| 1        | AFFIDAVIT BY SURVIVING JOINT TENANT                                      |  |  |  |  |  |  |  |  |  |  |  |  |
|----------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 2        | STATE OF Nevada )  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3        | COUNTY OF Douglas )  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4        | ELBERT H. DYE being first duly sworn, deposes and                        |  |  |  |  |  |  |  |  |  |  |  |  |
| 5        | says:  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6        | That Affiant is the surviving spouse of RHEA MARIE DYE                   |  |  |  |  |  |  |  |  |  |  |  |  |
| 7        | and that the Affiant and the said RHEA MARIE DYE , deceased              |  |  |  |  |  |  |  |  |  |  |  |  |
| 8        | are the Grantees in Joint Tenancy under that certain Joint Tenancy Deed  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9        | dated the 17th day of  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10       | HARICH TAHOE DEVELOPMENTS, a Nevada General Partnership                  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11       | was Seller, to ELBERT H. DYE and R. MARIE DYE, husband and wife          |  |  |  |  |  |  |  |  |  |  |  |  |
| 12       | husband and wife, as Joint Tenants, upon the terms, covenants, and       |  |  |  |  |  |  |  |  |  |  |  |  |
| 13       | provisions as set forth therein, said document recorded June 24,         |  |  |  |  |  |  |  |  |  |  |  |  |
| 14       | 19_85 in Book_685 Page 1972 being Document No. 119096                    |  |  |  |  |  |  |  |  |  |  |  |  |
| 15       | of the Official Records in Douglas County, Nevada, affecting all that    |  |  |  |  |  |  |  |  |  |  |  |  |
| 16       | certain piece or parcel of land, situate in the County of Douglas, State |  |  |  |  |  |  |  |  |  |  |  |  |
| 17       | of Nevada.   |  |  |  |  |  |  |  |  |  |  |  |  |
| 18<br>19 | See Exhibit "A" Attached hereto and made a part hereof"                  |  |  |  |  |  |  |  |  |  |  |  |  |
| 20       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 21       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 22       | That the said RHEA MARIE DYE one of the Grantees on                      |  |  |  |  |  |  |  |  |  |  |  |  |
| 23       | the Joint Tenancy Deed, died on the 19th day of September                |  |  |  |  |  |  |  |  |  |  |  |  |
| 24       | 19 86 in Fresno and is the identical person                              |  |  |  |  |  |  |  |  |  |  |  |  |
| 25       | named in the Certificate of Death. That all interest in and to said real |  |  |  |  |  |  |  |  |  |  |  |  |
| 26       | property hereinabove described, vested absolutely in Affiant as of the   |  |  |  |  |  |  |  |  |  |  |  |  |
| 27       | date of decedent's death.  |  |  |  |  |  |  |  |  |  |  |  |  |
| 28       | SUBSCRIBED AND SWORN TO BEFORE  ELBERT H. DYE                            |  |  |  |  |  |  |  |  |  |  |  |  |
| 29       | me this 13th day of  October 19 86                                       |  |  |  |  |  |  |  |  |  |  |  |  |
| 30       | 100 1 1,4/s  |  |  |  |  |  |  |  |  |  |  |  |  |
| 31       | NOTARY PUBLIC  |  |  |  |  |  |  |  |  |  |  |  |  |
| 32       | LINDA R. FICKLIN   |  |  |  |  |  |  |  |  |  |  |  |  |
|          | NOTARY PUBLIC - NEVADA DOUGLAS COUNTY My Appt. Expires Aug. 25, 1990     |  |  |  |  |  |  |  |  |  |  |  |  |
| l l      | 2011/4/100C Base1242   |  |  |  |  |  |  |  |  |  |  |  |  |

