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Doc Number: **0810201**

10/03/2012 02:28 PM

**OFFICIAL RECORDS**

Requested By:  
**Karl K. Hansen**

DOUGLAS COUNTY RECORDERS  
Karen Ellison - Recorder

Page: 1 Of 3 Fee: \$ 16.00  
Bk: 1012 Pg: 957



Deputy sg

A.P.N. # 1319-30-721-016 PTN  
ESCROW NO. \_\_\_\_\_  
RECORDING REQUESTED BY:  
**STEWART TITLE COMPANY**

WHEN RECORDED MAIL TO:  
✓ **KARL K. HANSEN**  
**1200 FAIRLAWN Ct. Apt #6**  
**Walnut Creek, CA 94595**

**AFFIDAVIT - DEATH OF JOINT TENANT**

STATE OF NEVADA }  
  } ss  
COUNTY OF Douglas }

KARL K HANSEN, of legal age, being first duly sworn, deposes and says: That VERONICA A HANSEN, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as VERONICA A HANSEN named as one of the parties in that certain Grant Deed dated August 31, 1983 executed by Harich Tahoe Development, a Nevada general partnership to Karl K. Hansen and Veronica A Hansen, husband and wife as joint tenants, recorded as Instrument No. 71000, on August 31, 1983 in Book 982, Page 753, of Official Records of Douglas County, Nevada, covering the following described property situated in Douglas County, State of Nevada:  
See Exhibit 'A' attached hereto and by this reference made a part hereof.

Karl K. Hansen

DATE:

STATE OF NEVADA }  
  } ss.  
COUNTY OF DOUGLAS }



This instrument was acknowledged before me on October 3, 2012  
by, KARL K. HANSEN

Signature \_\_\_\_\_  
Notary Public

**EXHIBIT "A"**

**A Timeshare Estate comprised of:**

**Parcel One:**

An undivided 1/51st interest in and to that certain condominium described as follows:

- (a) An undivided 1/20th interest, as tenants-in-common, in and to Lot 31 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 81 to 100 Amended Map and as corrected by said Certificate of Amendment.
- (b) Unit No. 095 as shown and defined on said last mentioned map as corrected by said Certificate of Amendment.

**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 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.

**Parcel Four:**

- (a) A non-exclusive easement for roadway and public utility purposes as granted to Harich Tahoe Developments in deed re-recorded December 8, 1981, as Document No. 63026, being over a portion of Parcel 26-A (described in Document No. 01112, recorded June 17, 1976) in Section 30, Township 13 North, Range 19 East, M.D.M., - and -
- (b) An easement for ingress, egress and public utility purposes, 32' wide, the centerline of which is shown and described on the Fifth-Amended Map of Tahoe Village No. 3, recorded October 29, 1981, as Document No. 61612, and amended by Certificate of Amendment recorded November 23, 1981, as Document No. 62661, Official Records, Douglas County, State of Nevada.

**Parcel Five:**

The Exclusive right to use said UNIT and the non-exclusive right to use the real property referred to in subparagraph (a) of Parcel One and Parcels Two, Three, and Four above during ONE "use week" within the SPRING/FALL "use season", as said quoted terms are defined in the Declaration of Restrictions, recorded September 17, 1982 as Document No. 71000 of said Official Records.

The above described exclusive and non-exclusive rights may be applied to any available unit in the project, during said use week within said season.

