

19-
1319-30-644-010 (PTN)

APN 42 282 01 (portion)

Recording requested by and when
Recorded mail to:

Mable Chew
2365 Pine Knoll Dr. #3
Walnut Creek, CA 94595

This is a transfer from Husband (deceased) to Wife and therefore no Transfer Tax is due.

AFFIDAVIT-DEATH OF JOINT TENANT

MABLE CHEW, being of legal age, being first duly sworn, deposes and says:

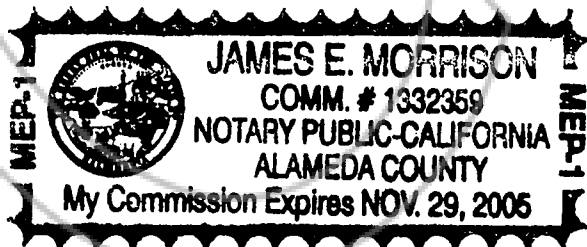
That WARREN CHEW, the decedent mentioned in the attached certified copy of Certificate of Vital Record Certificate of Death, is the same person as WARREN CHEW, named as one of the parties in that certain DEED executed by HARRICH TAHOE DEVELOPMENTS, A NEVADA GENERAL PARTNERSHIP to WARREN CHEW & MABLE C. CHEW, as joint tenants with rights of survivorship and recorded on June 22, 1989 as Instrument 206132, Book 789, Page 260, Douglas County, Nevada Records, conveying an interest in the real property described in Exhibit "A" attached hereto.

That the value of all real and personal property owned by said decedent at the date of death, including the full value of the property above described did not then exceed the sum of \$1,000,000.00.

I declare under penalty of perjury under the laws of the State of California that the foregoing is correct, and if called as a witness in this matter I could testify competently as to those matters hereinabove stated from my own personal knowledge; I further declare that this declaration was executed at Alameda County, California on the date set forth below.

DATED: 12/23/02

Mable C. Chew
MABLE C. CHEW



James E. Morrison

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Exhibit "A" (37)

A TIMESHARE ESTATE COMPRISED OF

PARCEL ONE:

An undivided 1/51st 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.047 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 Ho. 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 Nap, 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 Feburary 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,

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- (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 ho. 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 use weeks within the PRIME 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. 42 282 01

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STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

STATE OF CALIFORNIA

DEPARTMENT OF HEALTH SERVICES

CERTIFICATE OF DEATH

3199701

002450

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY, NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 11/98)		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) WARREN		2. MIDDLE -		3. LAST (FAMILY) CHEW	
4. DATE OF BIRTH M/M/DD/CCYY 05/06/1936		5. AGE YRS. 60		6. SEX M	
7. DATE OF DEATH M/M/DD/CCYY 04/01/1997		8. HOUR 1430			
9. STATE OF BIRTH CA		10. SOCIAL SECURITY NO. 4115		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
12. MARITAL STATUS MARRIED		13. EDUCATION—YEARS COMPLETED 16			
14. RACE CHINESE		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER CITY OF OAKLAND	
17. OCCUPATION RECREATION SUPERVISOR		18. KIND OF BUSINESS RECREATION AND PARKS DEPARTMENT		19. YEARS IN OCCUPATION 32	
20. RESIDENCE—STREET AND NUMBER OR LOCATION 23541 MATTHEW CT.					
21. CITY HAYWARD		22. COUNTY ALAMEDA		23. ZIP CODE 94541	
24. YRS. IN COUNTY 60		25. STATE OR FOREIGN COUNTRY CA			
26. NAME, RELATIONSHIP MABLE CHIN CHEW — WIFE		27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 23541 MATTHEW CT., HAYWARD, CA, 94541			
28. NAME OF SURVIVING SPOUSE—FIRST MABLE		29. MIDDLE -		30. LAST (MAIDEN NAME) CHIN	
31. NAME OF FATHER—FIRST WONG		32. MIDDLE -		33. LAST CHU	
34. BIRTH STATE CHINA		35. NAME OF MOTHER—FIRST LUM		36. MIDDLE -	
37. LAST (MAIDEN) GEE		38. BIRTH STATE CHINA			
39. DATE M/M/DD/CCYY 04/04/1997		40. PLACE OF FINAL DISPOSITION MT. VIEW CEMETERY OAKLAND, CA. 94611			
41. TYPE OF DISPOSITION(S) BURIAL		42. SIGNATURE OF EMBALMER <i>Chen & Rest</i>		43. LICENSE NO. 7768	
44. NAME OF FUNERAL DIRECTOR ALBERT BROWN MORTUARY		45. LICENSE NO. FD 242		46. SIGNATURE OF LOCAL REGISTRAR <i>Albert Brown</i>	
47. DATE M/M/DD/CCYY 04/03/1997					
101. PLACE OF DEATH OWN RESIDENCE		102. IF HOSPITAL, SPECIFY ONE: <input 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 ALAMEDA		105. STREET ADDRESS—STREET AND NUMBER OR LOCATION 23541 MATTHEW CT.			
106. CITY HAYWARD					
107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D) (A) METASTATIC NASOPHARYNGEAL CARCINOMA		108. TIME INTERVAL BETWEEN ONSET AND DEATH 1 YEAR		109. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER	
110. BIOPSY PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		111. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		112. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
113. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 NONE					
114. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. NONE					
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/CCYY 02/03/1997		115. SIGNATURE AND TITLE OF CERTIFIER <i>Peter P. Wong</i>		116. LICENSE NO. G17444	
DECEDENT LAST SEEN ALIVE M/M/DD/CCYY 03/27/1997		117. DATE M/M/DD/CCYY 04/03/1997			
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP PETER P. WONG, M.D. 5401 NORRIS CANYON RD., SAN RAMON, CA. 94583					
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/DD/CCYY	
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/DD/CCYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	
STATE REGISTRAR		A 8 B X C 2 D E F G H		FAX AUTH. # 79277 CENSUS TRACT	

