Recording Requested By ALEXANDER L. SCHMID, CSB 97035 GAGEN, McCOY, McMAHON & ARMSTRONG A Professional Corporation 279 Front Street, P.O. Box 218 Danville, CA 94526-0218 (925) 837-0585

APN 0000-11-270-050

When Recorded Mail to

JO ANN R. CAVA 19 Franciscan Court Danville, CA 94526

SPACE ABOVE THIS LINE FOR RECORDER'S USE

111 Tramway, #4, So. Lake Tahoe

AFFIDAVIT - DEATH OF JOINT TENANT

JO ANN R. CAVA, of legal age, being first duly sworn, deposes and says:

That, ALBERT N. CAVA, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as ALBERT CAVA named as one of the parties in that certain Grant, Bargain, Sale Deed dated October 4, 2000, executed by EVIE M. VIERA, a married woman as her sole and separate property, as to an undivided 1/2 interest; JUDITH CUTHBERTSON, a married woman, who acquired title as JUDITH A. DAVIDSON, an unmarried woman, as to an undivided interest and KEVIN R. CUTHBERTSON, her husband, to ALBERT CAVA and JO ANN CAVA, husband and wife, as joint tenants, recorded as Instrument No. 0501552, Book 1000, Pages 3108 and 3109 on October 17, 2000, of Official Records in the County Recorder's office of Douglas, State of Nevada, concerning the following described real property situated in the County of Douglas, State of Nevada:

FOR LEGAL DESCRIPTION, SEE EXHIBIT "A" ATTACHED HERETO AND BY REFERENCE MADE A PART HEREOF.

I declare under penalty of perjury that the foregoing is true and correct.

STATE OF CALIFORNIA
)
SSS.

COUNTY OF CONTRA COSTA
)

On December 10, 2001, before me, the undersigned, a Notary Public in and for said State, personally appeared JO ANN R. CAVA, personally known to me (or proved on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in

his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the

WITNESS my hand and official seal

Signature Mary S. Holi

Name (Typed or Printed)

instrument.

nary S. Itolz

JO ANN R. CAVA

MARY S. HOLZ
COMM. #1231159
NOTARY PUBLIC-CALIFORNIA O
CONTRA COSTA COUNTY O
COMM. EXP. AUG. 30, 2003

0530171

BK 120 1PG 4976

EXHIBIT "A"

LEGAL DESCRIPTION

PARCEL 1:

Unit 5A, as shown on the map of Dedication Sheet of TRAMWAY APARTMENT CONDOMINIUMS (a subdivision of Lot 555, Parcel B, Second Amended Map of Summit Village), recorded in the office of the County Recorder of Douglas County, State of Nevada, on May 30, 1973, Document No. 73375, Official Records of Douglas County, State of Nevada; and amended by Amended Map recorded December 30, 1976, as Document No. 05855, Official Records, Douglas County, Nevada.

PARCEL 2:

An undivided 1/24th interest in all of the "Common Area" as shown on the map and Dedication Sheet of Tramway Apartment Condominiums (a subdivision of Lot 555, Parcel B, Second Amended Map of Summit Village), recorded in the office of the County Recorder of Douglas County, Nevada, on May 30, 1973, Document No. 73375, Douglas County, Nevada; and amended by amended Map recorded in the office of the County Recorder of Douglas County, Nevada, on December 30, 1976, as Document No. 05855, Douglas County, Nevada.

