECORDING REQUESTED BY: COW COUNTY TITLE 2006 FEB 24 WHEN RECORDED MAIL TO: LINCOLY COUNTY REJURDS MARVELYN LOESER FEE/loss PO BOX 72 LESLIE BOUCHER PANACA NV 89042 (Space Above For Recorder's Use Only) AFFIDAVIT - DEATH OF JOINT TENANT STATE OF NEVADA SS. COUNTY OF LINCOLN MARVELYN L. LOESER of legal age, being first duly sworn, deposes and says: That HOWARD JOHN LOESER the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as named as one of the parties in that certain GBS DEED dated August 21, 19 executed by JAKE E. HALEY and FLORENCE E. HALEY, husband & wife HOWARD J. LOESER dated August 21, 1978 HOWARD J. LOESER and MARVELYN L. LOESER, husband and wife on November 06, 1978 63337 as joint tenants, recorded as Instrument No. , of Official Records of LINCOLN in Book 28 , Page 186 County, Nevada, covering the following described property situated in LINCOLN County, State of Nevada: SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF DATE: February 23, 2006 MARVELYN STATE OF WWW OFFICIAL SEAL C.L. FLAVION-ARNHART No: 99-5296-14 NOTARY PUBLIC, STATE OF NEVADA SS. COUNTY OF L NYE COUNTY, NEVADA My Appointment Exp. July 9, 2007 This instrument was acknowledged before me on by, MARVELYN L. LOESER Signature_ Notary Public (One Inch Margin on all sides of Document for Recorder's Use Only)

