1		FILED
Ca	e 3:73-cv-00128-MMD-CSD Docum	ent 803 Filed-04720/2015 Page (1/1
	UNITED STATES DIS	
1	FOR THE DISTRICT	OF NEVADA APR 2 0 2015 CCP.
2		CLERK US DISTRICT COURT DISTRICT OF ASSET
3	UNITED STATES OF AMERICA,	BY:
4	Plaintiff,))
5	WALKER RIVER PAIUTE TRIBE,) IN EQUITY NO. C-125-RCJ-WGC Subproceeding C-125-C
6	,)
7	Plaintiff-Intervenor,	3:73-cv-00128-RCJ-WGC
8	VS.	
9	WALKER RIVER IRRIGATION DISTRICT,)) DYGGI ANAED OF DYEEDEGE NI
10	a corporation, et al.,	DISCLAIMER OF INTEREST IN WATER RIGHTS AND NOTICE OF
11	Defendants.	RELATED INFORMATION AND DOCUMENTATION
12	MINERAL COUNTY,	SUPPORTING DISCLAIMER
13	Plaintiff-Intervenor,))
14	vs.	
15)
16	WALKER RIVER IRRIGATION DISTRICT, a corporation, et al.,))
17	Defendants.	
18	Detendants.	,)
19	The undersigned defendant in the above action	on hereby notifies the Court and Mineral
	County that the undersigned (or the entity on whose	behalf the undersigned is acting) has no
20	interest in any water right subject to the Walker Rive	er Decree, and therefore, disclaims all
21	interest in this action.	
22	In addition, because the undersigned sold or	otherwise conveyed ownership of all of the
23	water rights that the undersigned (or the entity on wl	nose behalf the undersigned is acting) once
24	owned before the undersigned was served with a Wa	
25	Summons or by a Notice in Lieu of Summons the ur	dersigned provides the following additional

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1	1. The name and address of the defendant or defendants who sold or otherwise conveyed
	ownership:
2	John Lowe
3	Name(s)
4	
5	Street or P.O. Box
6	Town or City State Zip Code
7	2. The name and address of each person or entity who acquired ownership:
8	NI O COLORD DIGNE
9	Name(s)
10	Popolar Bandat with aut
11	Never council Water right Name(s) Noperte Baught With out Street or RO. Box
12	la tet Dialete
	Town or City State Zip Code
13	3. Attached to or included with this notice is a copy of the (check appropriate box(es)):
14	(oneon appropriate box(cs)).
15	Deed Court Order
16	Other Document
17	4. The undersigned acknowledges that any person or entity who files a Disclaimer of
18	Interest in this matter is ultimately responsible for the accuracy of this filing.
İ	and matter is distincted proposition for the accuracy of this fining.
19	*This notice shall be sent to the following two persons:
20	Chief Deputy Clerk
21	United States District Court for the
22	District of Nevada 400 South Virginia Street, Suite 301
23	Reno, Nevada 89501 AND
24	Simeon Herskovits
	Advocates for Community and Environment P.O. Box 1075
25	El Prado, NM 87529
26	
27	

Case 3:73-cv-00128-MMD-CSD Document 803 Filed 04/20/2015 Page 3 of 6

1	Consequently, the undersigned acknowledges that a	ny person or entity who files such a notice,
2	but, in fact, has water rights subject to this litigation	, shall nevertheless be bound by the results of
3	this litigation.	
4	Executed this 16 day of april, 20_	
5	<i>"</i>	
6		Exangeleria Perce [signature of defendant]
8		EVANGELINA PIERCE [name of defendant]
10	la sloand	[name of defendant]
11	Julis vice of	F :
12	Rusband deceased death	[signature, if applicable, of person acting on behalf of defendant]
13	death	
14	Certificate	[name, if applicable, of person acting
15	Certificate en closed	on behalf of defendant]
16		
17		[address]
18		
19		[telephone number]
20	O.	[wiophone names.]
21	En angelina tierce	
22	1222 Spinso are	<u> </u>
23	1210 reaction	
24	Evangelina Pierce 1270 Réalto ave Calton, Calif- 92324	
25	92324	
26	·	

•	Escrow: 92031738 SUBSTITUTION OF TRUSTEE AN	ND DEED OF RECONVEYANCE
C	ase 3:73-cv-00128-MMD-CSD Doc	unient 803 Filed 04/20/2015 Page 4 of 6 we, TRUSTEES OF THE LOWE FAMILY TRUST,
	are the owners and holders of the Note	secured by the Deed of Trust dated
	July 31, 1987, made by G	EORGE A PIERCE AND ANGELINA B.
	PIERCE , TRUSTORS, to	INYO-MONO TITLE COMPANY, A
	CALIFORNIA CORP., TRUSTEE, for	the benefit of THOMAS E. LOWE AND
	Page 202 , as Document Number THOMAS E. LOWE AND BARBARA L. LO OF THE LOWE FAMILY TRUST, UTD, 8	county Recorder of MONO Book 486 hereby substitutes: WE, TRUSTEES -25-89 , as Trustee in Lieu of
	the above name Irustee under said Deed THOMAS E. LOWE AND BARBARA L. LO	WE, TRUSTEES OF THE
	appointment as Trustee under said Deed Trustee, pursuant to the request of the with the provisions of the Deed of Trustee warranty to the person or person legal now held by it under said Deed of Trustee.	of Trust, and, as successor e owner and holder and in accordance st, does hereby RECONVEY without ly entitled thereto, all estate
		WITNESS HAND this 29th
	DAY OF September.	DAY OF Jeplember.
ナルナ	BENEFICIARY THOMAS E. LOWE, TRUSTEE BENEFICIARY BARBARA L. LOWE, TRUSTEE	TRUSTEE THOMAS E. LOWE, TRUSTEE TRUSTEE BARBARA L. LOWE, TRUSTEE
	state of Oregon) county of Jackson)	county of Jackson) ss:
ると	On September 29,1992 before me, the undersigned, a Notary Public in and for said County and State, personally appeared Themas E Lowe F Barbaca A Lowe who acknowledged that T hey executed the above instrument. NOTARY PUBLIC	On Settember 29,1992 before me, the undersigned, a Notary Public in and for said County and State, personally appeared thomas E Lowe from as E Lowe who acknowledged that They executed the above instrument. **NOTARY PUBLIC** NOTARY PUBLIC**

