LINCOLN COUNTY, NV

\$37.00

2024-166567

Rec:\$37.00

01/29/2024 10:10 AM

NETCO

Pgs=4 KC

OFFICIAL RECORD

AMY ELMER, RECORDER

APN: 001-091-07

When recorded mail along with tax statement to: The Evans Family Trust 69818 Ponderosa Lane Pendleton, Or 97801

### **CERTIFICATE OF INCUMBENCY**

State of Nevada County of Lincoln

Garry Evans, Trustee, being first duly sworn, deposes and states:

- Jerry Buck Evans and Nancy Lola Evans created the trust commonly known as Evans Family Trust 2001 dated April 16<sup>th</sup>, 2001 also known as the Evans Family Trust. Wherein Jerry B. Evans and Nancy L. Evans were designated as the Original Trustees
- Jerry Buck Evans and Nancy Lola Evans are the decedents in those certain Death Certificates of which is annexed hereto and made a part hereof.
- As set for under Article XVIII of said Trust:
   The Evans Family Trust 2001 dated April 16<sup>th</sup>, 2001 is designated as the Successor Trustee of said Trust and does hereby file this Certificate.

DATED this 23 day of IN , 2024

By: Garry Evans, Successor Trustee of the Evans Family Trust 2001

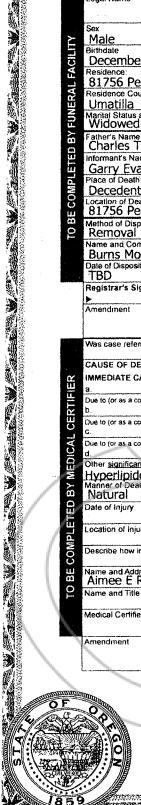
State of OR County of UNION the person (s) whose name (s) (s) are subscribed to the within instrument and acknowledged to me that he she/they executed the same in his/her/their authorized capacity (ies), and that be his/her/their signature (s) on the instrument the person (s), or WITNESS my and official seal. (Notary Public) My Commission Expires: OFFICIAL STAMP ROBERT S AGUILAR NOTARY PUBLIC - OREGON COMMISSION NO. 1011249 MY COMMISSION EXPIRES APR. 28, 2025

# 1005663

## **OREGON HEALTH AUTHORITY** CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

136-2022-019285

	I.D. MG NO.		OLIVIII IOMIL	OI DEPUT		STATE FILE NUMBER	
	Legal Name First Jerry	Middle Buck	Last Evans	Si	uffix Dea	June 16, 2022	
_	Sex Male	<sup>Age</sup> 86 year	Social Security Number		County of Death Umatilla		
FACILITY	Birthdate December 13, 1935	December 13, 1935 Grand Junction, Colorado			Was Decedent Ever in U.S. Armed Forces? NO		
L FA	Residence: 81756 Peach Tree Lane			City/Town Umatilla			
ERA	Residence County State or Foreign Country Umatilla Oregon			Zip Code + 4 97882	Insi No	de City Limits?	
BY FUNERAL	Marital Status at Time of Death Widowed Spouse's Name Prior to First Marriage						
ED BY	Father's Name Prior to First Mamage Charles Truman Evans Mother's Name Prior to First Mamage Wilma M. Hatcher						
ETE	Informant's Name  Garry Evans  Telephone Number Not Available  Relationship to Decedent Son  Relationship to Decedent 69818 Ponderosa Lane, Pendleton, OR 97801						
BE COMPLET	Place of Death Facility Name Decedent's Residence						
ECC	Location of Death 81756 Peach Tree Lane		City/Town or Loca Umatilla	ition of Death	State Oregon	Zip Code + 4 97882	
TO B	Method of Disposition Removal From State	ition lesa Cemetery	<u> </u>	Location (City/Town and State) Grand Junction, Colorado			
	Name and Complete Address of Funer Burns Mortuary Of Herm	iston	685 W He	rmiston Avenue, He	rmiston, Oreg	on 97838	
Date of Disposition   Funeral Director's Signature   Electronically   OR License Number   TBD   John A Johnson   Signed   CO-1						CO-3580	
	Registrar's Signature  Jenn	nifer A. Wood	lward	Date Received June 17, 2022	Local File f	Jumber 349	
	Amendment						
		and the same of th	The same of the sa	The second secon			
	Was case referred to Medical Examine	Yes Auto	psy? Were autops	y findings available to complet	e the cause of death?	Time of Oeath Found 1148	
	CAUSE OF DEATH IMMEDIATE CAUSE					Approximate Interval: Onset to Death	
	a Probable Acute Myocardial Infarction					Minutes to Hours	
RTI	Due to (or as a consequence of) ♥ Probably Coronary Atherosclerosis  Due to (or as a consequence of) ♥					Years	
C	Typertension and Hyperlipidemia  Due to (or as a consequence of)   Due to (or as a consequence of)   Due to (or as a consequence of)   The to (or as a consequence of)   Due to (or as a consequence of)   The to					Years	
IMMEDIATE CAUSE Probable Acute Myocardial Infarction  Due to (or as a consequence of) Probably Coronary Atherosclerosis  Due to (or as a consequence of) Hypertension and Hyperlipidemia  Years  Due to (or as a consequence of) Unity to (or as a consequence of) Other significant conditions contributing to death							
4	Hugoslinidomía: Mitra Value Requesitation: Agric Angunem						
BYM	Hyperlipidemia; Mitral Valve Regurgitation; Aortic Aneurysm  Manner of Death Not Applicable Not Applicable No					se contribute to death?	
ED	Date of Injury Time	e of Injury F	lace of Injury			Injury at Work?	
닖	Location of Injury						
2	Describe how injury occurred  If Iransportation injury, specify.						
္ပ	Describe how injury occurred	· · · · · · · · · · · · · · · · · · ·		li tr	ansponation injury, st	pecity.	
BE COMPLET	Name and Address of Certifier Aimee E Rogers			St. Anthony Way, Pe	endleton, Oreg		
TO BE CO	Name and Address of Certifier Aimee E Rogers Name and Title of Attending Physician	<u>if</u> Other than Certi		St. Anthony Way, Pe	endleton, Oregonal Date Signed June 17	gon 97801 7, 2022	
	Name and Address of Certifier Aimee E Rogers Name and Title of Attending Physician Medical Certifier			St. Anthony Way, Po	endleton, Oreg Date Signed June 17     License	gon 97801 7, 2022 Number	
	Name and Address of Certifier Aimee E Rogers Name and Title of Attending Physician Medical Certifier  Aimee E		fier  **Electronically**	St. Anthony Way, Pe	endleton, Oreg Date Signed June 17     License	gon 97801 7, 2022	
	Name and Address of Certifier Aimee E Rogers Name and Title of Attending Physician Medical Certifier		fier  **Electronically**	St. Anthony Way, Po	endleton, Oreg Date Signed June 17     License	gon 97801 7, 2022 Number	