BOUK 1086 PAGE 1242

|                      |   |                           |                                   |                                |   |           |  | OF DE               | AT                                    | н ј  | 10C  | 8  |                   | 033               | 375        |  |
|----------------------|---|---------------------------|-----------------------------------|--------------------------------|---|-----------|--|---------------------|---------------------------------------|--|--|--|-------------------|-------------------|------------|--|
|                      | STATE FILE  |                           |                                   |                                |   | TATE O    |  | FORNIA              |                                       |  | SCAL REGISTRA  |  |                   |                   | MANBER     |  |
|                      |   | 1A. NAME OF DECEDENT-FIRE |                                   |                                | t   |           |  | I 1C. LAST          |                                       |  |  | 2A. DATE OF DEATH MONTH, DAY, YEAR! 128. HO  |                   |                   |            |  |
|                      | Rhea  |                           |                                   | Marie                          |   |           | Dye  |                     |                                       |  | September 19, 1  |  |                   | 36                | 0645       |  |
|                      | 3. SEX  | 4. RACE/ETHNCITY          |                                   | 8. SPANISH/HI                  |   | HISPANIC  | PANC 6. DATE OF BIRTH  |                     | 1                                     |  | 7. AGE   | IF UND   | ER I YEAR         | IF UNDER          | 24 HOURS   |  |
|                      | Female  | Temale   White/Ame        |                                   |                                |   |           | Oct. 1, 19   |                     |                                       | 0  | 65 YEAR  |  |                   |                   |            |  |
| DECEDENT             | B. BIRTHPLACE OF DECEDENT<br>(SYATE OR FOREIGN COUNTRY)   |                           |                                   | 9. NAME AND BIRTHPLACE OF FATH |   |           |  |                     |                                       |  | 10. BIRTH NAME AND BIRTHPLACE OF MOTHER  |  |                   |                   |            |  |
| PERSONAL             | NB  |                           |                                   | James Allen Wood NB            |   |           |  |                     |                                       |  | Maude Hodgkins NB  |  |                   |                   |            |  |
|                      | 11A. CITIZEN OF 11B. IF DECI  |                           |                                   | BANED WAS E                    |   |           |  |                     | ARITAL STATUS                         | 14. NAME OF SURVIVING SPOUSE OF WIFE, EN   |  |  |                   |                   |            |  |
|                      | WHAT COUNTRY N  |                           | MALTARY GIVE DATES OF SI          |                                |   |           | 8786A  |                     | Me                                    | rried  | Elbert Dve   |  |                   |                   |            |  |
|                      | 18. PRIMARY OCCUPAT   |                           | TION 18. NUMB                     |                                | OF YEARS  | 17. EMP   | 17. EMPLOYER SP SELF-EMPLO   |                     |                                       |  | 18. KNO OF INDUSTRY OR BUSINESS  |  |                   |                   |            |  |
|                      | Financial Rep.  |                           |                                   | THE OCCUPATION                 |   | 1 7 7     | T D C Commons  |                     |                                       |  | Investments  |  |                   |                   |            |  |
|                      |   |                           |                                   | ORESS (STREET AND HUMBER OR I  |   |           | LOCATIONS 198  |                     |                                       |  | Investments  |  |                   |                   |            |  |
|                      | 201.7   |                           |                                   |                                |   |           |  |                     | <b>n</b>                              |  |  |  |                   |                   |            |  |
| USUAL<br>RESIDENCE   | 3941 Ar   |                           | urive S                           | outn                           |   | LIDE S    | 119E. STATE 20. NAME A   |                     |                                       |  |  | Fresio ND ADDRESS OF INFORMANT—RELATIONSHIP  |                   |                   |            |  |
| RESIDENCE            | 155. 555  |                           |                                   |                                |   | 1         |  |                     |                                       |  |  |  | ١.                |                   | ₹*         |  |
|                      | Fresno  |                           |                                   |                                |   |           |  |                     |                                       |  | Elbert Dye (Husband)   |  |                   |                   |            |  |
| _                    | RIA. PLACE  |                           |                                   |                                |   | l l       |  |                     |                                       |  | den Dri  | 10.  | uth               |                   |            |  |
| PLACE<br>OF          | Sierra  |                           |                                   |                                | <del> </del>  |           | esno   |                     |                                       | Fresno,  | Ca 93  | 703  | 1                 |                   |            |  |
| DEATH                | 21C. STREET   |                           |                                   | NO NUMBER O                    | R LOCATION)   | 21D. C    | ITY OR I   | rown                | 4                                     | The state of the s | The second of the second   |  | \                 |                   |            |  |
|                      | 2025 E. Dakota  |                           |                                   |                                |   |           | esno   |                     |                                       |  |  | -  |                   |                   |            |  |
|                      | 22. DEATH V   |                           | JSED BY:                          | ENTER                          | ONLY ONE  | CAUSE PE  | er line f  | FOR A, B. A         | ND C                                  | )  | The state of the s | in the same of the | TO CORON          | DEATH REP<br>IZRT | ONTED      |  |
| -                    |   |                           | -w X                              | Espiral                        | and a   | fai       | lu   | 2                   |                                       | The state of the s |  | PPROXI-  | N. "              | No                | <b>'</b> - |  |
| CAUSE                | WHICH GAVE RISE TO DUE TO, OR HIS A CONSEQUENCE OF  |                           |                                   |                                |   |           |  |                     |                                       | 1  |  | TERVAL   | 25. WAS 1         | HOPEY PER         | PORMED?    |  |
| OF<br>DEATH          | THE MIMEDIATE CAUSE (B) Omystrophic Jatus Schoons   |                           |                                   |                                |   |           |  |                     |                                       |  |  | ETWEEN<br>ONSET  | 1                 | 26                | 2          |  |
