DOC # 0728837 08/22/2008 03:26 PM Deputy: PK OFFICIAL RECORD Requested By:

THIEL CAMPBELL GUNDERSON &

ANDERSON
Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 3 Fee: 4

41.00 0.00

BK-0808 PG- 3930 RPTT:



PM 1319-30-519.001

Form No. 119-M - AFFIDAVIT OF IDENTITY A) (Top 3 inches Reserved for	
STATE OF MINNESOTA	NAME OF DECEDENT
COUNTY OF HENNEPIN ss.	NAME OF DECEDENT ROSE K. LOBERG
I, Robert J. Loberg - 1499 McLean Ave	
Name of Affiant	and Address of Affiant
being first duly sworn, on oath state from personal know. That the above named decedent is the person name hereto and made a part hereof. That the name(s) of the survivor(s) is karex.	vledge: ned in the certified copy of Certificate of Death attached Robert J. Loberg
That said decedent on date of death was an owner follows:	r as a joint tenant/life tenant of the land legally described as
See legal description attached her	eto as "Exhibit A"
The state of the s	needed, continue on back)
as shown by instrument recorded in Book 586 Page 632-633, or as Document No. 1345	of in the office of the County
Recorder of Douglas County, Nevada	in the office of the County Whitesoft, or as shown on Certificate of Title
No, Files of the Registrar of	Titles of
	THIS INSTRUMENT WAS DRAFTED BY (NAME AND ADDRESS):
Subscribed and sworn to before me this 2nd day of 2008.	Jennifer S.Anderson I.D. 149421 THIEL, CAMPBELL, GUNDERSON AND ANDERSON, PLLP
SIGNATURE OF NOTARY PUBLIC OR OTHER OFFICIAL NOTARIAL STAMP OR SEAL (OR OTHER TITLE OR RANK):	7300 Metro Boulevard, Suite 630 Edina, MN 55439-2365 952-920-8448 fax 952-920-8334 #26,184.02/JSA
JENNIFER S. ANDERSON NOTARY PUBLIC-MINNESOTA NY Commission Francis And St. 2010	Tax Statements for the real property described in this instrument should be sent to: Robert J. Loberg 1/99 McLean Avenue

WARNING: UNAUTHORIZED COPYING OF THIS FORM PROHIBITED.

St. Paul, MN 55106-6610

EXHIBIT "A" LEGAL DESCRIPTION

A timeshare estate comprised of:

Parcel 1: an undivided 1/51st interest in and to the certain condominium described as follows:

•	
	(a) An undivided 1/24th interest as tenants in common, in and to the Common Area of Lot 50,
•	Tahoe Village, Unit No. 1, as designated on the Seventh Amended Map of Tahoe Village Unit
	No. 1, recorded on April 14, 1982, as Document No. 66828 Official Records of Douglas County;
•	State of Nevada, and as said Common Area is shown on Record of Survey of boundary line
* **	adjustment map recorded March 4, 1985, in Book 385, Page
ş-	160, of Official Records of Douglas County, Nevada, as Document No.
· · · · · · · · · · · · · · · · · · ·	114254
	(b) Unit No. 017-11 as shown and defined on said 7th Amended Map of Tahoe
	. Village, Unit No. 1.
•.	
Parcel 2: a	non-exclusive easement for ingress and egress and for use and enjoyment and incidental purposes
	l through the Common Areas as set forth on said Seventh Amended Map of Tahoe Village, Unit
	on April 14, 1982, as Document No. 66828, Official Records of Douglas County, State of Nevada,
in Dook	et forth upon Record of Survey of boundary line adjustment map recorded March 4, 1985,
M DOOK	, at Page 160, of Official Records of Douglas County, Nevada as Document
No. <u>114254</u>	
	e exclusive right to use said unit and the non-exclusive right to use the real property referred to in
subparagraph (a) of Parcel 1 and Parcel 2 above during one "use week" within the "SUMMER use season" as
said quoted term	is are defined in the Declaration of Conditions, Covenants and Restrictions, recorded on December
21, 1984, in Boo	k 1284, Page 1993, as Document No. 111558 of said Official Records, and Amended by instrument
recordedMa	rch 13, 1985 , in Book 385 , Page 961 , of
Official Records	, as Document No. 114670 . The above described exclusive and non-exclusive rights may
be applied to an	y available unit in the project during said "use week" in said above mentioned use season.
	y more and project daring outer and nook in build above intentioned and bounding

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STATE OF MINNESOTA

CERTIFICATION OF VITAL RECORD

DEATH CERTIFICATE

DECEDENT'S NAME **ROSE KATHERINE LOBERG**

DECEDENT'S ALIAS

SEX, SOCIAL SECURITY **FEMALE** -4983 **GINNATY** NUMBER, MAIDEN NAME RESIDENCE (COUNTY AND **RAMSEY** SAINT PAUL, MINNESOTA CITY, STATE)

DATE AND PLACE OF BIRTH **OCTOBER 14, 1931**

SAINT PAUL, MINNESOTA

MARITAL STATUS MARRIED SPOUSE'S NAME. ROBERT LOBERG

PARENT(S) NAME(S) THOMAS P GINNATY

ROSE STUDDART

DATE OF DEATH JULY 08, 2007 PLACE OF DEATH RAMSEY 4

MUELLER MEMORIAL PARKWAY CHAPEL **FUNERAL HOME**

CAUSE OF DEATH PULMONARY FIBROSIS IMMEDIATE

UNDERLYING

(COUNTY AND CITY)

OTHER CONTRIBUTING CONDITIONS

MANNER CORONER, MEDICAL **EXAMINER OR PHYSICIAN** NATURAL

CYNTHIA FRANE, M.D.

SAINT PAUL

3220 BELAIRE AVENUE, WHITE BEAR LAKE, MINNESOTA 55110

62A-0160237

THIS IS A TRUE AND OFFICIAL RECORD OF THE DEATH REGISTERED IN THE OFFICE OF THE STATE REGISTRAR. DATE FILED: JULY 11, 2007

PLACE ISSUED: RAMSEY

DATE ISSUED: JULY 12, 2007

Stone Elli

State Registrar



