

16

OFFICIAL RECORD

Requested By:

TIMESHARE TRANSFER INC

A.P.N: 1319-30-724-017

*Jed*

Douglas County - NV  
Werner Christen - Recorder

Page: 1 Of 3 Fee: 16.00  
BK-0205 PG- 5086 RPTT: 0.00

After recording, return to:  
✓ Timeshare Transfer, Inc.  
1850 43rd Ave., Suite C-2  
Vero Beach, FL 32960



Mail tax statements to:  
Club Tahoe Resort Owners' Assn., Inc.  
P.O. Box 7440, Incline Village, NV 89452

AFFIDAVIT - DEATH OF A JOINT TENANT

STATE OF California }  
COUNTY OF } S.S.

Robert S. Dela Pena, of legal age, being duly sworn, deposes and says that Ofella Locquiao Dela Pena, the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as Ofella L. Dela Pena named as one of the parties in that certain deed dated 7/3/88, executed by Stewart Title of Douglas County as joint tenants, recorded as Document No. 0459352 on 1/25/99 Official Records of Washoe County, Nevada, covering the following described real property situated in the City of Incline Village County of Washoe, State of Nevada.

CONDOMINIUM UNIT NO. 16, INTERVAL NO. PRIME AS SHOWN ON THE MAP OF "CLUB TAHOE", FILED IN THE OFFICE OF THE COUNTY RECORDER OF WASHOE COUNTY, STATE OF NEVADA, ON JUNE 7, 1978, UNDER FILE NO. 536625.

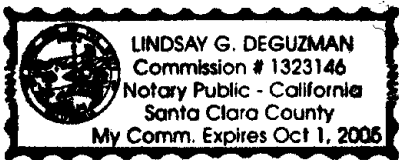
TOGETHER WITH THE APPURTENANCES THEREUNTO BELONGING, INCLUDING AN UNDIVIDED INTEREST IN THE COMMON AREA OF "CLUB TAHOE", AS THE SAME IS DEFINED IN THE DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS FOR "CLUB TAHOE", RECORDED IN THE OFFICE OF THE RECORDER OF WASHOE COUNTY, NEVADA, ON AUGUST 15, 1978, AS DOCUMENT NO. 551501, OFFICIAL RECORDS, AND ALL AMENDMENTS THERETO.

Dated: 01-13-2005

Robert S. Dela Pena  
Robert S. Dela Pena

On 1-15-05, personally appeared before me, a notary Public, ROBERT S. DELAPENA, proved to me to be the person whose name is subscribed to the above instrument who acknowledged that he/she executed the within instrument.

Lindsay G. Deguzman  
Notary Public



**EXHIBIT "A"**

**A TIMESHARE ESTATE COMPRISED OF:**

**PARCEL ONE**

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

- (A) An undivided 1/38<sup>th</sup> interest as tenants-in-common, in and to Lot 34 of Tahoe Village Unit No. 3 as shown on the Eighth Amended Map, recorded as Document No. 156903 of Official Records of Douglas County, State of Nevada. Except therefrom units 001 to 038 as shown and defined on that certain Condominium Plan recorded June 22, 1987 as Document No. 156903 of Official Records of Douglas County, State of Nevada.
- (B) Unit No. **016** 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 modification 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 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 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 Amended Declaration of Annexation of Phase Three Establishing Phase Four, recorded on June 22, 1987, as Document No. 156904 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 week within the "**PRIME SEASON**", as said quoted term is defined in the Amended Declaration of Annexation of Phase Three Establishing Phase Four.

The above described exclusive rights may be applied to any available unit of the same Unit Type on Lot 34 during said use week within said "use season".