|                      | STATING THE UNDER-  |                           |                                   |                                |   |           |  |                     |                                       |  |  | AND 26. WAS AUTOPSY PERFORMED?   |                   |                   |            |  |
|                      | LYING CAUSE LAST.   |                           |                                   |                                |   |           |  |                     |                                       | \ <b>4</b> \   |  | DEATH  | -                 | 20                | 2          |  |
|                      | 23. OTHER SIGNERCANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED 1   |                           |                                   |                                |   |           |  |                     | ZIVEN                                 | 27. WAS OPER   | TION PERFORM   | ED POR A   | NY CONDITI        | он ин пта         | 8 22 OR    |  |
|                      | TA Act of the Mars DATE 8-30-8  |                           |                                   |                                |   |           |  |                     |                                       |  |  |  | 10-86             |                   |            |  |
|                      | 28A. 1 CENT   |                           |                                   |                                |   | 88. PHYS  | CIAN-8   | CONSTRUCT AN        | ED DEG                                | HEIR OR TITUE  | 28C. DATE  |  | SD. PHYSICU       |                   | SE MANSER  |  |
| PHYSI-               | HOUR, DATE AND PLACE STATED FROM THE CAUSES   |                           |                                   |                                |   |           | Vance Call Mala  |                     |                                       |  |  | 86   |                   | 253               |            |  |
| CIAN'S<br>CERTIFICA- | I ATTENDED DE   | SE TYPE                   | TYPE PHYSICIAN'S NAME AND ADDRESS |                                |   |           |  | 701                 |                                       |  |  |  |                   |                   |            |  |
| TION                 |   |                           |                                   |                                |   |           | Ronald S. Nelson M.D., 382   |                     |                                       |  |  | Ol N. Clark Progno Ca  |                   |                   |            |  |
|                      | 29. SPECIFY A   | CCIONA                    | LICENS STC                        | A 30 m                         | ACE OF HUURN  |           | Tu D.  |                     |                                       |  | DATE OF HUUR   |  |                   |                   |            |  |
| INJURY               | 25. 5. (0)  |                           |                                   |                                | AGE OF BOOM   | -         | The same of  | 3                   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |  | DATE OF ROOM   |  | 7, 600 1, 1 about | 1                 | <b>~</b>   |  |
| INFORMA-             | 33. LOCATIO   | CHOOL STATE               | NO 34. DESCRIBE HOW INJURY OCCURR |                                |   |           |  |                     |                                       | <u> </u>   |  |  |                   |                   |            |  |
| TION                 | Sax Econiio   | TT POINTS                 | - / -                             |                                | ~~~~  | OHIO THE  | h  | DESCRIBER           | 101111                                | JOH! OCCURN  | -  | FIGH RESU  | CIED WINDO        | A11               |            |  |
| CORONER'S            |   |                           |                                   |                                |   |           |  |                     |                                       |  |  |  |                   |                   |            |  |
| USE                  | 35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM 35B. CORONER—SIGNATURE AND DEGREE OR TITLE 35C, DATE SIGNED THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HELD AN (INQUEST-INVESTIGATION) |                           |                                   |                                |   |           |  |                     |                                       |  |  |  | TE SIGNED         |                   |            |  |
| 24 01600412          |   |                           | HTH DAY, YEA                      | . 1 20 2/1/2                   |   |           | <u> </u>   | <u>\i\</u>          |                                       |  |  |  |                   | 1                 |            |  |
| 36. DISPOSITI        |   |                           | HIR DAY, TEA                      | SO. NAME                       | AND ADDRESS   | OF CEMETE | NY OR CRE  | MATORY              |                                       |  | 39. EMB.   | ALMER'S LI   | CENSE NUMB        | ER AND BR         | PHATURE    |  |
| Crematic             |   | 22/86                     |                                   |                                | 1 of the  |           | ht, I  | res <del>no</del> . | 20                                    |  | Not  | Emba   | llmed             |                   |            |  |
|                      | PUNERAL DIRECT  |                           | 1 1                               | 1 1                            |   | 0. 41     | . LOCAY  | EGSTR)              | 一类                                    | Chr.CK   | 4. ^   |  | TE ACCEPTED       |                   | REGISTRAR  |  |
| Neptune              | Society   | of F                      | resno                             |                                | 332   |           | 1  | 11mil               | 74                                    |  | 70   | A) SE  | 7 1 9             | 1986              |            |  |
| STATE<br>REGISTRAR   | M.  |                           | 3.                                |                                | C.  |           | /  | 7 D.                |                                       |  | E  |  | F.                |                   |            |  |
| /S-11(1-8IX          |   |                           |                                   | 7                              | The Parks   |           | and the same of th |                     |                                       |  | L.,,,,,,,,,  |  |                   |                   |            |  |
| /                    | /-  |                           | -                                 |                                |   | •         | •  | 1                   | -                                     |  | • · · · · · · · · · · · · · · · · · · ·  |  |                   |                   | -          |  |
| /                    | /   |                           |                                   |                                | The Real Property lies and the Personal Property lies and the |           | -  |                     |                                       |  |  |  |                   |                   |            |  |
|                      |   |                           | CERT                              | IFICATI                        | UN NIIME  | FD        | 1-1  | 77-1                | 11                                    | 1211   | مس   |  |                   |                   |            |  |
|                      |   |                           | VLIVI                             | AI TOTIL                       | on nome   |           | 1 0  | 1-1                 | 1/                                    | 117  | -U   |  |                   |                   |            |  |
| \                    | /   |                           |                                   | STATE                          | OF CA   | LIFORN    | IIA -  | COUNTY              | Y OF                                  | FRESNO   |  |  |                   |                   |            |  |

