



A.P.N.: 010-123-02

WHEN RECORDED MAIL TO:
BINGHAM & SNOW, LLP
840 Pinnacle Court, Suite 202
Mesquite, Nevada 89027

MAIL TAX STATEMENT TO:
Larry L. Hathhorn
1182 Pebble Beach
Mesquite, Nevada 89027

AFFIDAVIT TERMINATING JOINT TENANCY

STATE OF NEVADA)
)ss:
COUNTY OF CLARK)

Larry L. Hathhorn, being first duly sworn upon oath, deposes and states:

1. That he is a citizen of the United States, over the age of 21 years, and a resident of the State of Nevada, and competent to assert the matters set forth herein.
2. That he is the surviving spouse of Hazel Elizabeth Hathhorn, who passed away on the 13th day of August, 1991, and whose death is evidenced by the attached certified copy of Certificate of Death.
3. That Hazel Elizabeth Hathhorn, whose death is evidenced by the above-described Certificate of Death, is the one and same person as that certain Hazel E. Hathhorn, one of the grantees in that certain deed recorded on December 1, 1975, as Instrument No. 57500, in Book 16, of Official Records, Page 14, Lincoln County, Nevada in connection with the following described real property located in Lincoln County, State of Nevada and more particularly described as follows:

LOT 15, BLOCK 6 IN LINCOLN ESTATES SUBDIVISION UNIT 1, A PORTION OF THE SOUTH 1/2 OF SECTION 30, TOWNSHIP 3 SOUTH, R55E, MOUNT DIABLO MERIDIAN, LINCOLN COUNTY, NEVADA. SUBDIVISION MAP OF RECORD NO. 49097.

Dated: November 27, 2007.

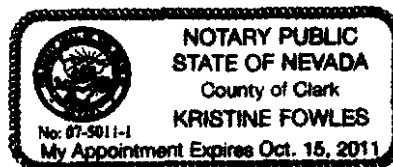
Larry L. Hathhorn

Larry L. Hathhorn

SUBSCRIBED AND SWORN TO before me
this 27 day of November, 2007.

Kristine Fowles

Notary Public in and for said County and State





0130640

Book: 238
Page: 5

12/03/2007
Page: 2 of 2

DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH — SECTION OF VITAL STATISTICS

003959

CERTIFICATE OF DEATH

TYPE OR PRINT IN PERMANENT BLACK INK

IF SIGNATURES IN THIS SECTION DO NOT COMPLY WITH REQUIREMENTS OF NEVADA

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

LOCAL FILE NUMBER		DECEASED—NAME		DATE OF DEATH (Month, Day, Year)		STATE FILE NUMBER	
1. Hazel Elizabeth HATHORN		2. August 13, 1991		3a. Clark			
3b. Indian Springs		3c. 350 Raleigh Lane		If Hosp. or Inst. indicate DOA, OP/Emor. Rm. Inpatient (Specify)		4. Female	
5. White		8. Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.		7a. 60		8. March 20, 1931	
9a. Idaho		9b. U.S.A.		10. 12		11. Married	
13. [Redacted]		14a. Homemaker		14b. Home		12. Larry Hathorn	
15a. Nevada		15b. Clark		15c. Indian Springs		15d. 350 Raleigh	
16. Tommy		17. Mabel		18. 350 Raleigh Lane		19. Indian Springs, Nevada 89018	
19a. Cremation		19b. Desert Crematory		19c. Las Vegas		20. Nevada	
20a. [Signature]		20b. [Signature]		20c. 1111 Las Vegas Blvd. N. #6		20d. Las Vegas, Nv. 89101	
21a. [Signature]		21b. 8/13/91		21c. 0815		22a. [Signature]	
21d. [Signature]		21e. [Signature]		21f. [Signature]		22b. [Signature]	
23a. Joseph Quagliana M.D. 3380 S. Eastern Las Vegas, Nevada		23b. 2881		24b. AUG 14 1991		24c. YES <input type="checkbox"/> NO <input type="checkbox"/>	
25. IMMEDIATE CAUSE		26. No		27. Yes		28. Yes	
28a. [Signature]		28b. [Signature]		28c. [Signature]		28d. [Signature]	
28e. [Signature]		28f. [Signature]		28g. [Signature]		28h. [Signature]	

STATE REGISTRAR

No. 027189

"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: NOV 16 1998

CLARK COUNTY HEALTH DISTRICT
625 Shadow Lane P.O. Box 3902
Las Vegas, Nevada 89127
702-383-1223
Tax ID# 88-0151573