

APN: 010-171-01; 010-171-02; 010-171-05;  
010-171-06; 010-171-07; 010-171-08

Recording requested by:  
Priscilla E. Travis

When recorded mail to and  
mail tax statements to:

Priscilla E. Travis  
9631 Old Mill Street  
Rachel, Nevada 89001

Space reserved

LINCOLN COUNTY, NV      **2022-163142**  
Rec:\$37.00  
Total:\$37.00      **10/12/2022 12:15 PM**  
BRADSHAW LAW GROUP      Pgs=3 AE



OFFICIAL RECORD  
AMY ELMER, RECORDER

**AFFIDAVIT TERMINATING JOINT TENANCY**  
**Pursuant to NRS 40.525(5) and NRS 111.365**

STATE OF NEVADA      )  
                                  )ss.  
COUNTY OF LINCOLN    )

PRISCILLA E. TRAVIS, being first duly sworn, deposes and states:

1. I am the undersigned Affiant, am over the age of 21 years and competent to be a witness as to the matter hereinafter stated. I declare that I have knowledge of the facts stated herein.
2. I am PRISCILLA E. TRAVIS, the same person named as one of the Grantees named in that certain Joint Tenancy Deed recorded on August 23, 2000, as Document Number 115048, in Book 150, Page 173, of the Official Records in the Office of the County Recorder in Lincoln County, Nevada.
3. The property described in the above-referenced deed is located in Lincoln County, Nevada and described as follows:

A portion of the Northwest Quarter (NW ¼) and Southwest Quarter (SW ¼) of the Northeast Quarter (NE ¼) of Section 36, Township 3 South, Range 55 East, MDB&M, more particularly described as follows:

Lots 1, 2, 5, 6, 7, and 8 of Block 2 of Sunset Acres, Tract No. 1 as shown on the Subdivision Map thereof recorded October 6, 1975 in the Office of the County Recorder of Lincoln County, Nevada in Book A of Plats, page 117, as File No. 57314, Lincoln County, Nevada records.

Assessor Parcel Nos.: 10-171-01, 10-171-02, 10-171-05, 10-171-06, 10-171-07, and  
10-171-08

4. JOE H. TRAVIS (the Decedent) was one of the Grantees named in said Deed and is the Decedent in the attached certified Death Certificate. The Decedent died on September 13, 2003, in St. George, Washington County, Utah, as set forth in the attached death certificate and is incorporated herein by this reference.
5. The Decedent was my spouse.

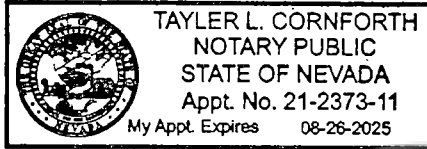
6. This affidavit is being made for the purpose of terminating the joint tenancy between myself and the Decedent in the described property, said title now vesting in me, Priscilla E. Travis, as sole owner.

DATED this 27 day of August, 2022.

*Priscilla E. Travis*  
PRISCILLA E. TRAVIS

SUBSCRIBED and SWORN before me on this 27<sup>th</sup> day of August 2022, by Priscilla E. Travis

*Taylor L. Cornforth*  
NOTARY PUBLIC, in and for the STATE OF NEVADA, COUNTY OF LINCOLN




