



After Recording Return To:
W. Michael Morrow
P.O. Box 83439
Lincoln, NE 68508

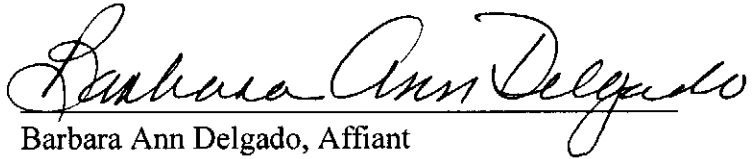
AFFIDAVIT

Barbara Ann Delgado, being first duly sworn upon oath deposes and states as follows:

1. That she is the surviving spouse of Lorenzo Vincent Delgado, who died on March 20, 2014.
2. That attached hereto as **Exhibit "A"** is a true and correct certified copy of the Death Certificate of Lorenzo Vincent Delgado.
3. That at the time of his death Lorenzo Vincent Delgado and this Affiant owned the thirteen parcels of real estate more particularly described on **Exhibit "B"** hereto (the "Real Estate") as joint tenants with rights of survivorship.
4. That attached hereto as **Exhibit "C"** is a true and correct copy of the Last Will and Testament of Lorenzo Vincent Delgado dated March 29, 2010, the original of which has been filed with the Lancaster County Court on a "Not-For-Probate" basis.
5. That Affiant believes that the March 29, 2010 Last Will and Testament attached hereto constitutes the Last Will and Testament of Lorenzo Vincent Delgado, that it was validly executed, and after the exercise of reasonable diligence is unaware of any instrument revoking the Last Will and Testament attached hereto.
6. That all other property and/or assets in which Lorenzo Vincent Delgado had an interest at the time of his death passed to this Affiant.

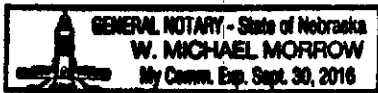
Chg Mob

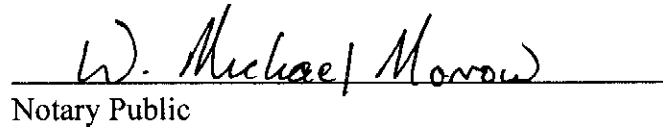
FURTHER AFFIANT SAYETH NOT.



Barbara Ann Delgado, Affiant
10510 Deer Valley Lane
Lincoln, NE 68526

Subscribed, sworn to and acknowledged before me this 17 day of June,
2014 by Barbara Ann Delgado.




Notary Public

Death Certificate Cover Sheet

Grantor (deceased)	Lorenzo Delgado, a/k/a Lorenzo Vincent Delgado
Surviving Grantee(s)	Barbara Delgado, a/k/a Barbara Ann Delgado

Legal Description of Property Transferred:

See Exhibit "B" to Affidavit and
Exhibit "A" to Transfer Statement both of which
accompany this Cover Sheet

Previously recorded document number(s) relating to this property/ownership:

97-011535 (Parcel 1); 85-26022 (Parcel 2); 94-48357 (Parcel 3); 87-12101,
87-12099 & 87-12100 (Parcel 4); 2008026364 (Parcel 5); 90-38488 & 91-32315
(Parcel 6); 91-32315 (Parcel 7); 99-033584 (Parcel 8 & 9); 2014008509
(Parcel 10); 99-054698 (Parcel 11); 91-39482 (Parcel 12); 96-007234 (Parcel 13)

After filing, please return document to:

W. Michael Morrow
P.O. Box 83439
Lincoln, NE 68501-3439

STATE OF NEBRASKA

WHEN THIS COPY CARRIES THE RAISED SEAL OF THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, IT CERTIFIES THE BELOW TO BE A TRUE COPY OF THE ORIGINAL RECORD ON FILE WITH THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, VITAL RECORDS OFFICE, WHICH IS THE LEGAL DEPOSITORY FOR VITAL RECORDS.