When recorded mail to:

NOTARY PUBLIC

THOMAS E. LOWE AND BARBARA L. LO OF THE LOWE FAMILY TRUST, UTD, 8 Case 3:73-cv-00128-MMD-CSD Doc the above name Irustee under said Deed THOMAS E. LOWE AND BARBARA L. LO LOWE FAMILY TRUST, UTD, 8-25-89 appointment as Irustee under said Deed Irustee, pursuant to the request of the with the provisions of the Deed of Irus warranty to the person or person legal now held by it under said Deed of Irus	-25-89 , as Trustee in Lieu of ument 803 Filed 04/20/2015 Page 5 of 6 of Trust. we, TRUSTEES OF THE hereby accepts said of Trust, and, as successor e owner and holder and in accordance st, does hereby RECONVEY without ly entitled thereto, all estate
DAY OF September Thomas & Joure BENEFICIARYTHOMAS E. LOWE, TRUSTEE BENEFICIARYBARBARA E. LOWE, TRUSTEE	DAY OF Seplember. TRUSTEE THOMAS E. LOWE, TRUSTEE TRUSTEE BARBARA L. LOWE, TRUSTEE
STATE OF Oregon) ss: COUNTY OF Jackson On Sentember 29,1992 before me, the undersigned, a Notary Public in and for said County and State, personally appeared Thomas E Lowe F Barbara Alowe who acknowledged that They executed, the above instrument. NOTARY PUBLIC	STATE OF Oregon) ss: COUNTY OF Jackson On Setember 29,1992 before me, the undersigned, a Notary Public in and for said County and State, personally appeared Thomas E Lowe Who acknowledged that They executed the above instrument. NOTARY PUBLIC

When recorded mail to:

INVO-MONOTITLE COMPANY
100052-RM

Mr. & Mrs. George Pierce 1270 Rialto Ave. Colton, CA 92324

93 JAN 25 ANN: 43

COUNTY RECORDER

(STATE OF CALIFORNIA)

COUNTY of SAN BERNARDINO

DEPARTMENT OF PUBLIC HEALTH

351 N. MT. VIEW AVENUE, SAN BERNARDINO, CALIFORNIA 92415-0010

	STATE FILE NUMBER			ATE OF DE		Sa Taran La	32013360			
	1. NAME OF DECEDENT- FIRST (Given)		USE BLACK MR CHEAT / BIT BEST OFF MINTENANTS ON ALTERNATIONS 2. MINDOLE ALVIN PIERCE			77.77.4	LOCAL REGISTRATION NUMBER			
Ì	AKA ALSO KNOWN AS - Include the AKA (FIRST, MIDDLE, LAS	n ==,	/		99779	77 S. AGE YIL. L.	JE UNDER ONE YEAR Months Days	FUNCER 24 P		
	e. BIRTH STATE-FOREIGN COUNTRY 10. SOCIAL SECUL TX 545-52-19		_	MED FORCES?		/SRDP (at Yaya of Dasie)			E HOUR @4	
	19. EDUCATION Highest Level Dayres 14/15, WAS DECEDENT HISP (see worksheet on back)	'' ' L		rafteet on back) 11	DECEDENT'S R		08/18/2013	eet on beck)	1901	
3	17. USUAL OCCUPATION - Type of weak for meet of Sie. DO NOT	USE RETIRED	18.1040 0		/HITE	ry store, road constru	tion, employment agency	(etc.)] 18. Y	EARS IN OCCU	
_	FIREFIGHTER 20. DECEDENT'S RESIDENCE (Shout and number, or location)		FORE	STRY	of Double Chay	Day of the second	2000	<i></i>	20	
	1270 RIALTO AVENUE				and the state of t					
Ž			BERNARDINO 92			12	CA	OUNTRY		
MAM	ANGELINA PIERCE, WIFE		1.	270 RIALTO	ÁVENU	, COLTON	, CA 92324	um, state and zq	4	
NOF	28. NAME OF SURMAING SPOUSE/SRIDP-PIRST ANGELINA	29. MODLE C.	29. MODLE		BANKS	I NAME)				
FORM	31. NAME OF FATHER/PARENT-FIRST GEORGE	32. MIDDLE			33. LAST	- interpretation			4. BIRTH STATE	
RENT :	35. NAME OF MOTHER/PARENT-FIRST	SS. MIDDLE	9.9		PIERCE 37. LAST (BIRTH	the free contracts			X B. SHRTH STAUT	
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DEATH.	ARROWHEAD REGIONAL MEDICAL CENTER					106. CITY	108. CITY			
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CERTIFIED COPY OF VITAL RECORDS

✓ LANY ALTERATION OR FRASURE VOIDS THIS CERTIFICATE A

STATE OF CALIFORNIA COUNTY OF SAN BERNARDINO SS

DATE ISSUED

Aug: 22,2013

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, SAN BERNARDINO DEPARTMENT OF PUBLIC HEALTH.

MAXWELL OHIKHUARE, M.D. COUNTY HEALTH OFFICER

REGISTRAR OF VITAL STATISTICS

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