# STATE OF UTAH CERTIFICATION OF VITAL RECORD

LOCAL FILE NUMBER: <b>25 2003 07-553</b>		<b>CERTIFICATE OF DEATH</b>		STATE FILE NUMBER: <b>2003 009869</b>	
1. NAME OF DECEDENT: <b>JOE TRAVIS</b>		2. SEX: <b>Male</b>		3. DATE OF DEATH (Mo., Day, Yr.): <b>Sept 13, 2003</b>	
4. DATE OF BIRTH (Mo., Day, Yr.): <b>July 27, 1939</b>		5. AGE: Last Birthday: <b>64</b>		6. BIRTH PLACE (City & State or Foreign Country): <b>Golden, Texas</b>	
7. PLACE OF BIRTH (Check codes for Hospitals, etc.): <b>Golden, Texas</b>		8. OTHER LOCATIONS: <b>Golden, Texas</b>		9. SURVIVING SPOUSE (If none, give maiden name): <b>Priscilla Elaine Kaller</b>	
10. DECEASED (Check codes for Hospitals, etc.): <b>1. Inpatient</b>		11. MANNER OF DEATH: <b>1. Inpatient</b>		12. DECEASED'S USUAL OCCUPATION (Only kind of work done during usual of working life. Do NOT enter retired): <b>Carpenter</b>	
13. CITY, TOWN OR LOCATION OF DEATH: <b>St. George</b>		14. COUNTY OF DEATH: <b>Washington</b>		15. KIND OF BUSINESS OR INDUSTRY: <b>Construction</b>	
16. MARITAL STATUS: <b>2. Married</b>		17. RESIDENCE - STREET AND NUMBER: <b>MC 61 Box 45</b>		18. CITY, TOWN OR COMMUNITY: <b>Alamo</b>	
19. STATE: <b>Nevada</b>		20. ZIP CODE: <b>89001</b>		21. EDUCATION (Specify only highest grade completed): <b>College (15-18 or 17+)</b>	
22. PARENTS: <b>Milton Rutalesis TRAVIS</b>		23. MOTHER'S MAIDEN NAME: <b>Mary Geneva Higgins</b>		24. HOUSE RELATIONSHIP AND MAILING ADDRESS OF INFORMANT: <b>Priscilla Elaine TRAVIS, MC 61 Box 45, Alamo, Nevada 89001</b>	
25. METHOD OF DISPOSITION: <b>5. Cremation</b>		26. DATE OF DEPOSITION: <b>Sept 18, 2003</b>		27. PLACE OF DEPOSITION (Name of cemetery, crematory, or other place): <b>Metcalfe Mortuary</b>	
28. DATE OF CERTIFICATION: <b>9/10/03</b>		29. SIGNATURE OF CERTIFYING PHYSICIAN: <i>[Signature]</i>		30. DATE FILED (Mo., Day, Yr.): <b>SEP 17 2003</b>	
31. REGISTERAR'S SIGNATURE: <i>[Signature]</i>		32. DATE REGISTERAR NOTIFIED OF DEATH: <b>SEP 17 2003</b>		33. DATE FILED (Mo., Day, Yr.): <b>SEP 17 2003</b>	
34. PART I: ENTER THE DISEASE, INJURY OR COMPLICATION THAT CAUSED THE DEATH. DO NOT ENTER THE MODE OF DYING, SUCH AS COLLAPSE OR RESPIRATORY ARREST, SHOCK OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE.		35. IMMEDIATE CAUSE (of disease or condition resulting in death): <b>arrhythmic collapse of lungs (not pneumothorax)</b>		36. SEQUENTIAL CAUSES (list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (disease or injury that initiated events resulting in death) LAST): <b>myocardial infarction</b>	
37. MANNER OF DEATH: <b>2. Accident</b>		38. DATE OF INJURY (Mo., Day, Yr.):		39. TIME OF INJURY (24 Hour Clock):	
40. LOCATION (Name of hospital, home, city or town, county and state):		41. PLACE OF BURYING (Name, firm, street, factory, office, building, etc. (Specify)):		42. DATE OF BURYING (Mo., Day, Yr.):	
43. DISCREPANCY (If any, specify):		44. SIGNATURE OF REGISTERAR:		45. DATE OF SIGNATURE:	

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 UDH-508  
 Form 12,  
 Rev. 12/00

DATE ISSUED  
SEPTEMBER 14, 2022

This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics. Security features of this official document include: Intaglio Border, V & R images in top cycloids, and intaglio microtext. This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.

  
 Linda S. Winger, MSW, LCSW  
 State Registrar  
 Rev. 12/20



UTAH DEPARTMENT OF HEALTH  
 Office of Vital Records & Statistics  
 Salt Lake City, Utah

