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20220057840



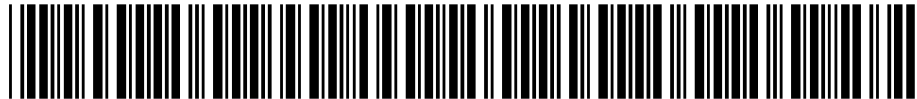
Pages:
0004

Recorded/Filed in Official Records
Recorder's Office, Los Angeles County,
California

01/14/22 AT 08:00AM

FEES:	55.00
TAXES:	0.00
OTHER:	0.00
<hr/>	
PAID:	55.00

PCOR SURCHARGE \$20.00



LEADSHEET



202201141000032

00021821613



013073473

SEQ:
01

SECURE - 8:00AM



THIS FORM IS NOT TO BE DUPLICATED

122151010

RECORDED AT THE REQUEST OF
CHICAGO TITLE COMPANY

RECORDING REQUESTED BY:

Chicago Title Company

Escrow Order No.: 122151010

When Recorded Mail Document To:

Attn: Ann Keasler-Kahn, Trustee
1112 Oxford Hills Drive
Maryville, TN 37803

APN/Parcel ID(s): 3128-009-066

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT OF DEATH OF TRUSTEE

Exempt from fee per GC 27386.1 (a) (2); recorded concurrently in connection with a transfer subject to the imposition of documentary transfer tax.

Ann Keasler-Kahn, Trustee, of legal age, being first duly sworn, deposes and says:

1. That Irving Kahn, the decedent mentioned in the attached certified copy of Certificate of Death is the same person as Irving Kahn, named as the/a Trustee in that certain Declaration of Trust dated February 10, 1996, executed by Irving Kahn, as Trustor(s).
2. At the time of the demise of decedent, the decedent was the record owner, as Trustee, of real property commonly known as 808 West Avenue L, Lancaster, CA 93534, (Assessor's Parcel No. 3128-009-066) which property is described in a Deed which was signed by Irving Kahn, Trustee of the Kahn Family Revocable Living Trust U/D/T dated July 20, 1995, as Grantor(s) on February 10, 1996, and recorded as Instrument No. 96398518 on March 13, 1996, of Official Records of Los Angeles County, State of California.
3. The legal description of the property is as follows:

For APN/Parcel ID(s): 3128-009-066

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE CITY OF LANCASTER, COUNTY OF LOS ANGELES, STATE OF CALIFORNIA AND IS DESCRIBED AS FOLLOWS:

PARCEL 2 OF PARCEL MAP NO. 15978, IN THE CITY OF LANCASTER, COUNTY OF LOS ANGELES, STATE OF CALIFORNIA, AS PER MAP RECORDED IN BOOK 172 PAGES 62 AND 63 OF PARCEL MAPS, IN THE OFFICE OF THE COUNTY RECORDER OF SAID COUNTY.

4. I/We, Ann Keasler-Kahn, Trustee, am/are the Surviving/Successor Trustee(s) under the above referenced Trust, which was in effect at the time of the death of the decedent.
5. I/We certify that the Trust instrument has not been revoked and is in full force and effect.
6. There is no federal estate tax due as a result of the death of decedent.

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1112 Oxford Hills Drive
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5. I/We certify that the Trust instrument has not been revoked and is in full force and effect.
6. There is no federal estate tax due as a result of the death of decedent.

AFFIDAVIT OF DEATH OF TRUSTEE

(continued)

APN/Parcel ID(s): 3128-009-066

Dated: December 28, 2021

I

N WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

Ann Keasler-Kahn, as Trustee of the Ann Keasler-Kahn Revocable Living Trust, UTD: 2/4/02

BY: Ann Keasler-Kahn Jr.
Ann Keasler-Kahn, Trustee

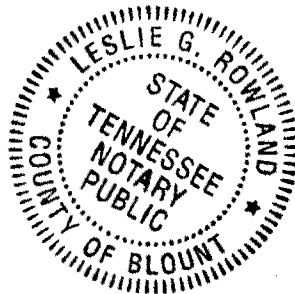
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Tennessee
County of Blount

