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02/15/2017 Official Record Recording requested By RUSSELL E. WAITE After recording please return to: Lincoln County - NV Leslie Boucher - Recorder Name: Russell E. Waite Fee: \$17.00 Page 1 Recorded By: HB Book- 309 Page- 0203 POBOX 414 Address: City, State, Zip: ALAMO NV 89001 Phone: 702-192-4171 004-011-04 Assessor's 004-011-17 Parcel Number -Above This Line Reserved For Official Use Only AFFIDAVIT TERMINATING JOINT TENANCY Pursuant to NRS 40.525(5) and NRS 111.365 STATE OF NEVADA COUNTY OF LINCOLN Russell Gore ValAiTE , being first duly sworn, deposes and states: 1. I, the undersigned Affiant, am over the age of 21 years and competent to be a witness as to the matters hereinafter stated. I declare that I have knowledge of the facts stated herein. 2. I am Kusrell Barl WAITE , the same person named as one of the grantees named in that certain Joint Tenancy Deed recorded on 2005 DFC 27 , as Document No. 125706, in Book 210, Page 110, of the Official Records in the Office of the County Recorder of Lincoln County, State of Nevada.

The property described in the above-referenced deed is located in Lincoln County, Nevada commonly known as 333 N. MANUST + 357 NUMBER, described as follows:

APN: 004-011-04 THAT CERTAIN PARCEL OF LAND SITUATE IN THE SOUTHWEST QUARTER (SW /4) of SECTION 5, TOWNSHIP 7 SOUTH, PAIRS

COMMENCING AT THE BURNER OF SALD SECTION S. AS MARKED ON SIDE OF I PRIGATURE DITCH. THEMES DUE WEST A DISTANCE OF 443 FEET TO THE TRUE POUT of Beginning; THENCE CONTINUIN DUE WEST A DISTANCE of 120 feet, THENCE DUE SOUTH A DISTANCE OF 140 FEST, THONG DUE GAST A DISTANCE OF 120 FEET, THENCE DUE MORTH A DISTANCE of 140 FEET to the True Pour of Bagwing AND BEING All situate in Lincoln

61 GAST, M. D. B. L.M. DESCRIBED AS FOLLOW TO-WIT:

COUNTY NEWNA

3. CONTUNED

APN: 004 - 011-17

ADDIUSTMENT A OF THE SWY4 T7N, R 615, MDB+M AS RECORDED IN THE LINCOLN COUNTY RECORDER'S OFFICE, DOC#133949, BOOK C PG 481



4.	("the decedent") was one of the Grantees, named 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 Spous E.
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, used the warts, as sole owner.
	DATED this 15 day of Fishery, 2017, Affiant
	SBSCRIBED AND SWORN to before me on s Diday of February, 2017 by Russell Earl Wark
No	M. HOWARD Notary Public State of Nevada My Commission Expires: 12-10-19 Certificate No: 08-5568-11

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	0120330	Page	206

02/15/2017

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OF FLORIDA

MARKED PAPER. HOLD TO LIGHT TO VERIFY FLORIDA WATERMARK.

BUREAU of VITAL STATISTICS

CERTIFICATION OF DEATH

SSN:

STATE FILE NUMBER: 2016166999

DATE ISSUED: November 10, 2016

DECEDENT INFORMATION

STATE FILE DATE: November 9, 2016

NAME: JOYCE BEVERLY WAITE

DATE OF DEATH: November 2, 2016

SEX: FEMALE

AGE: 064 YEARS

DATE OF BIRTH: October 2, 1952

BIRTHPLACE: DETROIT, MICHIGAN, UNITED STATES PLACE WHERE DEATH OCCURRED: INPATIENT

FACILITY NAME OR STREET ADDRESS: BAPTIST HOSPITAL LOCATION OF DEATH: PENSACOLA, ESCAMBIA COUNTY, 32501

SURVIVING SPOUSE, DECEDENT'S RESIDENCE AND HISTORY INFORMATION

MARITAL STATUS: MARRIED

SURVIVING SPOUSE NAME: RUSSELL EARL WAITE

RESIDENCE: 333 NORTH MAIN STREET, ALAMO, NEVADA 89001, UNITED STATES

COUNTY: LINCOLN

OCCUPATION, INDUSTRY: PUBLIC SCHOOL TEACHER, EDCUATION

X White Black or African American Asian Indian Chinese RACE: _American Indian or Alaskan Native--Tribe: Japanese

Filipino Native Hawaiian Vietnamese Korean

Guamanian or Chamorro

___Samoan

Other Pacific Isl:

Unknown

Other: Other Asian: HISPANIC OR HAITIAN ORIGIN? NO, NOT OF HISPANIC/HAITIAN ORIGIN

EDUCATION: MASTERS DEGREE

EVER IN U.S. ARMED FORCES?NO

PARENTS AND INFORMANT INFORMATION

FATHER/PARENT: GEORGE HOWARD FABER MOTHER/PARENT: MARY SUE PRESTON INFORMANT: RUSSELL EARL WAITE HUSBAND

RELATIONSHIP TO DECEDENT:

INFORMANT'S ADDRESS: 333 NORTH MAIN STREET, ALAMO, NEVADA 89001, UNITED STATES

PLACE OF DISPOSITION AND FUNERAL FACILITY INFORMATION

PLACE OF DISPOSITION: PENSACOLA CREMATORY

PENSACOLA, FLORIDA

METHOD OF DISPOSITION: CREMATION

FUNERAL DIRECTOR/LICENSE NUMBER: ROBERT E. YOUNG, F045036

FUNERAL FACILITY: TRAHAN FAMILY FUNERAL HOME F041209

419 YOAKUM COURT, PENSACOLA, FLORIDA 32505

CERTIFIER INFORMATION

TYPE OF CERTIFIER: CERTIFYING PHYSICIAN

MEDICAL EXAMINER CASE NUMBER: NOT APPLICABLE

DATE CERTIFIED: November 7, 2016

TIME OF DEATH (24 hr): 0917

CERTIFIER'S NAME: JOHN MICHAEL BRAY CERTIFIER'S LICENSE NUMBER: ME38578

NAME OF ATTENDING PHYSICIAN (If other than Certifier): NOT ENTERED

, State Registrar

REQ: 2017557670

WARNING:

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE. THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATER-MARKS. THE DOCUMENT FACE CONTAINS A MULTICOLORED BACKGROUND, GOLD EMBOSSED SEAL, AND THERMOCHROMIC FL. THE BACK CONTAINS SPECIAL LINES WITH TEXT. THE DOCUMENT WILL NOT PRODUCE



DH FORM 1946 (03-13)