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A.P.N. 11-270-050

111 Tramway, Apt. #5

So. Lake Tahoe, NV

COUNTY of CONTRA COSTA MARTINEZ, CALIFORNIA

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DIRECTOR AND LOCAL REGISTRAR PLACE OF, DEATH CAUSE OF DEATH PHYSI- CIAN'S CERTIFICA- TION CORONER'S USE	Hull's Walnut 101. PLACE OF DEATH Kaiser Perma 105. Street Address— 1425 South M 107. DEATH WAS CAUSED IMMEDIATE CAUSE (A) B1 DUE TO (B) DUE TO (C) DUE TO (C) DUE TO (C) 112. OTHER SIGNIFICANT Lung Cancer; 113. WAS OPERATION PER AND PLACE STATED FER MM / DD / C C Y Y 07/22/2001 1 CERTIFY THAT IN M STATED FROM THE C 119. MANNER OF DEATH NATURAL SUICID ACCIDENT INVEST	Creek C nente street and N ain Stree BY: (ENTER of adder Ca adder Ca conditions of COIONAT REPORMED FOR REPORMED FOR MM 10 00: OB/06/ Y OPINION DEF OUR, DATE AN AUSES STATED LINE OF COIONAT GGATION DEF LINE OF COIONAT COIONAT OUR, DATE AN AUSES STATED LINE OF COIONAT COIONAT COIONAT OUR, DATE AN AUSES STATED LINE OF COIONAT C	CONTRIBUTION ATTENTION DE LOCATION	NG TO DE TION IN IT 115. SIG 118. TYP M. L. 120. INJU YES N. AND C.	ATH BUT I SEASE TEM 107 C NATURE A CONTROL DOMAI JRY AT WOI CRIBE HO	NOT RELATI VASCI VASCI NO TITLE O ING PHYSIC ILLY, IN. WINJURY	ONE: 10 ONE: 1	SE GIVEN GONV. HOSP. SE GIVEN BETT TYPE OF OIL A M / D D / C (EVENTS V	OTHER THAIL RES. RES. CARE IN 107 DISEAS PERATION 111 G G G ADDRESS th Mai CCYY 12:	PIME INTERVA SETWEEN ONS AND DEATH 3 YES AND DATE. 6078793 . ZIP 11 St. W 22. HOUR 12	Contr 106. ciry Walnu Little 108. ciry Valnu Little 109. ciry Valnu	O8/0 NTY a Cos t Cre peath rep Yes AUTOPSY Yes O8/0 Cree OF INJUI	D8/2001 EX D8/2001
DIRECTOR AND LOCAL REGISTRAR PLACE OF, DEATH CAUSE OF DEATH PHYSI- CIAN'S CERTIFICA- TION CORONER'S USE	Hull's Walnut 101. PLACE OF DEATH Kaiser Perma 105. STREET ADDRESS— 1425 South M 107. DEATH WAS CAUSED IMMEDIATE CAUSE (A) B1 DUE TO (B) DUE TO (C) DUE TO (C) DUE TO (C) 112. OTHER SIGNIFICANT Lung Cancer; 113. WAS OPERATION PER NO 114. I CERTIFY THAT TO THE EDGE DEATH OCCURRE AND PLACE STATED OF MM / DD / CCYY 07/22/2001 1 CERTIFY THAT IN M OCCURRED AT THE HE STATED FROM THE C. 119. MANNER OF DEATH NATURAL SUICID ACCIDENT PENDIN INVEST 125. LOCATION (STREET /	Creek C nente street and N ain Stree BY: (ENTER of adder Ca adder Ca conditions of COIONAT REPORMED FOR REPORMED FOR MM 10 00: OB/06/ Y OPINION DEF OUR, DATE AN AUSES STATED LINE OF COIONAT GGATION DEF LINE OF COIONAT COIONAT OUR, DATE AN AUSES STATED LINE OF COIONAT COIONAT COIONAT OUR, DATE AN AUSES STATED LINE OF COIONAT C	CONTRIBUTION ATTENTION DE LOCATION	NG TO DE TION IN IT 115. SIG 118. TYP M. L. 120. INJU YES N. AND C.	ATH BUT I SEASE TEM 107 C NATURE A CONTROL DOMAI JRY AT WOI CRIBE HO	NOT RELATI VASCI VASCI NO TITLE O ING PHYSIC ILLY, IN. WINJURY	ONE: 10 ONE: 1	SE GIVEN SE GIVEN CONV. HOSP. SE GIVEN CONV. HOSP. SE GIVEN CONT.	OTHER THAIL RES. RES. CARE IN 107 DISEAS PERATION 111 G G G ADDRESS th Mai CCYY 12:	TIME INTERVALE TIME INTERVALE TIME INTERVALE SETWEEN ONS AND DEATH 3 yrs 6 AND DATE. 5. LICENSE I 078793 . ZIP n St. W 2. HOUR 12	Contr 106. ciry Walnu Little 108. ciry Valnu Little 109. ciry Valnu	O8/0 NTY a Cos t Cre peath Rep Yes REFERRA BIOPSY P YES AUTOPSY YES O8/0 Cree OF INJUI	D8/2001 Exta Bek ORTED TO CORONEI X NO PERFORMED X NO ITERMINING CAUSE NO OTERMINING CAUSE NO DEM M/DD/CCY 16/2001 14596 124 Ca

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CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA COUNTY OF CONTRA COSTA

DATE ISSUED

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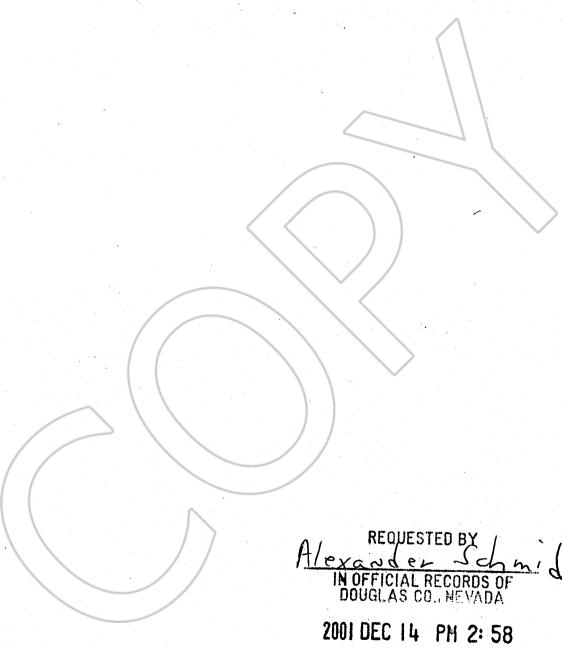
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CONTRA COSTA COUNTY HEALTH OFFICER

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