

APN#: 1319-30-616-019 (PTN)

Douglas County - NV  
Karen Ellison - Recorder  
Page: 1 Of 4 Fee: 17.00  
BK-0910 PG- 4352 RPTT: 0.00

**Recording Requested By:**  
Louis J. Cyganek



**When Recorded Mail To:**  
✓ Louis J. Cyganek  
799 Savin Ave, 1<sup>st</sup> Fl.  
West Haven, CT 06516  
203.931.4383

**Mail Tax Statements to: (deeds only)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(space above for Recorder's use only)

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the social security number of a person or persons. (Per NRS 440.380)

**Signature** \_\_\_\_\_ **Print name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Affidavit Death of Joint Tenant**

This page added to provide additional information required by NRS 111.312  
(additional recording fee applies)

**AFFIDAVIT - DEATH OF JOINT TENANT**

Louis J. Cyganek, of legal age, being first duly sworn, deposes and says:

That Mary E. Cyganek, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Mary E. Cyganek named as one of the parties in that certain deed dated 04 August 1990 executed by and between Louis J. Cyganek and Mary E. Cyganek to First Nevada Title Company as joint tenants, recorded as instrument Document No. 232466, on 16 August 1990, in Book 890, Page 2353, of Official Records of Douglas County, Nevada, covering the following described property situated in the County of Douglas, State of Nevada:

All that certain Lot, piece or parcel of land real property situate in the County of Douglas, State of Nevada, described as follows:

A Time Share interest comprised of the following:

**PARCEL ONE:** An undivided 1/51<sup>st</sup> interest in and to that certain condominium estate described as follows:

a) Condominium Unit No. 10, Building B, as set forth in the condominium map of Lot 33, Tahoe Village Unit no. 2, Third Amended Map, recorded February 26, 1981, as Document No. 53850, Official Records of Douglas County, State of Nevada, during ONE (1) "Use Period" within the SUMMER "Season" as defined in the Declaration of Time Share Covenants, Conditions and Restrictions, originally recorded on April 5, 1983 as Document No. 78473, and as rerecorded May 24, 1983 as Document No. 80819 in the Official Records, Douglas County, State of Nevada, and the Declaration of Time Share Covenants, Conditions and Restrictions recorded on October 24, 1983 as Document No. 89976 and as amended by the First Amendment to Declaration of Time Share Covenants, Conditions and Restrictions recorded on November 10, 1983 as Document No. 090832 in the Official Records of Douglas County, State of Nevada.

b) An undivided 1/11<sup>th</sup> interest in and to the common area Designated, depicted and described in the condominium map of Lot 33, Building B, Tahoe Village Unit No. 2, Third Amended Map, recorded February 26, 1981, as Document No. 53850, Official Records Douglas County, State of Nevada, during and for the "Use Period" set forth in subparagraph (a) above.

**PARCEL TWO:** A non-exclusive right to use the "Special Common Area" as defined, and for the purposes and on the terms and conditions set forth, in that certain Declaration of Annexation (Tahoe Summit Village) and Grant, Bargain and Sale Deed recorded May 27, 1987 in Book 587, at page 2664, as Document No. 155368, Official Records of Douglas County, State of Nevada, during and for the "Use Period" set forth in subparagraph (a) above.

**PARCEL THREE:** A non-exclusive right to use the real property known as Common Area on the official map of Tahoe Village Unit No. 2, recorded March 29, 1974 as Document No. 72495, Official Records of Douglas County, State of Nevada, as amended and modified, for all those purposes provided for in the Declaration of Covenants, Conditions and Restrictions recorded January 11, 1973 as Document No. 63681, Official Records of Douglas County, State of Nevada, and as amended by instruments recorded with said County and State on September 28, 1973 as Document No. 69063 in Book 973, Page 812, and July 2, 1976 as Document No. 01472 in Book 776, Page 87 of Official Records during and for the "Use Period" set forth in subparagraph (a) above.

The above described exclusive and non-exclusive rights may be applied to any available unit in the project during said Use Period within said Season.