SPACE BELOW FOR RECORDER'S USE

REQUESTED BY  
**STEWART TITLE OF NORTHERN NEVADA**  
IN OFFICIAL RECORDS OF  
DOUGLAS CO. NEVADA

1983 OCT -4 PM 12: 59

SUZANNE BEAUDREAU  
RECORDER

*Suzanne Beaudreau*

**088163**

BOOK **1083** PAGE **250**

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY of SOLANO

HEALTH AND SOCIAL SERVICES DEPARTMENT

CERTIFICATE OF DEATH

3200948002362

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASERS, WHITEOUTS OR ALTERATIONS YES / NEVER YES		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given)		2. MIDDLE		3. LAST (Family)	
VERONICA		ANNE		HANSEN	
4. DATE OF BIRTH mm/dd/yyyy		5. AGE Yrs.		6. SEX	
08/15/1926		83		F	
8. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER		11. EVER IN U.S. ARMED FORCE?	
UNTD KGDM		4768		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
12. MARITAL STATUS (at Time of Death)		7. DATE OF DEATH mm/dd/yyyy		8. HOUR (24 Hours)	
MARRIED		12/04/2009		1403	
13. EDUCATION - Highest Level/degree (see worksheet on back)		14. WAS DECEDENT HISPANIC/LATINO(S) SPANISH? (if yes, see worksheet on back)		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back)	
HS GRADUATE <input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO		CAUCASIAN	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employers agency, etc.)		19. YEARS IN OCCUPATION	
HOMEMAKER		OWN HOME		52	
20. DECEDENT'S RESIDENCE (Street and number or location)					
175 CEDAR RIDGE DRIVE					
21. CITY		22. COUNTY/PROVINCE		25. STATE/FOREIGN COUNTRY	
RIO VISTA		SOLANO		CA	
23. INFORMANT'S NAME RELATIONSHIP		27. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP)			
KARL HANSEN, HUSBAND		175 CEDAR RIDGE DRIVE, RIO VISTA, CA 94571			
28. NAME OF SURVIVING SPOUSE - FIRST		29. MIDDLE		30. LAST ( Maiden Name)	
KARL		VILHELM KALMAR		HANSEN	
31. NAME OF FATHER - FIRST		32. MIDDLE		33. LAST	
HOWARD				DEAKIN	
34. BIRTH STATE		36. BIRTH STATE			
UK		UK			
35. NAME OF MOTHER - FIRST		37. MIDDLE		38. LAST ( Maiden)	
MARY		ELIZABETH		BUFFELL	
39. DISPOSITION DATE mm/dd/yyyy		40. PLACE OF FINAL DISPOSITION			
12/08/2009		RES KARL HANSEN 175 CEDAR RIDGE DRIVE, RIO VISTA, CA 94571			
41. TYPE OF DISPOSITION(S)		43. SIGNATURE OF EMBALMER		45. LICENSE NUMBER	
CR/RES		NOT EMBALMED			
44. NAME OF FUNERAL ESTABLISHMENT		46. LICENSE NUMBER		48. SIGNATURE OF LOCAL REGISTRAR	
FAIRFIELD FUNERAL HOME		FD1089		RONALD W CHAPMAN	
47. DATE mm/dd/yyyy		49. DATE mm/dd/yyyy			
12/08/2009		12/08/2009			
107. PLACE OF DEATH					
OWN RESIDENCE					
108. COUNTY		109. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location)		106. CITY	
SOLANO		175 CEDAR RIDGE DRIVE		RIO VISTA	
107. CAUSE OF DEATH					
IMMEDIATE CAUSE (Final disease or condition resulting in death)					
CEREBROVASCULAR ACCIDENT					
ATHEROSCLEROSIS					
108. DEATH REPORTED TO CORONER?					
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
109. BIRTH REPORTED TO CORONER?					
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
110. AUTOPSY PERFORMED?					
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
111. USED IN DETERMINING CAUSE?					
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107					
NONE					
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.)					
NO					
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.					
115. SIGNATURE AND TITLE OF CERTIFIER		116. LICENSE NUMBER		117. DATE mm/dd/yyyy	
ROSS ERWIN ARMSTRONG M.D.		G56754		12/08/2009	
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		119. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE			
ROSS ERWIN ARMSTRONG M.D.		1425 SOUTH MAIN STREET, WALNUT CREEK, CA 94596			
120. INJURED AT WORK?		121. INJURY DATE mm/dd/yyyy		122. HOUR (24 Hours)	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK					
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)					
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
125. LOCATION OF INJURY (Street and number, or location, and city, and ZIP)					
126. SIGNATURE OF CORONER / DEPUTY CORONER		127. DATE mm/dd/yyyy		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	

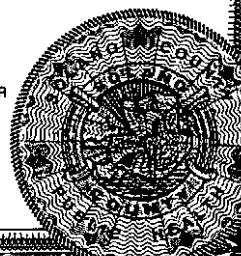
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\* 000320090 \* CERTIFIED COPY OF VITAL RECORDS  
STATE OF CALIFORNIA, COUNTY OF SOLANO

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SOLANO COUNTY HEALTH AND SOCIAL SERVICES DEPARTMENT, PUBLIC HEALTH DIVISION.

By Walter McConley Deputy, DATE ISSUED 01/14/2010

This copy is not valid unless prepared on an engraved border displaying the seal, date of issuance and the original signature of the Deputy.



*Ronald W. Chapman*  
RONALD W. CHAPMAN, MD, MPH  
HEALTH OFFICER AND LOCAL REGISTRAR