THIS IS TO CERTIFY THAT THIS IS A TRUE COPY OF THIS DOCUMENT FILED AND/OR RECORDED IN THIS OFFICE ISSUED BY AUTHORITY OF SECTION 10575 OF CALIFORNIA HEALTH AND

SAFETY CODE SEAL

NOT A CERTIFIED (LEGAL) COPY WITHOUT A RAISED SEAL AND THE DEPUTY'S INITIALS IN RED INK

DATED: \_

LOCAL REGISTRAR

142572 800K1086 PACE1243

PARCEL ONE:

An undivided 1/51st interest in and to that certain condominium as follows:

(a) An undivided 1/20th interest, as tenants-in-common, in and to Lot 33 of Tahoe Village Unit No. 3, Fifth-Amended Map, recorded October 29, 1981, as Document No. 61612 as corrected by Certificate of Amendment recorded November 23, 1981 as Document No. 62661, all of Official Records Douglas County, State of Nevada. Except therefrom units 121 to 140 as shown and defined on that certain Condominium Plan recorded August 20, 1982, as Document No. 70305 of Official Records.

(b) Unit No. 133 as shown and defined on said Condominium Plan.

PARCEL TWO:

A non-exclusive right to use the real property known as Parcel "A" on the Official Map of Tahoe Village Unit No. 3, recorded January 22, 1973, as Document No. 63805, records of said county and state, for all those purposes provided for in the Declaration of Covenants, Conditions and Restrictions recorded Linuary 11, 1973, as Document No. 63681, in Book 173, Page 229 of Official Records and in the modifications thereof recorded September 28, 1973 as Document No. 69063 in Book 973, Page 812 of Official Records and recorded July 2, 1976 as Document No. 1472 in Book 776, Page 87 of Official Records.

PARCEL THREE:

A non-exclusive easement for ingress and egress and recreational purposes and for use and enjoyment and incidental purposes over, on and through Lots 29, 39, 40 and 41 as shown on said Tahoe Village Unit No. 3, Fifth Amended Map and as corrected by said Certificate of Amendment.

PARCEL FOUR:

(a) A non-exclusive easement for roadway and public utility purposes as granted to Harich Tahoe Developments in deed re-recorded December 8, 1981 as Document No. 63026, being over a portion of Parcel 26-A (described in Document No. 01112 recorded June 17, 1976) in Section 30, Township 13 North, Range 19 East, M.O.M., (b) An easement for ingress, egress and public utility purposes, 32' wide, the centerline of which is shown and described on the 5th amended map of Tahoe Village No. 3, recorded October 29, 1981 as Document No. 61612 and amended by Certificate of Amendment recorded November 23, 1981 as Document No. 62661, Official Records, Douglas County, State of Nevada

PARCEL FIVE:

The exclusive right to use said UNIT and the non-exclusive right to use the real property referred to in subparagraph (a) of Parcel One and Parcels Two, Three and Four above during ONE "use week" within the <a href="Spring/Fall">Spring/Fall</a> "use season", as said quoted terms are defined in the Declaration of Restrictions, recorded Sqrtesber 17. 1982, as Document No. 71000 of said Official Records. The above described exclusive and non-exclusive rights may be applied to any available unit in the project, during said use week within said season.

REQUESTED BY
DOUGLAS COUNTY TITLE
IN OFFICIAL RECORDS OF
DOUGLASS FOR REVADA

'86 OCT 13 P12:33

SUZANNE DE AUDRE AU
RE CORDER
SPAID ZL DEPUTY

142572