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Official Record

Recording requested By FIRST AMERICAN TITLE COMPANY

Lincoln County - NV Leslie Boucher - Recorder

Page 1 Fee: \$17.00 Recorded By: AE RPTT Book- 268 Page- 0183



AND WHEN RECORDED RETURN TO AND MAIL TAX STATEMENTS TO:

RECORDING REQUESTED BY

First American Title Insurance

Gary C. Carrigan 1235 MT Hwy 56 Noxon, MT 59853

Company of Nevada

Space Above This Line for Recorder's Use Only

A.P.N. 013-030-61

File No.: 151-2415738 (JH)

Affidavit - Death of Trustee

State of SS. County of

Gary C. Carrigan ("Declarant") is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

- Gary A. Carrigan ("Decedent") is the person referenced in the attached certified copy 1. of the Certificate of Death who died on July 18, 2011 at Callente, NV (city and state of death).
- Decedent is the same person named as the trustee named in that certain Declaration of Trust dated April 20, 1995 executed by Gary A. Carrigan as trustor(s) (the "Trust").
- Decedent as a trustee is the same person who was named as a grantee in that certain Grant, Bargain and Sale Deed dated 12/21/2004 which was recorded as Instrument No. 123589 in Book 195, Page 215, of Official Records of Lincoln County. Nevada as legally described as follows:

Legal Description attached hereto as Exhibit "A" and incorporated herein by this reference

Declarant is the successor trustee under the Trust. The Trust was in effect at the date of the death of the Decedent and has not been revoked. Declarant has consented to act as trustee under the Trust.

Dated: **DECLARANT:** Gary C. Carridan, Successor Trustee State of MONTANA)ss County of SANDERS SUBSCRIBED AND SWORN TO (or affirmed) before me the undersigned, a Notary Public in and for said County SANOCES and State MONTANA, this

day of December 20 11 by day of _ December , personally know to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.. MARY O. SHANKS NOTARY PUBLIC for the MARY O. SHANK
NOTARY PUBLIC for the Notarial sea on tana
Residing at Heron, Montana
My Commission Expir
August 02, 2014 WITNESS my hand and official seal. My Commission Expires Signature_ August 02, 2014 My Commission Expires: 8-2-2014 Notary Phone: 406 - 847 - 2557 County of Principal Place of Business. SANDERS Notary Registration Number: 324





PARCEL 1 OF PARCEL MAP FOR RICHARD E AND KORLA WARD RECORDED NOVEMBER 15, 2004 AS FILE NO. 123391, FILED IN THE OFFICE OF THE COUNTY RECORDER, LINCOLN COUNTY, NEVADA, LOCATED IN THE NORTHWEST QUARTER (NW 1/4) OF SECTION 2, TOWNSHIP 3 SOUTH, RANGE 67 EAST, M.D.B.&M.

A.P.N. 013-030-61



DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH ENTIFICATE STATISTICS

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238. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or PRIN) 248. REGISTRAR (Signature) 249. DATE RECEIVED BY REGISTRAR 240. DATE BY REGISTRAR	UNCED DEAD # 18:40	e. PRONOUN	.22e, I	MORY/YIT	_	. 75	796	g 22d		TIFIER	ier than ce	SICIAN IF OT	DING PHY			F 210
Deputy Coroner Tim Umins 1050 E.SR 322 Ploche, NV 89043 24a. REGISTRAR (Signature) JENELLE ENGLISH SIGNATURE AUTHENTICATED 24b. DATE RECEIVED BY REGISTRAR 24c. DEATH DUE TO COMMING (Morphy/Yr) July 27, 2011 YES N SIGNATURE AUTHENTICATED 25c. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LIME FOR (e), (b), AND (c).) Interval between the property of the prop		Took LICENS		DANS				SYALULE	MEDICAL	PHYRICIA	ATTENDIN	B /PLYSICIA	E TRANS			- 73
SIGNATURE AUTHENTICATED SIGNATURE AUTHENTICATED Multiple Cause (enter only one cause per lime for (e), (b), and (c).) PART I (a) Multiple Organ Failure DUE TO, OR AS A CONSEQUENCE OF: (b) DUE TO, OR AS A CONSEQUENCE OF: (c) DUE TO, OR AS A CONSEQUENCE OF: (d) PART II OTHER SIGNIFICANT CONDITIONS-conditions contributing to death but not resulting in the underlying cause given in Part 1. (Specify Yes or No.) TO ON	P033	1200, [10][10]		· Wa	cy (ryppe cr	43	V 8904	oche N	R 322 P	1050 E	in Umina	Coroner 1	Deputy		7,10,700	
SIGNATURE AUTHENTICATED 25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (e), (b), AND (c).) PART 1 (a) Multiple Organ Failure DUE TO, OR AS A CONSEQUENCE OF: (b) DUE TO, OR AS A CONSEQUENCE OF: (c) DUE TO, OR AS A CONSEQUENCE OF: (d) PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to dealin but not resulting in the underlying cause given in Part 1. (Specify Yes or No.) TO OTHER SIGNIFICANT CONDITIONS-Conditions contributing to dealin but not resulting in the underlying cause given in Part 1. (Specify Yes or No.) TO OTHER SIGNIFICANT CONDITIONS-CON	OMMUNICABLE			24c DI						SH	E ENGLI	JENELL	1	inature)	TRAR (Sig	la: REGIS
PART I OTHER SIGNIFICANT CONDITIONS-Conditions contributing to dealin but not resulting in the undertying cause given in Part 1. (Specify Yes or No.)	NO X	:S []	YES	W 7.	011	y 27, 20	July									<u>. 17.</u>
DUE TO, OR AS A CONSEQUENCE OF: DUE TO, OR AS A CONSEQUENCE OF: Interval betw OUE TO, OR AS A CONSEQUENCE OF: Interval betw (c) OUE TO, OR AS A CONSEQUENCE OF: Interval betw (d) PART II OTHER SIGNIFICANT CONDITIONS-Conditions committed that not resulting in the underlying cause given in Part 1. (Specify Yes or No.) TO OF	i between onset	•			W.	v Diena	1 A V)	(b), AND (c	NE FOR (e						
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(Specify Yes or No.)	al between onset	Interval br				132		2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		10 W	W ;	EQUENCE O	AS A CON	TO OR	OUE OUE	`₹.
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(V) (a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	27. WAS CASE			26	en in Part 1	ause giver	enlying ca	in the und	ot resulting	to death bu	ns contributing	ONS-Conditio	CONDIT	NIFICANT	THER SIGI	ART IL O
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AND DESIRISHED INDICATION IN THE PROPERTY OF T	TO CORONER or No)				<i>7</i> *.				1000							
OR PENDING INVEST. (Specity)	TO CORONER or No.)		e elektrica At t	,	OCCURRE	W INJURY C	RIBE HOW	28d. DESC	FINJURY	28c, HOUR	lo/Day/Yr)	EOF INJURY (28b. DA	i., UNDET.	ACIDE, HOW	a. ACC., St
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Yes or No.) building, etc. (Specify)		Yes or No) No	- 1. 77. - 76.6	<u> </u>							Y-At home, fo	ACE OF INJUI	ly 281 PL	ineckly)	INVEST. (S	R PENDING



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DATE ISSUED: 07/28/2011