DATE OF ISSUANCE

03/25/2014

LINCOLN, NEBRASKA

STANLEY S. LOOPER
ASSISTANT STATE REGISTRAR
DEPARTMENT OF HEALTH AND HUMAN SERVICES

STATE OF NEBRASKA - DEPARTMENT OF HEALTH AND HUMAN SERVICES
CERTIFICATE OF DEATH 14-01332

1. DECEDENT'S NAME (First, Middle, Last, Suffix) Lorenzo Vincent Delgado		2. SEX Male		3. DATE OF DEATH (Mo., Day, Yr.) March 20, 2014	
4. CITY AND STATE OR TERRITORY, OR FOREIGN COUNTRY OF BIRTH Lincoln, Nebraska		5a. AGE - Last Birthday (Yrs.) 79		5b. UNDER 1 YEAR 5c. UNDER 1 DAY	
7. SOCIAL SECURITY NUMBER 507-38-2257		6a. PLACE OF DEATH HOSPITAL <input type="checkbox"/> Inpatient <input type="checkbox"/> OTHER <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Hospice Facility <input type="checkbox"/> ER/Outpatient <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> DOA <input type="checkbox"/> Other (Specify)		6. DATE OF BIRTH (Mo., Day, Yr.) August 10, 1934	
8b. FACILITY NAME (if not institution, give street and number) 10510 Deer Valley Lane		8c. CITY OR TOWN OF DEATH (Include Zip Code) Lincoln 68526		8d. COUNTY OF DEATH Lancaster	
9a. RESIDENCE STATE Nebraska		9b. COUNTY Lancaster		9c. CITY OR TOWN Lincoln	
9d. STREET AND NUMBER 10510 Deer Valley Lane		9e. APT. NO.		9f. ZIP CODE 68526	
9g. INSIDE CITY LIMITS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		10a. MARITAL STATUS AT TIME OF DEATH <input checked="" type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Married, but separated <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Unknown		10b. NAME OF SPOUSE (First, Middle, Last, Suffix) if wife, give maiden name Barbara Eckel	
11. FATHER'S NAME (First, Middle, Last, Suffix) Vincent Delgado		12. MOTHER'S NAME (First, Middle, Maiden Surname) Carmen Garcia		13. EVER IN U.S. ARMED FORCES? (Give dates of service if Yes) (Yes, No, or Unk.) NO	
14a. INFORMANT NAME Barbara Delgado		14b. RELATIONSHIP TO DECEDENT Spouse		15. METHOD OF DISPOSITION <input type="checkbox"/> Burial <input type="checkbox"/> Donation <input checked="" type="checkbox"/> Cremation <input type="checkbox"/> Entombment <input type="checkbox"/> Removal <input type="checkbox"/> Other (Specify)	
16a. EMBALMER SIGNATURE Todd Bjeater		16b. LICENSE NO. 1152		16c. DATE (Mo., Day, Yr.) March 24, 2014	
16d. CEMETERY, CREMATORY OR OTHER LOCATION BML Cremation Service		CITY / TOWN Lincoln		STATE Nebraska	
17a. FUNERAL HOME NAME AND MAILING ADDRESS (Street, City or Town, State) Butherus-Maser & Love Mortuary; 4040 A Street, Lincoln, Nebraska		17b. Zip Code 68510		18. PART I. Enter the chain of events - diseases, injuries, or complications that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.	
IMMEDIATE CAUSE (Final disease or condition resulting in death) a) Renal Cancer		APPROXIMATE INTERVAL onset to death 19 Days		18. PART II. OTHER SIGNIFICANT CONDITIONS - Conditions contributing to the death but not resulting in the underlying cause given in PART I.	
DUE TO, OR AS A CONSEQUENCE OF: b)		onset to death		19. WAS MEDICAL EXAMINER OR CORONER CONTACTED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DUE TO, OR AS A CONSEQUENCE OF: c)		onset to death		20. IF FEMALE: <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year	
DUE TO, OR AS A CONSEQUENCE OF: d)		onset to death		21a. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined	
				21b. IF TRANSPORTATION INJURY <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify)	
22a. DATE OF INJURY (Mo., Day, Yr.)		22b. TIME OF INJURY		21c. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
22c. PLACE OF INJURY - At home, farm, street, factory, office building, construction site, etc. (Specify)		22d. INJURY AT WORK? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		21d. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
22e. DESCRIBE HOW INJURY OCCURRED		22f. LOCATION OF INJURY - STREET & NUMBER, APT. NO.		22g. CITY/TOWN	
22h. STATE		22i. ZIP CODE		23a. DATE OF DEATH (Mo., Day, Yr.) March 20, 2014	
23b. DATE SIGNED (Mo., Day, Yr.) March 21, 2014		23c. TIME OF DEATH 02:00 PM		24a. DATE SIGNED (Mo., Day, Yr.)	
24a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) Sasha E. Miller, PA-C		24b. TIME OF DEATH		24c. PRONOUNCED DEAD (Mo., Day, Yr.)	
24d. TIME PRONOUNCED DEAD		25. DID TOBACCO USE CONTRIBUTE TO THE DEATH? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PROBABLY <input checked="" type="checkbox"/> UNKNOWN		26a. HAS ORGAN OR TISSUE DONATION BEEN CONSIDERED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
26b. WAS CONSENT GRANTED? Not Applicable if 26a is NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		27. NAME, TITLE AND ADDRESS OF CERTIFIER (Type or Print) Sasha E. Miller, PA-C, 4004 Pioneer Woods Drive, Lincoln, Nebraska, 68506		28a. REGISTRAR'S SIGNATURE Janet A. Heston	
28b. DATE FILED BY REGISTRAR (Mo., Day, Yr.) March 21, 2014					

