

OFFICIAL RECORD

Requested By:
HARRY SARMENTO

Recording requested by:

Harry R. Sarmento

And when recorded, mail to:

✓ Harry R. Sarmento
2407 Topanga Dr.
Bullhead City, AZ
86442

Douglas County - NV
Karen Ellison - Recorder

Page: 1 Of 3 Fee: 16.00
BK-1211 PG- 3115 RPTT: 0.00



1 of 16000000 3 USE

AFFIDAVIT - DEATH OF JOINT TENANT

State of NEVADA

County of DOUGLAS

) HARICH TAHOE DEVELOPMENTS,
) ss. a Nevada general partnership BY:
) Lakewood Development INC. a
) Nevada Corporation
of legal age, being first duly sworn, deposes and says:

Harry R Sarmento

1. Penny L. Sarmento the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Penny L. Sarmento named as one of the parties in that certain deed dated 6-14-1998 and executed by

Harich Tahoe Developments a Nevada General Partnership, By Lakewood Development INC. to as

Joint Tenants, recorded on 6-14-1998, as Instrument No. 442902 in AS? Book/Reel 698, Page/Image 5822, of Official Records of DOUGLAS CO. County, NEVADA covering the following described property situated in DOUGLAS County, NEVADA

Assessor's Parcel No. LOT #42 UNIT # 258

Dated 11-18-2011 Harry R. Sarmento
(SIGNATURE)

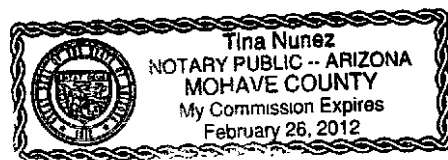
State of AZ
County of Mohave

Subscribed and sworn to (or affirmed) before me on this 18 day of November, 20 11, by Harry Sarmento proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Date: 11/18/2011

Notary Signature [Signature]

NOTARY SEAL





An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/48ths interest in and to Lot 42 as shown on Tahoe Village Unit No. 3-14th amended Map, recorded April 1, 1994, as Document No. 333985, Official Records of Douglas County, State of Nevada, excepting therefrom Units 255 through 302 (inclusive) as shown on said map; and (B) Unit No. 258 as shown and defined on said map; together described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase Seven recorded April 26, 1995, as Document No. 360927, as amended by Amended and Restated Declaration of Annexation of The Ridge Tahoe Phase Seven, recorded May 4, 1995, as Document No. 361461, and as further amended by the Second Amendment of Declaration of Annexation of The Ridge Tahoe Phase Seven recorded on October 17, 1995' as Document No. 372905, and as described in the First Amended Recitation of Easements Affecting The Ridge Tahoe recorded June 9, 1995 as Document No. 363815, and subject to said Declarations; with the exclusive right to use said interest, in Lot 42 only, for one week each year in accordance with said Declarations.

Together with a 13 - foot wide easement located within a portion of Section 30, Township 13 North, Range 19 East, MDB&M, Douglas County, Nevada, being more particularly described as follows:

BEGINNING at the Northwest corner of this easement said point bears S. 43°19'06" E., 472.67 feet from Control Point "C" as shown on the Tahoe Village Unit No. 3, 13th Amended Map, Document No. 269053 of the Douglas County Recorder's Office;

thence S. 52°20'29" E., 24.92 feet to a point on the Northerly line of Lot 36 as shown on said 13th Amended Map;
thence S. 14°00'00" W., along said Northerly line, 14.19 feet;
thence N. 52°20'29" W., 30.59 feet;
thence N. 37°33'12" E., 13.00 feet to the POINT OF BEGINNING.

