



0153980

A.P.N.#001-341-10RECORDING REQUESTED BY:
Nevada Legal Forms & Services
3901 W. Charleston Blvd
Las Vegas, Nevada 89102MAIL TAX STATEMENTS AND
CINDY ANN FLOYD
4511 Buckeye Avenue
Las Vegas, Nevada 89102

AFFIDAVIT-TERMINATION OF JOINT TENANT

Death of a Joint Tenant

I, **CINDY ANN FLOYD**, the Affiant and of being of legal age, and being first duly sworn, deposes and says:

That **WILLIAM RUSSEL FLOYD** the Decedent mentioned in the attached certified copy Certificate of Death, is the same person as, **WILLIAM R. FLOYD**, named as one of the parties in that certain Grant, Bargain, Sale Deed, Dated August 21, 2003, and executed by J & S Properties, a Nevada Limited Liability Company, known as Grantor(s), to **WILLIAM R. FLOYD** and **CINDY ANN FLOYD**, Husband and Wife, as Joint Tenants, and recorded as Instrument Number 120855, on September 3, 2003, in Book 177 of Official Records of Lincoln County, Nevada, covering the following described property situated in the County of Lincoln, State of Nevada:

Commonly Known Address:

211 Juniper Street
Pioche, Nevada 89043

Legal Description:

Parcel No. 49 as shown on Parcel Map for JAMES VINCENT, filed in the office of the County Recorder of Lincoln County on March 8, 1999, in Book B of Plats, Page 193, as File No. 112429; and amended by Certificate of Amendment, recorded March 17, 1999, in Book B of Plats, Page 200 A/B, as File no. 112466; being a portion of the Northeast Quarter (NE 1/4) of Section 15, Township 1 North, Range 67 East, M.D.B. and M., Lincoln County, Nevada.

PARCEL NO: 001-341-10



Affiant finally states that less than forty (40) days have passed since the death of the decedent as evidenced by a Certified copy of the death certificate attached hereto.

Excepting therefrom the mobile home or manufactured housing unit and appurtenances, if any, located on said land.

In Witness Whereof, I have hereunto set my hand this 1 day of March, 2018.

Cindy Ann Floyd

CINDY ANN FLOYD
Nevada Legal Forms & Services
3901 W. Charleston Blvd.
Las Vegas, Nevada 89102
Tel: (702) 870-8977
Registrant: Ruby Jean Nelson
No. NVDP201617764

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State of Nevada

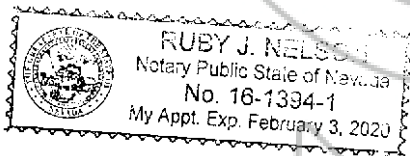
County of Clark

RUBY NELSON

On March 1, 2018, before me, _____, a Notary Public, personally appeared before me, **CINDY ANN FLOYD**, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged that he or she executed it, and that by his or her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of Nevada that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Notary Public: *Ruby Nelson*
My Commission Expires: 02-03-2020

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH VITAL STATISTICS

CASE FILE NO. 3992122

CERTIFICATE OF DEATH

2017022972 STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

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

Main form containing fields for deceased name (William Russell FLOYD), date of death (December 07, 2017), county (Clark), birth date (January 20, 1941), parents (Russell FLOYD, Olive LAWLESS), certifier (KARLEEN CAROL ADAMS DO), registrar (SUSAN ZANNIS), and cause of death (Metastatic Lung Cancer To Liver And Mediastinum).

LOCAL REGISTRAR

"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 Southern Nevada Health District from State certified documents authorized by state Board of Health pursuant to NRS 440.175.

VRS-Rev-20120523a



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DATE ISSUED: DEC 12 2017

This copy not valid unless prepared on watermarked security paper displaying date, seal and signature of Registrar.

SOUTHERN NEVADA HEALTH DISTRICT • P.O. Box 3902 • Las Vegas, NV 89127 • 702-759-1010 • Tax ID # 88-0151573

Registrar of Vital Statistics

By: Mary Wilson

