

RECORDING REQUESTED BY

OFFICIAL RECORD
Requested By:
REBECCA BLOOD

AND WHEN RECORDED MAIL TO

Douglas County - NV
Karen Ellison - Recorder

Name Rebecca L. Blood
Street Address 6004 Sawmill Rd
City, State Paradise, Ca 95969
Zip

Page: 1 Of 4 Fee: 17.00
BK-0811 PG-1929 RPTT: 0.00

1319-15-000-015 ptn



SPAC

AFFIDAVIT - DEATH OF JOINT TENANT

Norma F. Mortensen, of legal age, being first duly sworn, deposes and says:
That Charles Frank Mortensen, the decedent mentioned in the attached certified copy
of Certificate of Death, is the same person as Charles F. Mortensen
named as one of the parties in that certain Grant Deed dated 10/16/03
executed by Charles F. Mortensen and Norma F. Mortensen
to Charles F. Mortensen, Norma F. Mortensen and Rebecca L. Blood
as joint tenants, recorded as Instrument No. 0605522, on Feb 25, 2004, in
Book 998, Page 4404, of Official Records of Douglas
County, ~~California~~ Nevada, covering the following described property situated in the
County of Douglas, State of ~~California~~ Nevada.

SEE DEED HEREIN ABOVE REFERRED TO

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 \$ _____

Dated 1/21/2011

Norma F. Mortensen
Surviving Joint Tenant
Norma F. Mortensen

STATE OF CALIFORNIA } ss:
COUNTY OF Butte

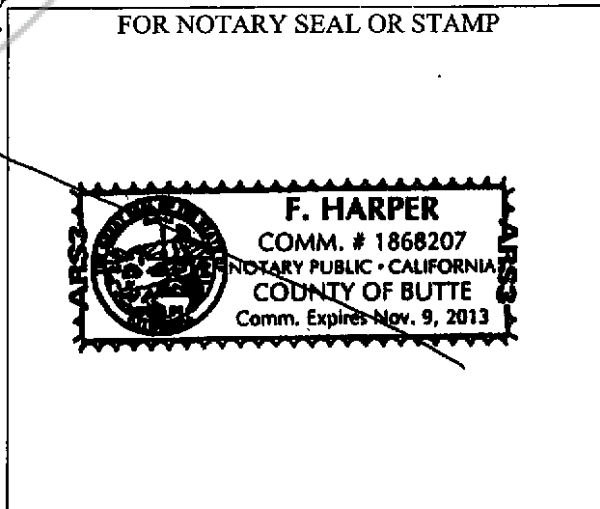
On 01/21/2011, before me, F. Harper, Notary Public,
personally appeared Norma F. Mortensen

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature F. Harper

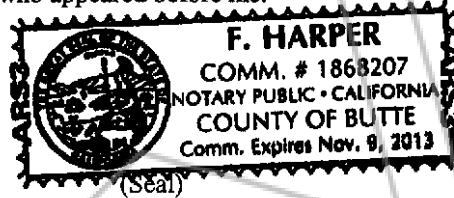


See attached Certificate

STATE OF CALIFORNIA
COUNTY OF Butte

} SS:

Subscribed and sworn to (or affirmed) before me on this 21st day of January, 2011, by Norma F. Mortensen, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.



Signature *F. Harper*

COPY

DESCRIPTION

A timeshare estate comprised of an undivided interest as tenants in common in and to that certain real property and improvements as follows:

An undivided 1/3978th interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

PARCEL E-1 of the Final Subdivision Map LDA #98-05 for DAVID WALLEY'S RESORT, a Commercial Subdivision, filed for record with the Douglas County Recorder on October 19, 2000, in Book 1000, at Page 3464, as Document No. 0501638, and by Certificate of Amendment recorded November 3, 2000, in Book 1100, at Page 467, as Document No. 0502689, Official Records of Douglas County, Nevada.

Together with a permanent non-exclusive easement for utilities and access, for the benefit of Parcel E-1, as set forth in Quitclaim Deed recorded September 17, 1998, in Book 998, at Page 3250, as Document No. 0449574, Official Records, Douglas County, Nevada.

Together with those easements appurtenant thereto and such easements and use rights described in the Declaration of Time Share Covenants, Conditions and Restrictions for David Walley's Resort recorded September 23, 1998, as Document No. 0449993, and as amended by Document Nos. 0466255, 0485265, 0489957, 0509920 and 0521436, and subject to said Declaration; with the exclusive right to use said interest for one Use Period within a STANDARD UNIT every other year in ODD-numbered years in accordance with said Declaration.

A Portion of APN: 1319-15-000-015

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF BUTTE

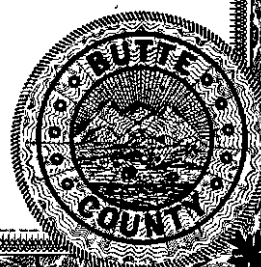
202 MIRA LOMA DRIVE
OROVILLE, CALIFORNIA 95965

CERTIFICATE OF DEATH

3200904001273

Form containing fields for decedent's personal data, usual residence, informant, spouse and parent information, funeral director, place of death, cause of death, physician's certification, and coroner's use only.

BK- 0811
PG- 1932
0787835 Page: 4 of 4 08/11/2011



This is to certify that the attached is a true and correct copy of the vital record which is on file in this office of which I am legal custodian.

DATE ISSUED 07/27/2009

Signature of Mark A. Lundberg, M.D., M.P.H., Health Officer

This copy is not valid unless prepared on engraved border, displaying the date, seal and signature of the County Health Officer.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE