	DOC # 0136618 10/25/2010 01.19 PM Official Record Recording requested By KURT DAVIS
After recording please return to: Name:	Lincoln County - NV Leslie Boucher - Recorder) Fee: \$16.00 Page 1 of 3 RPTT: Recorded By: DP Book- 259 Page - 0159
Address: City, State, Zip: Phone:	0136618
Assessor's Parcel Number 003-092-06)) —) —Above This Line Reserved For Official Use Only
 I, the undersigned Affiant, am over the age of the matters hereinafter stated. I declare that I is the grantees named in that certain Joint Tena as Document No. 109702, in Book 1 in the Office of the County Recorder of Lincoln 	being first duly sworn, deposes and states: f 21 years and competent to be a witness as to have knowledge of the facts stated herein.
follows: All of hot Numbere in the hincoln Parale A. of Calcade	Id Nive (9) Id: Tion to the City

4.	in said Deed, and is the decedent in the attached certified Death Certificate. The date and place of the decedent's death are set forth in the certified death certificate that is attached hereto and incorporated herein by this reference.
5.	The decedent was my Mother.
6.	This affidavit is made for the purpose of terminating the joint tenancy between myself and the aforementioned decedent in the within described property, said title now vesting in me,, as sole owner.
	DATED this the 25 day of October, 2010. Affiliant Kust Davis
SU	BSCRIBED AND SWORN to before me on
thi	s <u>35</u> day of <u>October</u> , 2010 by Kurt Davis
No	M. HOWARD NOTANY PUBLIC-SINCE of HERMAN Lincoln County • Neveden CERTIFICATE # 08-6688-11 APPT. EXP. December 10, 2011

N OF VITAL RECORD

CERTIFICATE OF DEATH
State File Number: 2008001405

Donna Marie Pierce

DECEDENT INFORMATION

Date of Death: February 3, 2008 City of Death: Cedar City

Age: 7

Place of Birth: Snoqualmie, Washington

Armed Services: No

Spouse's Name: Industry/Business:

Industry/Business: Own Home Calliente, Nevada

Mother's Name: Ethel Kelly

Facility or Address: Kolob Care & Rehabilitation

Time of Death: 00:45
County of Death: Iron

Date of Birth: June 7, 1928
Sex: Female
Marital Status: Widowed

Usual Occupation: Homemaker
Education: High School or GED

Father's Name: Gerth Davenport
Facility Type: Nursing Home/Assisted Living

INFORMANT INFORMATION

Name: Kurt Davis Relationship: Son

Mailing Address: 424 McArthur Circle, Caliente, Nevada 89008

DISPOSITION INFORMATION

Method of Disposition: Cremation

Cremation Date of Disposition: February 6, 2008

Place of Disposition: Southern Utah Crematory, Cedar City, Utah

FUNERAL HOME INFORMATION

Funeral Home: Southern Utan Mortuary - Cedar Gity

Address: 190 North 300 West, Cedar City, Utah 84720

Funeral Director: Richard S Boyer

MEDICAL CERTIFICATION

Certifying Physician: Ellen Gardner, 15 East 400 North, Parowan, Utah 84761

CAUSE OF DEATH

Alzheimer's 'Renal failure

Tobacco Use: Unknown if User

Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Issued: February 8, 2008

This is an exact reproduction of the document registered in the State Office of Vital Statistics.

Security features of this official document include: Intaglio Border, V & R Images in top cycloids, ultra violet fibers and hologram image of the Utah State Seal, over the words "State of Utah". This document displays the date, seal and signature of the State Registrar and the County/District Health Officer.

Barry E Mangle
Barry E. Nangle, State Registrar

Office of Vital Statistics

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David W. Blodgett
Director/Health Officer
County/District Health Department