Affidavit – Death of Joint Tenant – Page 2

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

Dated 13 September 2010

Louis J. Cyganek  
Louis J. Cyganek  
Surviving Joint Tenant

STATE OF CONNECTICUT SS West Haven

COUNTY OF New Haven

This instrument was acknowledged before me on Sept 13, 2010

by Louis J Cyganek

Phyllis Hillitee  
Notary Public exp 3/31/11

STANISLAUS COUNTY

DEPARTMENT OF PUBLIC HEALTH  
CERTIFICATE OF DEATH

STATE FILE NUMBER		USE BLACK INK ONLY/NO ERASURES, WHITEDOUTS OR ALTERATIONS VS-11 (REV. 7/97)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) <b>Mary</b>		2. MIDDLE <b>Eileen</b>		3. LAST (FAMILY) <b>Cyganek</b>			
4. DATE OF BIRTH M/M/DD/CCYY <b>03/10/1947</b>		5. AGE YRS. <b>51</b>		6. SEX <b>F</b>		7. DATE OF DEATH M/M/DD/CCYY <b>04/21/1998</b>	
8. HOUR <b>2210</b>		9. STATE OF BIRTH <b>MA</b>		10. SOCIAL SECURITY NO. <b>0866</b>		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
12. MARITAL STATUS <b>Married</b>		13. EDUCATION—YEARS COMPLETED <b>16</b>		14. RACE <b>White</b>		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
16. USUAL EMPLOYER <b>St. Stanislaus Elementary School</b>		17. OCCUPATION <b>Teacher</b>		18. KIND OF BUSINESS <b>Education</b>		19. YEARS IN OCCUPATION <b>27</b>	
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) <b>1732 Nighthawk Way</b>							
21. CITY <b>Modesto</b>		22. COUNTY <b>Stanislaus</b>		23. ZIP CODE <b>95358</b>		24. YRS IN COUNTY <b>6</b>	
25. STATE OR FOREIGN COUNTRY <b>CA</b>		26. NAME, RELATIONSHIP <b>Louis Cyganek - Husband</b>					
27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) <b>1732 Nighthawk Way, Modesto, CA 95358</b>		28. NAME OF SURVIVING SPOUSE—FIRST <b>Louis</b>					
29. MIDDLE <b>J.</b>		30. LAST (MAIDEN NAME) <b>Cyganek</b>		31. NAME OF FATHER—FIRST <b>Arthur</b>		32. MIDDLE <b>F.</b>	
33. LAST <b>Nickerson</b>		34. BIRTH STATE <b>MA</b>		35. NAME OF MOTHER—FIRST <b>Mary</b>		36. MIDDLE <b>E.</b>	
37. LAST (MAIDEN) <b>McDonough</b>		38. BIRTH STATE <b>MA</b>		39. DATE M/M/DD/CCYY <b>04/29/1998</b>		40. PLACE OF FINAL DISPOSITION <b>RES: - Louis Cyganek, 1732 Nighthawk Way, Modesto, CA</b>	
41. TYPE OF DISPOSITION(S) <b>CR/RES</b>		42. SIGNATURE OF EMBALMER <i>E. J. ...</i>		43. LICENSE NO. <b>4652</b>		44. NAME OF FUNERAL DIRECTOR <b>Franklin &amp; Downs Funeral Home</b>	
45. LICENSE NO. <b>FD1259</b>		46. SIGNATURE OF LOCAL REGISTRAR <i>[Signature]</i>		47. DATE M/M/DD/CCYY <b>04/27/1998</b>		48. PLACE OF DEATH <b>Own Residence</b>	
49. COUNTY <b>Stanislaus</b>		50. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) <b>1732 Nighthawk Way</b>		51. CITY <b>Modesto</b>		52. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)	
53. IMMEDIATE CAUSE <b>(A) CARDIOPULMONARY ARREST</b>		54. TIME INTERVAL BETWEEN ONSET AND DEATH <b>MINS.</b>		55. DEATH REPORTED TO CORONER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO REFERRAL NUMBER <b>#1347</b>		56. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
57. DUE TO <b>(B) ADENOCARCINOMA OF THE OVARY</b>		58. TIME INTERVAL BETWEEN ONSET AND DEATH <b>3 YRS.</b>		59. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		60. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
61. DUE TO <b>(C)</b>		62. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 <b>NONE</b>		63. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. <b>NO</b>		64. PHYSICIAN'S CERTIFICATION 114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE STATED. DECEDENT APPARENTLY SINCE DECEASED LAST SEEN ALIVE M/M/DD/CCYY <b>07/27/1995</b>   <b>04/14/1998</b>	
65. DUE TO <b>(D)</b>		115. SIGNATURE AND TITLE OF CERTIFIER <i>[Signature]</i>		116. LICENSE NO. <b>C39275</b>		117. DATE M/M/DD/CCYY <b>04/22/1998</b>	
118. 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		119. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP <b>ROBERT L. LEVY, M.D., 1401 SPANOS CT., #134, MODESTO, CA 95355</b>		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 <i>[Signature]</i>		127. DATE M/M/DD/CCYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER		129. STATE REGISTRAR A B C D E F G H FAX AUTH: # CENSUS TRACT	

BK- 0910  
PG- 4355  
0770879 Page: 4 Of 4 09/21/2010

88789

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

*[Signature]*  
ALVARO GARZA, M.D.

LOCAL REGISTRAR OF VITAL STATISTICS

DATE ISSUED  
**04/27/1998**

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