**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY of SANTA CLARA**

PUBLIC HEALTH  
2220 MOORPARK AVENUE, SAN JOSE, CALIFORNIA 95128  
STATE OF CALIFORNIA  
CERTIFICATE OF DEATH

STATE FILE NUMBER		USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS VS-10 (REV. 1001)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) <b>Ofella</b>		2. MIDDLE <b>Locquiao</b>		3. LAST (FAMILY) <b>Dela Pena</b>			
4. DATE OF BIRTH MM/DD/CCYY <b>11/07/1949</b>		5. AGE YRS. <b>50</b>		6. SEX <b>F</b>		7. DATE OF DEATH MM/DD/CCYY <b>01/22/2000</b>	
8. STATE OF BIRTH <b>PI</b>		10. SOCIAL SECURITY NO. <b>7094</b>		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS <b>MARRIED</b>	
14. RACE <b>FILIPINO</b>		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER <b>EL CAMINO HOSPITAL</b>			
17. OCCUPATION <b>REGISTERED NURSE</b>		18. KIND OF BUSINESS <b>NURSING</b>		19. YEARS IN OCCUPATION <b>21</b>			
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) <b>1157 THEODEN COURT</b>							
21. CITY <b>SAN JOSE</b>		22. COUNTY <b>SANTA CLARA</b>		23. ZIP CODE <b>95121</b>		24. YRS IN COUNTY <b>21</b>	
25. STATE OR FOREIGN COUNTRY <b>CA</b>							
26. NAME, RELATIONSHIP, MAILING ADDRESS (STREET AND NUMBER), ROUTE NUMBER, CITY OR TOWN, STATE, ZIP <b>ROBERT DELA PENA - HUSBAND 1157 THEODEN CT., SAN JOSE, CA 95121</b>							
28. NAME OF SURVIVING SPOUSE—FIRST <b>ROBERT</b>		29. MIDDLE <b>SABILLO</b>		30. LAST (MARRIED NAME) <b>DELA PENA</b>			
31. NAME OF FATHER—FIRST <b>ALEJO</b>		32. MIDDLE <b>MAGNO</b>		33. LAST <b>LOCQUIAO</b>		34. BIRTH STATE <b>PI</b>	
35. NAME OF MOTHER—FIRST <b>ADELAIDA</b>		36. MIDDLE <b>MANITI</b>		37. LAST (MARRIED) <b>FELICIANO</b>		38. BIRTH STATE <b>PI</b>	
39. DATE MM/DD/CCYY <b>01/25/2000</b>		40. PLACE OF FINAL DISPOSITION <b>RESIDENCE, ROBERT DELA PENA 1157 THEODEN CT., SAN JOSE, CA 95121</b>					
41. TYPE OF DISPOSITION <b>CR/RES</b>		42. SIGNATURE OF EMBLAKER <b>NOT EMBALMED</b>		43. LICENSE NO. <b>-</b>			
44. NAME OF FUNERAL DIRECTOR <b>CHAPEL OF THE MILLS</b>		45. LICENSE NO. <b>FD 940</b>		46. SIGNATURE OF LOCAL REGISTRAR <i>Martin D. Fenstersheib</i>		47. DATE MM/DD/CCYY <b>01/25/2000</b>	
101. PLACE OF DEATH <b>OWN RESIDENCE</b>		102. IF HOSPITAL, SPECIFY OR I <input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. FACILITY OTHER THAN HOSPITAL <input type="checkbox"/> CONV. <input type="checkbox"/> RES. <input type="checkbox"/> OTHER		104. COUNTY <b>SANTA CLARA</b>	
105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) <b>1157 THEODEN COURT</b>		106. CITY <b>SAN JOSE</b>					
107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)		108. TIME INTERVAL BETWEEN ONSET AND DEATH <b>3YRS</b>		109. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER			
IMMEDIATE CAUSE (A) <b>METASTATIC BREAST CANCER</b>		110. BIOPSY PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (B)		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107					
DUE TO (C)							
DUE TO (D)							
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE.							
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 MM/DD/CCYY <b>11/11/1996</b>		115. SIGNATURE AND TITLE OF CERTIFIER <i>Edmund Tai MD</i>		116. LICENSE NO. <b>G50493</b>		117. DATE MM/DD/CCYY <b>01/24/2000</b>	
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP <b>Edmund Tai MD, 582 S. Sunnyvale Ave. Sunnyvale CA, 94086</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		121. INJURY DATE MM/DD/CCYY		122. HOUR	
123. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
125. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE MM/DD/CCYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER			
STATE REGISTRAR		A B C D E F G H		FAX AUTH. # <b>01165</b>		CENSUS TRACT	

H1208179

**CERTIFIED COPY OF VITAL RECORDS**

STATE OF CALIFORNIA } SS DATE ISSUED **01/27/2000**  
COUNTY OF SANTA CLARA } By

This is a true and exact reproduction of the document officially registered and placed

*Martin D. Fenstersheib MD*  
MARTIN D. FENSTERSHEIB  
HEALTH OFFICER AND LOCAL REGISTRAR  
OF BIRTHS AND DEATHS

BK- 0205  
PG- 5088

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

