

16

1319-30-723-014

APN No.: 33-133-23-02

PTN

DOC # 0732419
11/04/2008 10:19 AM Deputy: SG

OFFICIAL RECORD

Requested By:

TIMESHARE TITLE INC

When Recorded Return to:
Timeshare Title, Inc.
P.O. Box 3175
Sharon, PA 16146

Douglas County - NV
Karen Ellison - Recorder

Page: 1 Of 3 Fee: 16.00
BK-1108 PG- 390 RPTT: 0.00

When Recorded Mail Tax Statements to:
Ridge Tahoe
400 Ridge Club Drive
Stateline, NV 89449



AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF Nevada }
COUNTY OF Carson City }

Patricia A. Correnti, formerly known as Patricia A. Ginestra, of legal age, being duly sworn, deposes and says that Julius Correnti, the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as Julius Correneti named as one of the parties in that certain deed dated May 20th, 1985, executed by Harich Tahoe Developments, a Nevada general partnership to Julius Correneti, an unmarried man and Patricia A. Ginestra, an unmarried woman, as Joint Tenants with Right of Survivorship, recorded in Book 585 as Instrument No. 117578, of Official Records of Douglas County, Nevada, covering the following described real property in the said County of Douglas, State of Nevada:

PARCEL ONE:

An undivided 1/51st interest in and to that certain condominium as follows: (a) An undivided 1/20th interest, as tenants-in-common, in and to Lot 33 of Tahoe Village Unit No. 3, Fifth-Amended Map, recorded October 29, 1981, as Document No. 61612 as corrected by Certificate of Amendment recorded November 23, 1981 as Document No. 62661, all of Official Records Douglas County, State of Nevada. Except therefrom units 121 to 140 as shown and defined on that certain Condominium Plan recorded August 20, 1982, as Document No. 70305 of Official Records. (b) Unit No. 133 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 said Tahoe Village Unit No. 3, Fifth Amended Map and as corrected by said Certificate of Amendment.

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH
VITAL STATISTICS
CERTIFICATE OF DEATH

2007003775
STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

1a. DECEASED-NAME FIRST Julius			1b. MIDDLE CORRENTI		1c. LAST CORRENTI		2. DATE OF DEATH (Mo/Day/Year) July 01, 2007		3a. COUNTY OF DEATH Carson City			
3b. CITY, TOWN, OR LOCATION OF DEATH Carson City			3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and number) 1407 Goshute Way			3e. If Hosp. or Inst. indicate DOA,OP/Emer. Rm. Inpatient(Specify)		4. SEX Male				
5. RACE-(e.g., White, Black, American Indian) (Specify) White		6. Was Decedent of Hispanic Origin? If yes, specify Mexican, Cuban, Puerto Rican, etc. No Non-hispanic		7a. AGE-Last birthday (Years) 74		7b. UNDER 1 YEAR MOS DAYS		7c. UNDER 1 DAY HOURS MINS		8. DATE OF BIRTH (Mo/Day/Yr) October 07, 1932		
9a. STATE OF BIRTH (If not U.S.A., name country) New York		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 13		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) Patricia Ann BALDASSINI				
13. SOCIAL SECURITY NUMBER 0289			14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired) Systems Data Analyst			14b. KIND OF BUSINESS OR INDUSTRY Aerospace						
15a. RESIDENCE - STATE Nevada		15b. COUNTY Carson City		15c. CITY, TOWN OR LOCATION Carson City		15d. STREET AND NUMBER 1407 Goshute Way		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes				
16. FATHER -NAME (First Middle Last Suffix) Dominick CORRENTI						17. MOTHER - NAME (First Middle Last Suffix) Antoinette BRUNO						
18a. INFORMANT- NAME (Type or Print) Patricia A CORRENTI				18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 1407 Goshute Way Carson City, Nevada 89701								
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation			19b. CEMETERY OR CREMATORY - NAME Fitzhenry's Crematory			19c. LOCATION City or Town State Carson City Nevada 89701						
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JAMES SMOLENSKI SIGNATURE AUTHENTICATED				20b. FUNERAL DIRECTOR LICENSE 217		20c. NAME AND ADDRESS OF FACILITY Fitzhenrys Funeral Home 3945 Fairview Dr. Carson City NV 89701						
TRADE CALL - NAME AND ADDRESS												
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) JORGE HERNAN PEREZ-CARDONA M.D. SIGNATURE AUTHENTICATED						22a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)						
21b. DATE SIGNED (Mo/Day/Yr) July 03, 2007			21c. HOUR OF DEATH 03:45			22b. DATE SIGNED (Mo/Day/Yr)			22c. HOUR OF DEATH			
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)						22d. PRONOUNCED DEAD (Mo/Day/Yr)			22e. PRONOUNCED DEAD AT (Hour)			
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER), (Type or Print) Jorge Hernan Perez-Cardona M.D., 1000 N. Division Street #104 Carson City, NV-89703									23b. LICENSE NUMBER 10108			
24a. REGISTRAR (Signature) CHRISTINA GRIFFITH SIGNATURE AUTHENTICATED				24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) July 03, 2007		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>						
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)									Interval between onset and death			
PART (a) Non-Small Cell Lung Cancer									Interval between onset and death			
DUE TO, OR AS A CONSEQUENCE OF:									Interval between onset and death			
PART (b)									Interval between onset and death			
DUE TO, OR AS A CONSEQUENCE OF:									Interval between onset and death			
PART (c)									Interval between onset and death			
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part I									25. AUTOPSY (Specify Yes or No) No		27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No	
28a. ACC. SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)			28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY		28d. DESCRIBE HOW INJURY OCCURRED					
28e. INJURY AT WORK (Specify Yes or No)			28f. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)			28g. LOCATION		STREET OR R.F.D. No.		CITY OR TOWN		STATE

STATE REGISTRAR

BK- 1108
PG- 392
0732419 Page: 3 of 3 11/04/2008

154508 CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED: **07/05/2007**

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

SIGNATURE AUTHENTICATED

