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# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

STEWART TITLE OF DOUGLAS COUNTY

State of California }  
County of SACRAMENTO } ss.

On 12/14/2000, before me, BENJAMIN F. SLATER / Notary Public,  
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared DONNA J. CRILKEY  
Name(s) of Signer(s)

personally known to me  
 proved to me on the basis of satisfactory evidence

to be the person ~~(s)~~ whose name ~~(s)~~ is/are subscribed to the within instrument and acknowledged to me that ~~he/she/they~~ executed the same in ~~his/her/their~~ authorized capacity ~~(ies)~~, and that by ~~his/her/their~~ signature ~~(s)~~ on the instrument the person ~~(s)~~, or the entity upon behalf of which the person ~~(s)~~ acted, executed the instrument.



WITNESS my hand and official seal.

Benjamin F. Slater  
Signature of Notary Public

Place Notary Seal Above

## OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

### Description of Attached Document

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

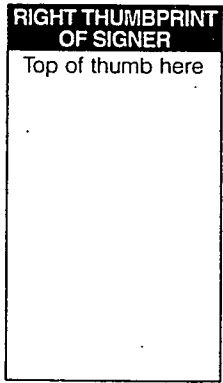
Signer(s) Other Than Named Above: \_\_\_\_\_

### Capacity(ies) Claimed by Signer

Signer's Name: \_\_\_\_\_

- Individual
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_



0505272

BK 1200PG3504



STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

SACRAMENTO COUNTY

DEPARTMENT OF HEALTH AND HUMAN SERVICES

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 1/00)

STATE FILE NUMBER

LOCAL REGISTRATION NUMBER

1. NAME OF DECEDENT—FIRST (GIVEN) <b>ROY</b>		2. MIDDLE <b>William</b>		3. LAST (FAMILY) <b>GILKEY</b>	
4. DATE OF BIRTH M M / D D / C C Y Y <b>02/15/1938</b>		5. AGE YRS. <b>62</b>		6. SEX <b>M</b>	
7. DATE OF DEATH M M / D D / C C Y Y <b>09/19/2000</b>		8. HOUR <b>0715</b>			
9. STATE OF BIRTH <b>AR</b>		10. SOCIAL SECURITY NO. <b>7083</b>		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
12. MARITAL STATUS <b>Married</b>		13. EDUCATION—YEARS COMPLETED <b>14</b>			
14. RACE <b>Black</b>		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER <b>State of California</b>	
17. OCCUPATION <b>Building &amp; Property Manager</b>		18. KIND OF BUSINESS <b>Department of General Services</b>		19. YEARS IN OCCUPATION <b>38</b>	
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) <b>5840 Laguna Shore Way</b>					
21. CITY <b>Elk Grove</b>		22. COUNTY <b>Sacramento</b>		23. ZIP CODE <b>95758</b>	
24. YRS IN COUNTY <b>43</b>		25. STATE OR FOREIGN COUNTRY <b>CA</b>			
26. NAME, RELATIONSHIP <b>Donna Jean Gilkey—Spouse</b>			27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) <b>5840 Laguna Shore Way Elk Grove, CA 95758</b>		
28. NAME OF SURVIVING SPOUSE—FIRST <b>Donna</b>		29. MIDDLE <b>Jean</b>		30. LAST (MAIDEN NAME) <b>Jennings</b>	
31. NAME OF FATHER—FIRST <b>Henry</b>		32. MIDDLE <b>Lee</b>		33. LAST <b>Gilkey</b>	
34. BIRTH STATE <b>AR</b>		35. NAME OF MOTHER—FIRST <b>Willie</b>		36. MIDDLE <b>Mae</b>	
37. LAST (MAIDEN) <b>Love</b>		38. BIRTH STATE <b>AR</b>			
39. DATE M M / D D / C C Y Y <b>09/25/2000</b>		40. PLACE OF FINAL DISPOSITION <b>South East Lawn Memorial Park 9189 Stockton Blvd. Elk Grove, CA 95624</b>			
41. TYPE OF DISPOSITION(S) <b>BU</b>		42. SIGNATURE OF EMBALMER <i>DeMont &amp; Eastman</i>		43. LICENSE NO. <b>8527</b>	
44. NAME OF FUNERAL DIRECTOR <b>Thompson Funeral Home, Inc.</b>		45. LICENSE NO. <b>FD860</b>		46. SIGNATURE OF LOCAL REGISTRAR <i>Shannah J. Trickett, M.D.</i>	
47. DATE M M / D D / C C Y Y <b>09/22/2000</b>		48. LGO <b>LGO</b>			
101. PLACE OF DEATH <b>KAISER FOUNDATION HOSPITAL</b>		102. IF HOSPITAL, SPECIFY ONE: <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. FACILITY OTHER THAN HOSPITAL: <input type="checkbox"/> CONV. HOSP. <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER	
104. COUNTY <b>SACRAMENTO</b>		105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) <b>6600 BRUCEVILLE ROAD</b>		106. CITY <b>SACRAMENTO</b>	
107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)		TIME INTERVAL BETWEEN ONSET AND DEATH <b>24 HRS.</b>		108. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER	
IMMEDIATE CAUSE (A) <b>SPONTANEOUS INTRACRANIAL HEMORRHAGE</b>				109. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DUE TO (B)				110. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DUE TO (C)				111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
DUE TO (D)					
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH, BUT NOT RELATED TO CAUSE GIVEN IN 107 <b>NONE</b>					
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. <b>NO</b>					
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE M M / D D / C C Y Y <b>09/19/2000</b>		115. SIGNATURE AND TITLE OF CERTIFIER <i>Mary-Barbara Romero</i>		116. LICENSE NO. <b>A063495</b>	
DECEDENT LAST SEEN ALIVE M M / D D / C C Y Y <b>09/19/2000</b>		117. DATE M M / D D / C C Y Y <b>09/19/2000</b>			
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP <b>MARY-BARBARA ROMERO, MD; 6600 BRUCEVILLE ROAD, SACRAMENTO, CA 95823</b>					
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		120. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO		121. INJURY DATE M M / D D / C C Y Y	
122. HOUR		123. PLACE OF INJURY		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)	
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)					
126. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE M M / D D / C C Y Y		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	

