

A.P.N. # A ptn of 1319-22-000-003
 ESCROW NO. TS09004331/AH

RECORDING REQUESTED BY:
STEWART TITLE COMPANY
 WHEN RECORDED MAIL TO:

THIS INSTRUMENT IS BEING RECORDED AS AN ACCOMMODATION ONLY. NO LIABILITY, EXPRESSED OR IMPLIED, IS ASSUMED AS TO ITS REGULARITY OR SUFFICIENCY NOR AS TO ITS AFFECT, IF ANY, UPON TITLE TO ANY REAL PROPERTY DESCRIBED THEREIN.

Lois A. Cropper
1010 Tahoe Dr.
Modesto, CA 95350

STEWART TITLE OF DOUGLAS COUNTY

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA }
 } ss.
 COUNTY OF Douglas }

Lois A. Cropper, of legal age, being first duly sworn, deposes and says:
 That George R. Cropper, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as George R. Cropper named as one of the parties in that certain Grant Deed dated October 31, 2000 executed by WALLEY'S PARTNERS LIMITED PARTNERSHIP, a Nevada limited partnership to GEORGE R. CROPPER and LOIS A. CROPPER, husband and wife as joint tenants, recorded as Instrument No. 503053, on November 09, 2000 in Book 1100, Page 1703, of Official Records of Douglas County, Nevada, covering the following described property situated in the Douglas County, State of Nevada:

David Walley's Resort, Every Year Use, Week #17-020-51-01, Genoa, NV 89411

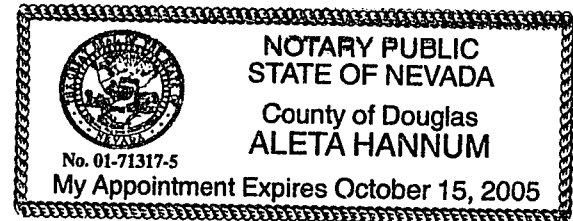
See Exhibit 'A' attached hereto and by this reference made a part hereof.

DATE: August 28, 2002

Lois A. Cropper

 Lois A. Cropper

STATE OF Nevada }
 } ss.
 COUNTY OF DOUGLAS }



This instrument was acknowledged before me on 8/28/02,
 by, Lois A. Cropper

Signature Aleta Hannum

 Notary Public

0554011

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STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

HEALTH SERVICES AGENCY
STANISLAUS COUNTY
 PUBLIC HEALTH DIVISION

CERTIFICATE OF DEATH

STATE FILE NUMBER _____ LOCAL REGISTRATION NUMBER _____

USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS
 V9-11 (REV. 1/00)

