APN: Ptn of 1319-22-000-003

This document contains a Social Security number pursuant to NRS 440.380.

When recorded, mail to: George M. Keele 1692 County Road, #A Minden, NV 89423

Doc Number: **0812416**

11/07/2012 12:38 PM OFFICIAL RECORDS Requested By: GEORGE M KEELE ESQ

DOUGLAS COUNTY RECORDERS Karen Ellison - Recorder

Page: 1 Of 5 Fee: \$ 18.00

Bk: 1112 Pg: 1688



AFFIDAVIT OF DEATH OF JOINT TENANT





BK: 1112 PG: 1689 11/07/2012 12:38 PM

AFFIDAVIT OF DEATH OF JOINT TENANT

STATE OF NEVADA)
	: SS
COUNTY OF DOUGLAS)

- I, EDIE VEATCH, hereby swear (or affirm) under penalty of perjury, that the following assertions are true of my own personal knowledge:
- 1. I am over the age of twenty-one (21) years and competent to be a witness as to the matters hereinafter stated.
- 2. EUGENE BURNSIDE, the decedent mentioned in the certified copy of Certificate of Death (which is attached hereto as Exhibit A and incorporated herein by this reference), is the same person as EUGENE R. BURNSIDE named as one of the parties in that certain **Grant, Bargain, Sale Deed** dated January 25, 1999, executed by Robert w. Dunbar of Walley's Partners Limited Partnership, to Eugene R. Burnside and Thelma Burnside, husband and wife as joint tenants with right of survivorship, recorded as Document No. 0462859, in Book 0399, Page 2062, of Official Records of Douglas County, Nevada, covering the property situated in the County of Douglas, State of Nevada, as described on Exhibit B attached hereto and incorporated herein by this reference.

EDIE VEATCH

SIGNED AND SWORN TO (or affirmed) before me on <u>November 5</u>, 2012, by EDIE VEATCH.