Exhibit "A"

EXHIBIT "B"
TO
AFFIDAVIT

Legal Description

Parcel 1:

BODA
Lots One (1), Two (2), Three (3), Four (4), Five (5), Six (6), Seven (7), Eight (8), Nine (9), Ten (10), Eleven (11), Twelve (12), Thirteen (13), Block Two (2), Boyer and Davis Subdivision, Lincoln, Lancaster County, Nebraska and the East Half of the North-South Alley and the South Half of West L Street from the West line of SE 1st Street to a line 8 feet West of and parallel to the West lot line (extended) of Lot One (1), Block Two (2), Boyer & Davis Subdivision.

Parcel 2:

Lots Nine (9) and Ten (10), Block Three (3), Boyer & Davis Subdivision, Lincoln, Lancaster County, Nebraska.

Parcel 3:

Lots Seven (7) and Eight (8), Block Three (3), Boyer & Davis Subdivision, Lincoln, Lancaster County, Nebraska.

Parcel 4:

Lots Eleven (11), Twelve (12), Thirteen (13) and Fourteen (14), Block Three (3), Boyer and Davis Subdivision, Lincoln, Lancaster County, Nebraska

Parcel 5:

LEMA
Lot Ten (10), Block Two (2), Wedgwood Manor, Lincoln, Lancaster County, Nebraska.

Parcel 6:

LINCOLN
Lots One (1), Two (2), Three (3), Four (4), Five (5), Eight (8), Nine (9), Ten (10), Eleven (11), and Twelve (12), Block Seventy-Eight (78), Original Plat of Lincoln, Lancaster County, Nebraska.

Parcel 7:

BODA
Lots Three (3), Four (4), Five (5), and Six (6), Block Three (3), Boyer & Davis Subdivision, Lincoln, Lancaster County, Nebraska.

Parcel 8:

LINCOLN
The North 87 feet of Lot Seven (7) and the West One Half of Lot Eight (8), Block One Hundred Nine (109), Original Plat of Lincoln, Lancaster County, Nebraska.

LINCOLN

Parcel 9:
The South 55 feet of Lot Seven (7), Block One Hundred Nine (109), Original Plat of Lincoln, Lancaster County, Nebraska.

KATES

Parcel 10:
Lot Two (2), Randolph Terrace Fifth Addition, Lincoln, Lancaster County, Nebraska.

IT

Parcel 11:
Lots Eighty-Five (85) and One Hundred Fifteen (115), Irregular Tracts located in the Southeast Quarter (SE $\frac{1}{4}$) of Section Thirty-One (31), Township Ten (10) North, Range Seven (7) East of the 6th P.M., Lancaster County, Nebraska.

HVAAC

Parcel 12:
Lot One (1), Block Two (2), Hidden Valley Acres, Lancaster County, Nebraska.

IMHOFF

Parcel 13:
Lots One (1), Two (2), and Three (3), Block Eighteen (18), Imhoff's Addition to University Place, Lincoln, Lancaster County, Nebraska.

Last Will and Testament of

LORENZO VINCENT DELGADO

I, Lorenzo Vincent Delgado of 10510 Deer Valley Lane, Lincoln, Nebraska declare publish this to be my Will.

I.

I direct my personal representative to pay all funeral expense and all other lawful debts enforceable against my estate as soon as practicable after my death, but no such debt shall be paid until it is due

II.

I give to my spouse, Barbara Ann Delgado, of 10510 Deer Valley Lane, Lincoln, Nebraska, all property of whatever nature which I may own at my death or which may become the property of my estate after my death to be hers absolutely.

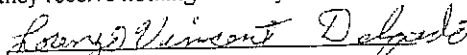
III.