1. NAME OF DECEDENT—FIRST (GIVEN) George			2. MIDDLE Raymond			3. LAST (FAMILY) Cropper		
4. DATE OF BIRTH M/M/DD/CYY 04/23/1928		5. AGE YRS. 74		6. SEX M		7. DATE OF DEATH M/M/DD/CYY 05/27/2002		8. HOUR 1945
9. STATE OF BIRTH MI	10. SOCIAL SECURITY NO. 4144		11. MILITARY SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS Married		13. EDUCATION—YEARS COMPLETED 12	
14. RACE White			15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			16. USUAL EMPLOYER Valley Tool And Die		
17. OCCUPATION Machinist			18. KIND OF BUSINESS Tool & Die			19. YEARS IN OCCUPATION 40		
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) 1010 Tahoe Drive								
21. CITY Modesto			22. COUNTY Stanislaus		23. ZIP CODE 95350		24. YRS IN COUNTY 10	25. STATE OR FOREIGN COUNTRY CA
26. NAME, RELATIONSHIP Lois Cropper wife				27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 1010 Tahoe Dr. Modesto, CA 95350				
28. NAME OF SURVIVING SPOUSE—FIRST Lois			29. MIDDLE Ann			30. LAST (MAIDEN NAME) Brewster		
31. NAME OF FATHER—FIRST Felix			32. MIDDLE August			33. LAST Chropowicz		34. BIRTH STATE MI
35. NAME OF MOTHER—FIRST Agnes			36. MIDDLE Elizabeth			37. LAST (MAIDEN) Dembosky		38. BIRTH STATE NJ
39. DATE M/M/D/CYY 05/29/2002		40. PLACE OF FINAL DISPOSITION SanJoaquin Valley National Cemetery 32053 W. McCabe Rd Gustine, CA 95322						
41. TYPE OF DISPOSITION(S) CR/BU			42. SIGNATURE OF EMBALMER Not Embalmed			43. LICENSE NO.		
44. NAME OF FUNERAL DIRECTOR Salas Brothers Chapel, Modesto			45. LICENSE NO. FD 782		46. SIGNATURE OF LOCAL REGISTRAR <i>[Signature]</i>		47. DATE M/M/DD/CYY 05/28/2002	
101. PLACE OF DEATH Memorial Medical Center		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 Stanislaus		
105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) 1700 Coffee Rd.			106. CITY Modesto					
107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)						TIME INTERVAL BETWEEN ONSET AND DEATH Weeks	108. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER	
IMMEDIATE CAUSE (A) Metastatic colon Carcinoma						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 checked="" type="checkbox"/> NO		
DUE TO (D)								
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 Essential Hypertension								
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. Colon Resection 07/30/2000								
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/DD/CYY 03/36/2000 DECEDENT LAST SEEN ALIVE M/M/DD/CYY 05/27/2002			115. SIGNATURE AND TITLE OF CERTIFIER <i>[Signature]</i>			116. LICENSE NO. G33695		117. DATE M/M/DD/CYY 05/28/2002
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP Henry A. Saalwaechter MD 1144 Coffee Rd. Modesto, CA 95355								
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 checked="" type="checkbox"/> NO		
121. INJURY DATE M/M/D/CYY						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 <i>[Signature]</i>			127. DATE M/M/D/D/CYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER			
STATE REGISTRAR	A	B	C	D	E	F	G	H
							FAX AUTH. # 78066	CENSUS TRACT

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This is to certify that this document is a true copy of the official record filed with the Stanislaus County Health Services Agency.

[Signature]
 JOHN WALKER, M.D.
 LOCAL REGISTRAR OF VITAL STATISTICS

DATE ISSUED
05/30/2002

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Inventory No: 17-020-51-01

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EXHIBIT "A" STEWART TITLE OF DOUGLAS COUNTY
(Walley's)

A timeshare estate comprised of an undivided interest as tenants in common in and to that certain real property and improvements as follows:

An undivided 1/1071st interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

ADJUSTED PARCEL F: A parcel of land located within a portion of the West one-half of the Northeast one-quarter (W 1/2 NE 1/4) of Section 22, Township 13 North, Range 19 East, Mount Diablo Meridian, more particularly described as follows:

Commencing at the one-quarter corner common to Sections 15 and 22, T13N, R19E, M.D.M., a found 1985 BLM brass cap as shown on the Record of Survey prepared by David D. Winchell and recorded September 28, 1989 in the office of the Recorder, Douglas County, Nevada as Document No. 211937; thence South 57°32'32" East, 640.57 feet to the POINT OF BEGINNING; thence North 80°00'00" East, 93.93 feet; thence North 35°00'00" East, 22.55 feet; thence North 10°00'00" West, 92.59 feet; thence North 80°00'00" East, 72.46 feet; thence South 10°00'00" East, 181.00 feet; thence South 80°00'00" West, 182.33 feet; thence North 10°00'00" West, 72.46 feet to the POINT OF BEGINNING.

(Reference is made to Record of Survey for Walley's Partners Ltd. Partnership, in the office of the County Recorder of Douglas County, Nevada, recorded on September 17, 1998 in Book 998, at Page 3261, as Document No. 449576.)

Together with those easements appurtenant thereto and such easements and use rights described in the Declaration of Time Share Covenants, Conditions and Restrictions for David Walley's Resort recorded September 23, 1998, as Document No. 0449993, and as amended by Document Nos. 0466255, 0485265 and 0489959, and subject to said Declaration; with the exclusive right to use said interest for one Use Period within a DELUXE UNIT each year in accordance with said Declaration.

A Portion of APN 1319-22-000-003

REQUESTED BY
Stewart Title of Douglas County

IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2002 OCT -7 AM 10: 24

LINDA SLATER
RECORDER

\$16 PAID *KJ* DEPUTY

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