CERTIFICATION OF VITAL RECORD

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**

	_	LOCAL FILE NUMBER										STATE FILE NO	JMBER
TYPE R PRINT		DECEASED—NAME First	Middle						(Month, Day, Year)		COUNTY OF DEATH		
MANENT							ER 2. April 27 ame (If not either, give street and number)					3a.Lincoln	
ACK INK			JEAIH				not either, give sti	reet an	a number)	If Hosp, or Inst, in Rm, Inpatient (Sp	ndicate DO lecify)	A, OP/Emer.	SEX
EDENT		BACE IN A WHITE Black Amorio	on IW	3c. 225 Lo			yes, AGE—Las		UNDER 1 Y	3e. 'EAR UNDER	11000	LDATE OF BUILT	4 Male
		RACE—(e.g., White, Black, Americ Indian, etc.) (Specify)	sp	ecity Mexican, Cuban, P	uerto Rican	ecay ⊡ yes <u>(Al</u> no ir , etc.	Birthday (Y	(ears	MOS : D	AYS HOURS	MINS	1 1	H (Mo., Day, Yr.)
		5. White STATE OF BIRTH	6.	CITIZEN OF WHAT CO	OUN De	cedent's Education.	7a. 85		7b.	7c.	-	Sanuary	31, 1916
F DEATH Curred in		(If not U.S.A., name country)		TRY .	gra	ede completed.	Specify nighest	WI	DOWED, DIVO	RCED	i		If wife, give maiden name
stitution Hawobouk		90. Wisconsin SOCIAL SECURITY NUMBER		USUAL OCCUPATION	10	2. 47		11.	Mar	ried	12.	Marvely	n Boness
Egariding Ipletion of		SUCIAL SECONITY NUMBER		Working Life, Even if F	Retired)	or work bone burn	g Most of		The state of the s	IESS OR INDUSTR	нү		****
DENCE ITEMS		13. RESIDENCE—STATE	COUNTY	14a. Custod:	ian	Y, TOWN, OR LOCA		1		ool Dist	trict		
		RESIDENCE-STATE	COUNTY	1	Cir	Y, TOWN, OH LUCA	ATION		SIREE	TAND NUMBER			CITY LIMITS by Yes or No)
	_	15a. Nevada	15b.	Lincoln	15c.	<u>Panaca</u>				.55 Lee (
RENTS		FATHER-NAME First		Middle		Last	MOTHER-MAID	EN NA	ME FII	rst	Midd	le	Last
	\	16. Louis INFORMANT—NAME (Type or Pric		J•	Loe	ser	17.		Eliza				ueller
	-	INFOHMANT—NAME (Type of Phi	(זר			MAILING ADDRE	:55		(Street or H.	F.D. No., City or To	own, State	, ∠¢)	
		18a Marvelyn Loe	ser	(wife)			Box 72	Pa	anaca 🏑	Nevada 8	<u> 39042</u>		
		BURIAL, CREMATION, REMOVAL	, OTHER	(Specify) CEME	ETERY OR C	CREMATORY—NAM	5 7	N		LOCATION	City	or Town	State
OSITION		^{19a.} Burial		19b.]	Palm '	Valley Vi	ew Ceme	ter		19c. Las V			
		FUNERAL DIRECTOR—SIGNATU (Or Person Acting at Such)	RE	LICEN	RAL DIREC	The state of the s	- N.		Wisc	ombe Fur		-	
	_	20a.	<u> </u>	20b.	15	^{20c.} 730	Front	Sti	ceet C	aliente,	, Nev	ada 890	08
		21 Lighthe best of my know due to the cause(s) sta (Signature and Title) DATE SIGNED (Mo., D 21b. 04-27-0 NAME OF ATTENDING	rledge, dea ted.	ath occurred at the time.	date and p	lace and	, ,	22a. 0	On the basis of it the time, date	examination and/or and place and du	r investigation to the ca	tion, in my opinio ause(s) and mann	n death occurred er stated.
		(Signature and Title)		MAM	$\Delta \Delta_{\lambda}$	MIS			ture and Title)				
		DATE SIGNED (Mo., D	/		F DEATH 🕽	7	completed I		SIGNED (Mo.,	Day, Yr.)		OF DEATH	
	•	8€ 21b. 04-27-0 NAME OF ATTENDING		21c. 0		B		22b.	IOLAHOED DEN	D (Mo., Day, Yr.)	226.	CULICED BEAD	
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			OF OFFI	TIFIER (PHYSICIAN, AT	TENDING D	INCICIAN ASCINCA	L CVALUED OF	22d. C			22e. /	LICENSE NU	114050
			- \			•	- N	- \	, , ,,	,			
	\	23a R. Will	<u>ia</u> m	Katschke,	<u>м.р.;</u>	P.O. B	ox 1010	Ca	liente,	, NV 890	08	23b. 105	
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ANY H GAVE SE TO EDIATE	- L	24a. (Signature)	1/1/	Y ONE CAUSE PER LII	V5 500)4-27-04	_		24c. YES[A-4	n onset and death
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ING THE BLYING SE LAST	1	PART (a) Cardiac DUE TO, OR AS A	Arre	St	N			4				Immedia	ace on onset and death
1	/	1			The Park Persons		/ /	1					II CARREL AND CORE
		(b) Cardiomy							•			Years	en onset and death
		/			Santana .								TO COLOR AND GOODIN
SE OF			ve H	leart Failu	ire	to but now resulting is	n the underlying o	2058 6	iven in Part 1	AUTOPSY	(Specify	Years	FERRED TO
ATH					•	an aut not resulting a	ir eib diacilyilig b		,	Y	es or Na)	WAS CASE RE CORONER (Sp.	ecify Yes or No)
		Severe COPD:	Tob	ACCO Abus€ INJURY (Mo., Day, Yr.)	HOUR OF I	NAIRY I DE	SCRIBE HOW IN	BIRY	OCCURRED	^{26.} No		27. Yes	
		ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		- /	7%	1			2300/11/00				
- 4		28a.	28b.	- 1	28c.	M 28	d. ICATION.		TREET OR A.	ED No	CITY O	R TOWN	STATE
1	\.	INJURY AT WORK (Specify Yes or No)		OF INJURY—At home, 1 building, etc.	. (Specify)			•	,	i .D. 110.	01110		
	1	28e.	28f.		/	28	g.						<u> </u>

STATE REGISTRAR

No. 239577



49627

CERTIFIED COPY OF VITAL REÇORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

MAY 0 7 2004

DATE ISSUED: MAI U / 2004 STATE RESISTANT AND STATE RESISTANT AND



EXHIBIT "A"

LEGAL DESCRIPTION

ESCROW NO.: 19032570

All that certain real property situate in the County of Lincoln, State of Nevada, described as follows:

Lot 64 in SUN GOLD MANOR UNIT NO. 1, plat of which was recorded September 30, 1952, as Document No. 27842, in the Office of the County Recorder of Lincoln County, Nevada.

ASSESSOR'S PARCEL NUMBER FOR 2005 - 2006: 02-074-09

