



MISC 2017055377



JUL 17 2017 15:47 P 3

Fee amount: 22.00
FB: 43-02880
COMP: BW

Received - DIANE L. BATTIATO
Register of Deeds, Douglas County, NE
07/17/2017 15:47:02.00



2017055377

SPACE ABOVE RESERVED FOR REGISTER OF DEEDS OFFICE RECORDING INFORMATION

RETURN TO: RETURN TO:
DRI Title & Escrow
13057 W. Center Rd., Ste #1
Omaha, NE 68144

TITLE OF DOCUMENT: CERTIFIED DEATH CERTIFICATE FOR DEEDS

- Transfer on Death Deed
- Joint Tenancy
- Life Estate
- Other

DEED RECORDED:

DATE

RECORDING INFORMATION

GRANTOR: DAVID HARRIS WATKINS

(Deceased Person's Name)

GRANTEE:

(Grantees Listed on Recorded Deed)

FULL & COMPLETE LEGAL DESCRIPTION:
SEE ATTACHED EXHIBIT "A"

71
156 8905-1247392

(INCLUDE LEGAL DESCRIPTION ABOVE OR ATTACH LEGAL DESCRIPTION ON PAGE 2)

AZ

CERTIFICATION OF VITAL RECORDS

STATE OF ARIZONA
STATE OF ARIZONA
DEPARTMENT OF HEALTH SERVICES - OFFICE OF VITAL RECORDS
CERTIFICATE OF DEATH

State File NO. 102- 2016-018059

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST)
2. AKA'S (IF ANY)
3. DATE OF DEATH
DAVID HARRIS WATKINS
04/21/2016
4. SEX
5. SOCIAL SECURITY NUMBER:
6. DATE OF BIRTH
7. AGE
8. MONTHS
9. DAYS
10. HOURS
11. MINUTES
MALE 500-20-6351 05/15/1927 88
12. PLACE OF DEATH - HOSPITAL:
13. PLACE OF DEATH - OTHER THAN HOSPITAL:
14. FACILITY NAME (OR STREET ADDRESS IF NOT A FACILITY):
15. CITY, TOWN & ZIP CODE OR LOCATION OF DEATH:
16. COUNTY OF DEATH:
15804 E TUMBLEWEED DR FOUNTAIN HILLS 85268 MARICOPA
17. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)
18. MARITAL STATUS AT TIME OF DEATH:
19. NAME OF SURVIVING SPOUSE (MAIDEN NAME IF WIFE)
MARYVILLE, MISSOURI MARRIED MARILYN ENOLA REBBER
20. DECEDENT'S USUAL RESIDENCE STREET ADDRESS:
21. CITY AND COUNTY:
22. STATE
23. ZIP CODE
24. EVER IN THE ARMED FORCES
15804 E TUMBLEWEED DR FOUNTAIN HILLS, MARICOPA ARIZONA 85268 YES
25. WAS DECEDENT OF HISPANIC ORIGIN?
26. DECEDENT'S RACE(S):
27. IF AMERICAN INDIAN OR ALASKA NATIVE. SPECIFY UP TO 4 TRIBES. PRIMARY OR ENROLLED TRIBE:
28. OCCUPATION:
29. FATHER'S NAME (FIRST, MIDDLE, LAST)
30. MOTHER'S NAME (FIRST, MIDDLE, & LAST NAME PRIOR TO FIRST MARRIAGE)
DENTAL LABORATORY OWNER MERLE WATKINS MILDRED KOOCK
31. INFORMANT'S NAME
32. RELATIONSHIP
33. INFORMANT'S MAILING ADDRESS:
MARILYN ENOLA WATKINS SPOUSE 15804 E TUMBLEWEED DR, FOUNTAIN HILLS, ARIZONA 85268
34. NAME AND ADDRESS OF FUNERAL FACILITY:
35. FUNERAL DIRECTOR:
36. LICENSE NUMBER:
MESSINGER FOUNTAIN HILLS MORTUARY 12065 NORTH SAGUARO BLVD., FOUNTAIN HILLS, AZ ALLAN H RUBY, FUNERAL DIRECTOR F1025
37. METHOD(S) OF DISPOSITION:
38. NAME AND LOCATION OF 1st DISPOSITION FACILITY:
39. NAME AND LOCATION OF 2nd DISPOSITION FACILITY:
CREMATION PARADISE MEMORIAL CREMATORY, INC., SCOTTSDALE, ARIZONA NONE
MEDICAL CERTIFICATION SECTION CAUSE OF DEATH PART 1
40. A
41. APPROXIMATE INTERVAL:
END STAGE RENAL DISEASE (STAGE IV) YEARS
42. B
43. APPROXIMATE INTERVAL:
ARTERIOSCLEROTIC CARDIOVASCULAR DISEASE YEARS
44. C
45. APPROXIMATE INTERVAL:
46. D
47. APPROXIMATE INTERVAL:
CAUSE OF DEATH PART II
48. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSES GIVEN ABOVE:
49. INJURY?
50. INJURY AT WORK?
51. MANNER OF DEATH
52. TIME OF DEATH
NO NO NATURAL DEATH 0303
53. WAS AN AUTOPSY PERFORMED?
54. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?
NO
CAUSE AND MANNER OF DEATH CERTIFICATION
55. NAME OF PERSON COMPLETING CAUSE OF DEATH:
56. DATE CERTIFIED:
57. CERTIFIER'S ADDRESS:
58. NAME OF REGISTRAR:
59. DATE REGISTERED:
1132 S. OAKLAND AVE. MESA, AZ 85206 DEBJOTI SENSHARMA, M.D. 04/21/2016
MICHELE CASTANEDA-MARTINEZ 04/22/2016

DATE ISSUED: 04/26/2016

H 0424956



This is a true certification of the facts on file with the OFFICE OF VITAL RECORDS, ARIZONA DEPARTMENT OF HEALTH SERVICES, PHOENIX, ARIZONA Revised 02/2015

Krystal Colburn KRISTAL COLBURN ASSISTANT STATE REGISTRAR



This copy not valid unless prepared on a form displaying the State Seal.

ANY ALTERATION OR ERASURE VOID THIS CERTIFICATE

EXHIBIT "A"
521-TRANSFER STATEMENT ATTACHMENT

#20 PROPERTY LEGAL DESCRIPTION:

Tract 1: Lot Twenty-Three (23) in Block Nine (9), in Benson Addition, an Addition to the City of Omaha, Douglas County, Nebraska; except the irregular East Seven (7) inches, thereof.

Tract 2: That part of Lots One (1), Two (2) and Three (3), in Block Nine (9), in Benson Addition, an Addition to the City of Omaha, Douglas County, Nebraska, more particularly described as follows: Beginning at the Southeast corner of said Lot 1; thence West along the South line of said Lot 1, 2 and 3, to the Southwest corner of said Lot 3; thence North along the West line of said Lot 3, 80.66 feet; thence East on a line 80.66 feet North of and parallel to the South line of Lots 2 and 3, 60.52 feet; thence South on a line parallel to the West line of said Lot 2, 18 feet; thence East along a line 62.66 feet North of and parallel to the South line of said Lots 1 and 2, 89.48 feet to the East line of said Lot 1; thence South along the East line of said Lot 1, 62.66 feet to the place of beginning.