If my spouse, Barbara Ann Delgado, shall fail to survive me by at least 30 days, her gift under this Will shall lapse and I then give all property of whatever nature which I may own at my death, or which may become the property of my estate after my death, as follows:

a. I give all real estate which I may own at my death or which may become the property of my estate after my death in equal shares to my son Scott A. Delgado of 4724 Birch Creek Dr., Lincoln, Nebraska and my son Ryan P. Delgado of 2444 Grainger Pkwy, Lincoln, Nebraska. If either of these sons shall fail to survive me then such deceased child's share shall be divided among the surviving issue of such child as if by representation. If either of my sons shall fail to survive me and shall leave no issue surviving me and such son, then such son's share shall be given to my other son entitled to this gift of real estate.

b. I give all the rest of the property of whatever nature which I may own at my death or which may become the property of my estate after my death in equal shares, one share to each of my sons, Scott a. Delgado and Ryan P. Delgado, who survive me, and one share collectively to the issue of each of my sons who die before me leaving issue surviving me. For purposes of this Will my sons do not include my son Joseph M. Delgado of 7320 Travis Dr., Lincoln, Nebraska, because it is my desire that my son Joseph M. Delgado and his issue take nothing from my estate either by testate or intestate succession or any other means including allowances and exemptions.

c. I also specifically do not include my children Michael Joseph Delgado, Ronald Glenn Delgado and Nick (Nicholas) Delgado as my children for the purposes of this gift or any other gift contained in this Will because it is my intention that they receive nothing from my estate either


Testator

Page one of three pages.

Exhibit "C"

through this Will or by intestate succession or any other means including allowances and exemptions. It is also my desire that my deceased son Rick Delgado and his issue take nothing from my estate either through this Will or by intestate succession or by any other means including allowances and exemptions.

IV.

I have made, or may make, disposition of certain items of non-income producing tangible personal property by written statement or lists separate from this Will, and authorized by Section 30-2338 Neb. Rev. Stat. 1943. It is my intent to dispose of the property described in such statement to the persons designated therein to receive it and to the extent that such disposition is effective, the provisions of such statement shall control the provisions of this Will. If such statement shall not be in existence at my death, or if in existence shall fail to dispose of the property described therein effectively, I devise such property as provided elsewhere in this Will.

V.

I appoint my Spouse, Barbara Ann Delgado, to act as personal representative of my estate and request that she serve without bond. In the event that my Spouse is unable or unwilling to serve as personal representative of my estate, I then appoint Ryan P. Delgado of 2444 Grainger Pkwy, Lincoln, Nebraska to serve as personal representative of my estate without bond. If both my spouse and Ryan P. Delgado are unable or unwilling to serve as personal representative of my estate, I then appoint Scott A. Delgado of 4724 Birch Creek Dr., Lincoln, Nebraska, to serve as personal representative of my estate without bond.

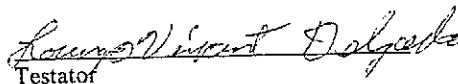
VI.

I empower my personal representative at her or his sole discretion to sell at public or private sale any or all property, real or personal, which I may own at the time of my death or which may be acquired by my estate after my death and to apply the proceeds from such sale together with distributions in kind to fulfill the bequests made in this Will.

VII.

I revoke all Wills and Codicils made before by me.

I, Lorenzo Vincent Delgado, the Testator, sign my name to this instrument on this ___ day of March, 2010, and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this Instrument as my last Will and that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed and that I am eighteen years of age or older or am not at this time a minor, and am of sound mind and under no constraint or undue influence.


Testator

We, Brenda Gausman and Joni M. Bolek, the witnesses, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the Testator signs and executes this instrument as his last Will and that he signs it willingly, and that he executes

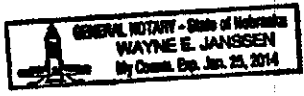
it as his free and voluntary act for the purposes therein expressed, and that each of us, in the presence and hearing of the Testator, hereby sign this Will as witnesses to the Testator's signing, and that to the best of our knowledge the Testator is eighteen years of age or older, or is not at this time a minor, and is of sound mind and under no constraint or undue influence.

Brenda Gausman
Witness

Joni M. Bolek
Witness

STATE OF NEBRASKA)
) ss
LANCASTER COUNTY)

Subscribed, sworn to and acknowledged by Lorenzo Vincent Delgado, the Testator, and subscribed and sworn to before me by Brenda Gausman and Joni M. Bolek, the witnesses, this 29 day of March, 2010.



Wayne E. Janssen
Notary Public

Lorenzo Vincent Delgado
Testator