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STEWART TITLE OF DOUGLAS COUNTY

322643

STATE REGISTRAR } A B CERTIFIED COPY OF VITAL RECORDS H FAX AUTH. # 0981 CENSUS TRACT

STATE OF CALIFORNIA } SS  
COUNTY OF SACRAMENTO }

This is a true and exact reproduction of the document officially registered and placed on file with SACRAMENTO COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES.

DATE ISSUED: **September 28, 2000**

*Shannah J. Trickett M.D.*  
LOCAL REGISTRAR

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

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A TIMESHARE ESTATE COMPRISED OF:

PARCEL ONE:

An undivided 1/102nd interest in and to that certain condominium as follows:

(A) An-undivided 1/106ths interest as tenants-in-common, in and to Lot 37 of Tahoe Village Unit No. 3 as shown on the Ninth Amended Map Recorded July 14, 1988 as Document No. 182057, Official Records of Douglas County, State of Nevada. Except therefrom Units 039 through 080 (Inclusive) and Units 141 through 204 (Inclusive) as shown and defined on that certain Condominium Plan Recorded as Document No. 182057, Official Records of Douglas County, Nevada.

(B) Unit No. 041 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 January 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 the use and enjoyment and incidental purposes over, on and through Lots 29, 39, 40, and 41 as shown on Tahoe Village Unit No. 3 - Seventh Amended Map, recorded April 9, 1986 as Document No. 133178 of Official Records of Douglas County, State of Nevada and such recreational areas as may become a part of said timeshare project, for all those purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas County, State of Nevada.

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,  
- and -

(B) An easement for ingress, egress and public utility purposes, 32' wide, the centerline of which is shown and described on the Seventh Amended Map of Tahoe Village No. 3, recorded April 9, 1986, as Document No. 133178 of Official Records, Douglas County, State of Nevada.

PARCEL FIVE:

The exclusive right to use a unit of the same Unit Type as described in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded on August 18, 1988, as Document No. 184461 of Official Records of Douglas County, in which an interest is hereby conveyed in subparagraph (B) of Parcel One, 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 for all of the Purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions of the Ridge Tahoe, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas County, during ONE ALTERNATE use week within the ODD numbered years of the SWING SEASON, as said quoted term is defined in the Declaration of Annexation of The Ridge Tahoe Phase Five.

The above described exclusive rights may be applied to any available unit of the same Unit Type on Lot 37 during said use week within said "use season".

Portion of Parcel No. 42-281-03

REQUESTED BY  
STEWART TITLE OF DOUGLAS COUNTYIN OFFICIAL RECORDS OF  
DOUGLAS CO. NEVADA

2000 DEC 19 AM 10:12

LINDA SLATER  
RECORDER\$10.00 PAID *[Signature]* DEPUTY

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STEWART TITLE OF DOUGLAS COUNTY

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