DATE ISSUED:

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORDS FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS.

June 21, 2022

JENNIFER A. WOODWARD, Ph.D. STATE REGISTRAR

\*20220625052\*



THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER ANY AUTERATION OF ERABURE VOIDS THIS CERTIFICATE.

# TATE OF WASHINGTON DEPARTMENT OF HEALTH

### CERTIFICATE OF DEATH

CATE OF DEATH

LOCAL FILE NUMBER: 592

DATE ISSUED: 06/18/2021 FEE NUMBER: 0201-1979

CERTIFICATE NUMBER: 2021-019486

FIRST AND MIDDLE NAME(S): NANCY LOLA

LAST NAME(S): EVANS

COUNTY OF DEATH: ADAMS
DATE OF DEATH: APRIL 20, 2021
HOUR OF DEATH: 04:00 PM

SEX: FEMALE

AGE: 85 YEARS

SOCIAL SECURITY NUMBER:

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE: JANUARY 28, 1936 BIRTHPLACE: GRAND JUNCTION, CO

MARITAL STATUS: MARRIED SURVIVING SPOUSE: JERRY EVANS

OCCUPATION: HOMEMAKER INDUSTRY: OWN HOME

EDUCATION: BACHELOR'S DEGREE

US ARMED FORCES: NO

INFORMANT: JERRY EVANS RELATIONSHIP: SPOUSE

ADDRESS: 81756 PEACH TREE LANE UMATILLA, OREGON 97882

CAUSE OF DEATH:

A: CEREBROVASCULAR ACCIDENT

INTERVAL: DAYS

B: CEREBROVASCULAR DISEASE

INTERVAL: YEARS

C:

INTERVAL

D:

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH:

DATE OF INJURY: HOUR OF INJURY: INJURY AT WORK: PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP: COUNTY: DESCRIBE HOW INJURY OCCURRED:

IF TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: NURSING HOME/LONG TERM CARE FACILITY FACILITY OR ADDRESS: AVALON CARE CENTER CITY, STATE, ZIP: OTHELLO, WASHINGTON 99344

RESIDENCE STREET: 81756 PEACH TREE LANE
CITY, STATE, ZIP: UMATILLA, OR 97882
INSIDE CITY LIMITS: NO COUNTY: UMATILLA
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE: 14 YEARS

FATHER: LOUIE GOBBO MOTHER: DORCAS DENTON

METHOD OF DISPOSITION: REMOVAL FROM STATE
PLACE OF DISPOSITION: ORCHARD MESA CEMETERY

CITY, STATE: GRAND JUNCTION, COLORADO DISPOSITION DATE: APRIL 28, 2021

FUNERAL FACILITY: BURNS MORTUARY OF HERMISTON

ADDRESS: 685 WEST HERMISTON AVENUE CITY, STATE, ZIP: HERMISTON, OREGON 97838 FUNERAL DIRECTOR: JOHN JOHNSON

MANNER OF DEATH: NATURAL

AUTOPSY: NO

WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE

CAUSE OF DEATH: NOT APPLICABLE

DID TOBACCO USE CONTRIBUTE TO DEATH: UNKNOWN PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: TIFFANY S. HANF, MD
TITLE: PHYSICIAN
CERTIFIER ADDRESS: PO BOX 2586
CITY, STATE, ZIP: SPOKANE, WASHINGTON 99220
DATE SIGNED: APRIL 23, 2021

CASE REFERRED TO ME/CORONER: NO FILE NUMBER: NOT APPLICABLE ATTENDING PHYSICIAN: NOT APPLICABLE

LOCAL DEPUTY REGISTRAR: NEYDA VALDEZ DATE RECEIVED: APRIL 26, 2021