A portion of APN: 42-010-40

REQUESTED BY
STEWART TITLE OF DOUGLAS COUNTY
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'98 JUN 25 AIO:08

0442802

BK0698PG5823

LINDA SLATER
RECORDER
\$8.00 PAID *ke* DEPUTY



CERTIFICATION OF VITAL RECORD

STATE OF ARIZONA

STATE OF ARIZONA
DEPARTMENT OF HEALTH SERVICES - OFFICE OF VITAL RECORDS
CERTIFICATE OF DEATH

State File NO: 102-2011-017544

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST) PENELOPE LANE SARMENTO			2. AKA'S (IF ANY) PENNY SARMENTO			3. DATE OF DEATH MAY 04, 2011			
4. SEX FEMALE	5. SOCIAL SECURITY NUMBER 2044	6. DATE OF BIRTH 1948	7. AGE 62	8. UNDER 1 YEAR 8 MONTHS 9 DAYS		9. UNDER 1 DAY 10 HOURS 11 MINUTES			
12. PLACE OF DEATH - HOSPITAL <input checked="" type="checkbox"/> INPATIENT <input type="checkbox"/> E.R./OUTPATIENT <input type="checkbox"/> DEAD ON ARRIVAL			13. PLACE OF DEATH - OTHER THAN HOSPITAL <input type="checkbox"/> NURSING HOME OR LONG TERM CARE FACILITY <input type="checkbox"/> RESIDENCE <input type="checkbox"/> HOSPICE FACILITY <input type="checkbox"/> OTHER						
14. FACILITY NAME (OR STREET ADDRESS IF NOT A FACILITY) BANNER GOOD SAMARITAN MEDICAL CENTER				15. CITY, TOWN & ZIP CODE OR LOCATION OF DEATH PHOENIX 85006		16. COUNTY OF DEATH MARICOPA			
17. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) CASA GRANDE, ARIZONA			18. MARITAL STATUS AT TIME OF DEATH MARRIED		19. NAME OF SURVIVING SPOUSE (MAIDEN NAME IF WIFE) HARRY R. SARMENTO				
20. DECEDENT'S USUAL RESIDENCE STREET ADDRESS 2407 TOPANGA DR.			21. CITY AND COUNTY BULLHEAD CITY, MCHAVE		22. STATE ARIZONA		23. ZIP CODE 86442		
25. WAS DECEDENT OF HISPANIC ORIGIN? <input checked="" type="checkbox"/> NO, NOT SPANISH, HISPANIC OR LATINO <input type="checkbox"/> YES, MEXICAN, MEXICAN AMERICAN, CHICANO <input type="checkbox"/> YES, PUERTO RICAN <input type="checkbox"/> YES, CUBAN <input type="checkbox"/> YES, OTHER (SPECIFY)			26. DECEDENT'S RACE(S) <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK, AFRICAN AMERICAN <input type="checkbox"/> NATIVE HAWAIIAN <input type="checkbox"/> ASIAN INDIAN <input type="checkbox"/> CHINESE <input type="checkbox"/> FILIPINO <input type="checkbox"/> JAPANESE <input type="checkbox"/> GUAMANIAN OR CHAMORRO <input type="checkbox"/> KOREAN <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> SAMOAN <input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE			27. IF AMERICAN INDIAN OR ALASKA NATIVE SPECIFY UP TO 4 TRIBES, PRIMARY OR ENROLLED TRIBE ADDITIONAL TRIBE ADDITIONAL TRIBE ADDITIONAL TRIBE			
28. OCCUPATION PRODUCTION SCHEDULER			29. FATHER'S NAME (FIRST, MIDDLE, LAST) RAYMOND FRANK LANE						
30. MOTHER'S NAME (FIRST, MIDDLE, & LAST NAME PRIOR TO FIRST MARRIAGE) VIRGINIA LOU			31. INFORMANT'S NAME HARRY R. SARMENTO						
32. RELATIONSHIP SPOUSE			33. INFORMANT'S MAILING ADDRESS 2407 TOPANGA DR., BULLHEAD CITY, ARIZONA 86442						
34. NAME AND ADDRESS OF FUNERAL FACILITY BUNKER'S GARDEN CHAPEL 33 N. CENTENNIAL WAY MESA, AZ			35. FUNERAL DIRECTOR MATTHEW PARK, FUNERAL DIRECTOR			36. LICENSE NUMBER F1370			
37. METHOD(S) OF DISPOSITION CREMATION		38. NAME AND LOCATION OF 1st DISPOSITION FACILITY EAST VALLEY CREMATORY, MESA, ARIZONA			39. NAME AND LOCATION OF 2nd DISPOSITION FACILITY NONE				
MEDICAL CERTIFICATION SECTION - CAUSE OF DEATH PART I									
IMMEDIATE CAUSE OF DEATH 40. A CARDIOPULMONARY ARREST		41. APPROXIMATE INTERVAL MINUTES			42. B HEMORRHAGIC SHOCK				
DUE TO OR AS A CONSEQUENCE OF 43. C LIVER FAILURE POSSIBLE ALCOHOLISM		44. D 45. APPROXIMATE INTERVAL HOURS			46. APPROXIMATE INTERVAL MONTHS				
DUE TO OR AS A CONSEQUENCE OF 47. D 48. APPROXIMATE INTERVAL									
CAUSE OF DEATH PART II									
49. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSES GIVEN ABOVE LIVER CIRRHOSIS RENAL FAILURE RESPIRATORY FAILURE				50. INJURY? NO		51. INJURY AT WORK? NO		52. MANNER OF DEATH NATURAL DEATH	53. TIME OF DEATH 4:15 AM
				54. WAS AN AUTOPSY PERFORMED? NO		55. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? NO			
CAUSE AND MANNER OF DEATH CERTIFICATION									
56. CERTIFYING PHYSICIAN/NURSE PRACTITIONER/PHYSICIAN'S ASSISTANT - To the best of my knowledge, death occurred due to the cause(s) and manner stated <input checked="" type="checkbox"/> Medical Examiner/Tribal Law Enforcement Authority - 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) and manner stated. <input type="checkbox"/>				57. NAME OF PERSON COMPLETING CAUSE OF DEATH JESSICA HURLEY MD				58. DATE CERTIFIED 05-09-2011	
59. CERTIFIER'S ADDRESS 1111 MC DOWELL ROAD PHOENIX AZ 85006			60. NAME OF REGISTRAR MICHELE CASTANEDA-MARTINEZ			61. DATE REGISTERED 05-11-2011			

Date Issued: 05-17-2011

This is a true certification of the facts on file with the OFFICE OF VITAL RECORDS, ARIZONA DEPARTMENT OF HEALTH SERVICES, PHOENIX, ARIZONA. Revised 04/2010

This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency.

ANY ALTERATION OR ERASURE VOID'S THIS DOCUMENT

81578822

Patricia Adams
PATRICIA ADAMS
ASSISTANT STATE REGISTRAR