Subscribed and sworn to (or affirmed) before me on this 30th day of December, 2021, by Ann Keasler-Kahn
proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Leslie G. Rowland
Signature

Notary expire - 2/28/24



**STATE OF NEVADA — DIVISION OF HEALTH — SECTION OF VITAL STATISTICS
CERTIFICATE OF DEATH**

TYPE OR PRINT IN PERMANENT BLACK INK	LOCAL FILE NUMBER			STATE FILE NUMBER		
	DECEASED—NAME First Middle Last			DATE OF DEATH (Month, Day, Year)		
DECEDENT	1. Irving KAHN			2. July 4, 2002		
	CITY, TOWN OR LOCATION OF DEATH			COUNTY OF DEATH		
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	3b. Las Vegas			3c. 2256 Lauren Drive (park across from)		
	RACE—(e.g., White, Black, American Indian, etc.) (Specify)			SEX		
PARENTS	5. White			4. Male		
	6. Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.			7. Under 1 Year		
DISPOSITION	7a. 78			7b. MOS : DAYS		
	7c. HOURS : MINS			8. May 28 1924		
CERTIFIER	9a. New York			9b. USA		
	10. 18			11. Married		
CAUSE OF DEATH	12. Ann P Babb			13. 078 18 3236		
	14a. Physician			14b. Optomatrist		
CAUSE OF DEATH	15a. Nevada			15b. Clark		
	15c. Las Vegas			15d. 2256 Lauren Drive		
CAUSE OF DEATH	15e. Yes			16. Joseph Kahn		
	17. Esther Gustman			18a. Ann P Kahn - Wife		
CAUSE OF DEATH	18b. 2256 Lauren Drive Las Vegas Nevada 89134			19a. Cremation		
	19b. Sunrise Cremation & Burial Society			19c. Henderson Nevada		
CAUSE OF DEATH	20a. <i>[Signature]</i>			20b. 605		
	20c. 745 West Sunset Road #5 Henderson Nevada 89015			21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.		
CAUSE OF DEATH	21b. <i>[Signature]</i>			21c. <i>[Signature]</i>		
	21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)			22a. 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.		
CAUSE OF DEATH	22b. <i>[Signature]</i>			22c. <i>[Signature]</i>		
	22d. ON 07/04/2002			22e. AT 12:15 a.m.		
CAUSE OF DEATH	23a. Lary Simms, DO, MPH, Chief Med. Exam., 1704 Pinto Ln., Las Vegas, NV			23b. 880		
	24a. <i>[Signature]</i>			24b. JUL 08 2002		
CAUSE OF DEATH	24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)		
	PART I (a) Gunshot wound of the head			Interval between onset and death		
CAUSE OF DEATH	(b) DUE TO, OR AS A CONSEQUENCE OF:			Interval between onset and death		
	(c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.			Interval between onset and death		
CAUSE OF DEATH	26. Yes			27. Yes		
	28a. Suicide			28b. July 4, 2002		
CAUSE OF DEATH	28c. 12:15 A.M.			28d. Shot self		
	28e. NO			28f. Park across from:		
CAUSE OF DEATH	28g. 2256 Lauren Drive, Las Vegas, NV			28h. 2256 Lauren Drive, Las Vegas, NV		

STATE REGISTRAR

No. 220453

"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 Clark County Health District from State certified documents as authorized by the State Board of Health pursuant to NRS 440.175.

NOT VALID WITHOUT THE RAISED SEAL OF THE CLARK COUNTY HEALTH DISTRICT

DONALD S. KWALICK, MD, M.P.H.
Registrar of Vital Statistics

By:

Date Issued:

JUL 08 2002

CLARK COUNTY HEALTH DISTRICT
625 Shadow Lane P.O. Box 3902
Las Vegas, Nevada 89127
702-383-1223
Tax ID# 88-0151573