COPY TO STATE

1 OF 2

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SEAL

314965

This is to certify that this document is a true copy of the official record filed with the Office of Vital Records.

S. Kimberly Belshe, Director and State Registrar of Vital Records
by: *Peter Abbott*

GEORGE B. (PETER) ABBOTT, JR., M.D., M.P.H., CHIEF
ACTING STATE REGISTRAR

DATE ISSUED

97 JUN 23 AM 8:35

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



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

STATE OF CALIFORNIA

DEPARTMENT OF HEALTH SERVICES

AFFIDAVIT TO AMEND A RECORD

3199701 00245

BIRTH [] DEATH [x] FETAL DEATH [] NO ERASURES, WHITEOUTS, OR ALTERATIONS

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE/LOCAL REGISTRAR USE ONLY

PART I INFORMATION TO LOCATE RECORD—TYPE OR PRINT IN BLACK INK ONLY

NAME AS IT APPEARS ON RECORD: 1. NAME—FIRST (GIVEN) WARREN, 2. MIDDLE, 3. LAST (FAMILY) CHEW. 4. SEX M, 5. DATE OF EVENT—MM/DD/CCYY 04/01/1997, 6. CITY OF OCCURRENCE HAYWARD, 7. COUNTY OF OCCURRENCE ALAMEDA. 8. FATHER'S NAME AS STATED ON ORIGINAL WONG - CHU, 9. MOTHER'S NAME AS STATED ON ORIGINAL LUM - GEE

PART II STATEMENT OF CORRECTIONS—NO ERASURES, WHITEOUTS, OR ALTERATIONS

Table with 3 columns: 10. CERTIFICATE ITEM NUMBER, 11. INFORMATION AS IT APPEARS ON ORIGINAL RECORD, 12. INFORMATION AS IT SHOULD APPEAR. Row 1: 10: 10, 11: [redacted] 4115, 12: [redacted] 8115. Includes a '2 OF 2' stamp.

REASON FOR CORRECTION: 13. TO CORRECT THE RECORD.

AFFIDAVITS AND SIGNATURES: We, the undersigned, hereby certify under penalty of perjury that we have personal knowledge of the above facts and that the information given above is true and correct.

Signature section with fields for 14. SIGNATURE OF FIRST PERSON, 15. TITLE/RELATIONSHIP TO PERSON IN PART I, 16. DATE SIGNED, 17. AGE, 18. ADDRESS, 19. SIGNATURE OF SECOND PERSON, 20. TITLE/RELATIONSHIP TO PERSON IN PART I, 21. DATE SIGNED, 22. AGE, 23. ADDRESS, 24. SIGNATURE OF STATE OR LOCAL REGISTRAR, 25. DATE ACCEPTED FOR REGISTRATION.

STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, OFFICE OF STATE REGISTRAR

SEAL

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This is to certify that this document is a true copy of the official record filed with the Office of Vital Records.

S. Kimberly Belshé, Director and State Registrar of Vital Records

by: Peter Abbott M.D., M.P.H., CHIEF ACTING STATE REGISTRAR

97 JUN 23 AM 8:35

DATE ISSUED

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

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COPY

REQUESTED BY
Mable Chew
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2002 DEC 30 PM 2: 58

LINDA SLATER
RECORDER

\$ 19⁰⁰ PAID kg DEPUTY

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