Mary & Baldecch







CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH

VITAL STATISTICS

TYPE OR			CERTIFICATE	OF DEATH		ZUU9U183U9 STATE FILE NUMBER		
PRINTIN	1 _	FIRST,MIDDLE,LAST,SUFFIX)			2. DATE OF DEATH (Mo/Day/Ye			
PERMANENT BLACK INK	Eugene	BURNSIDE			December 06, 2009	Carson City		
		CATION OF DEATH 3c. HOSPI	TAL OR OTHER INSTITUTION	-Name(If not either, giv	re street 3e.lf Hosp, or Inst. indic Inpatient(Specify)	ate DOA OP/Emer. Rm. 4. SEX		
DECEDENT	Carson 5 RACE White		Carson Tahoe Regiona			patient Male		
-*-	(Specify)		Hispanic Origin? Specify No - Non-Hispanic	7a. AGE-Last bilthday (Years)	75, UNDER 1 YEAR 7c, UNDER MOS DAYS HOURS	1 DAY 8 DATE OF BIRTH (Mo/Day/Yr)		
IF DEATH	9a. STATE OF BIRTH (If		* * * * * * * * * * * * * * * * * * * *	84		January 31, 1925		
OCCURRED IN	name country) Was		WHAT COUNTRY 10 EDUCAT d States 10	DIVORCED (Spe	EVER MARRIED, WIDOWED, CIV) Married	12 SURVIVING SPOUSE OR DOMESTIC PARTNER: Thelma SHURTLIF		
SEE HANDBOOK REGARDING	13 SOCIAL SECURITY N	IUMBER 14a, USUAL OC	CUPATION (Give Kind of Work			The state of the s		
COMPLETION OF RESIDENCE V :	7658	Working Life, E	en If Retired) Retail	Clerk	Retail	Forces? No		
ITEMS	15a. RESIDENCE - STAT	E 15b COUNTY	15c. CITY, TOWN OR L	OCATION 15d.	STREET AND NUMBER	15e. INSIDE CITY LIMITS (Specify Yes		
-	Nevada	: Carson City	Carson (City 47 (Clearcreek Avenue #2	or No) Yes		
.:: PARENTS	16 FATHER - NAME (Fi	st Middle Lest Suffix) James BURNSI	NE	17: MOTHER -	NAME (First Middle Last Suffi			
	18a. INFORMANT- NAME		18b MAILING ADD	7500 × 100 × 100	Florence, CR			
		Edie VEATCH	TOD MAILING ALL		F.D. No, City or Town, State, Zip) Avenue Markleeville, Califo	vrnia 96120		
	19a. BURIAL, CREMATIC	N, REMOVAL, OTHER (Specify	19b. CEMETERY OR CREMA	TORY - NAME		TION City or Town State		
DISPOSITION	Cr	emation 🔭 🔾	Fitzh	enry's Crematory		Carson City Nevada 89701		
		R - SIGNATURE (Or Person Ac			ME AND ADDRESS OF FACILITY			
		/IES SMOLENSKI GNATURE AUTHENTICATE	DIRECTOR LIC	No.	Fitzhenrys F			
RADE CALL	TRADE CALL - NAME AN	D ADDRESS / F	Burgarian Property and St. Ph. 1997.	1 1	3945 Fairview Dr. Ca	arson City NV 89701		
	중 및 21a. To the best o	my knowledge death occurred	at the time, date and place and	≥ 22a. On th	e basis of examination and/or inve	stigation, in my opinion death occurred at		
	[중 및 que to tue csuse(s) stated. (Signature & Title) St ERRITT WALTON D	GNATURE AUTHENTICATI	ED P the time d	ate and place and due to the cause	a(s) stated, (Signature & Title)		
CERTIFIER	🖺 💆 21b. DATE SIGNE	D (Mo/Day/Yr) / 21c. I	OUR OF DEATH	를 이 22b DATE	E SIGNED (Mo/Day/Yr)	22c, HOUR OF DEATH		
Al 15 .	December (10:20	S A	in Fr.	The Walls Fit Oil		
	15	TENDING PHYSICIAN IF OTHE	R THAN CERTIFIER	22d. PRO	NOUNCED DEAD (Mo/Day/Yr)	22e. PRONOUNCED DEAD AT (Hour)		
	8	SS OF CERTIFIER (PHYSICIAN	ATTEMPING BUYGGAN AFF	T Trains.	9 th, 11 th			
٠. ا		Meturr Avaitou Driulab i	A.D. 1200 N Mountain	St Carson City. N	V 89703	236 LICENSE NUMBER 8077		
REGISTRAR	24a. REGISTRAR (Signat	ure) :: BONNIE	HARWOOD	24b. DATE RECEIVE		ATH DUE TO COMMUNICABLE DISEASE		
	OF HARMAN ON THE	SIGNATURE AU	THENTICATED		ember 17, 2009	YES NO X		
CAUSE OF DEATH	25 IMMEDIATE CAUSE PART I Cardi	ac Arrest	USE PER LINE FOR (8), (b), A	ND (c).)	ni presa	Interval between onset and death		
DEATH	→ (a)	, OR AS A CONSEQUENCE OF		: 22	o de la descripción del descripción de la descri	HE BLY 198 H. J. Lat.		
CONDITIONS IF.	(b) Cong	estive Heart Failure				Interval between onset and death		
ANY WHICH GAVE RISE TO		OR AS A CONSEQUENCE OF			AMAN AM. AM. AM. E			
IMMEDIATE>	, Hype	rtension 🔌	"National Common		* //**	Interval between onset and death		
STATING THE UNDERLYING	DUE TO	OR AS A CONSEQUENCE OF		A STATE OF STATE		Interval between onset and death		
CAUSE LAST "	(d)					A West 1984 sette		
_/	PART II		The state of the s	r din dik	26.	AUTOPSY 27. WAS CASE REFERRED		
	20. ACO OFFICE NO.			a graywanan	(Spe	TO CORONER (Specify Year No.)		
***	28a ACC., SUICIDE, HOM., UI OR PENDING INVEST. (Specif	NDET. 286. DATE OF INJURY (Mo y)	1.74	1	HOW INJURY OCCURRED	11.0 119 # 300		
1 000	28e. INJURY AT WORK (S	Specify 28f PLACE OF INJURIO	At home, farm, street, factory,	MESON DOS LOCATION	AL ATRICET AND THE			
	Yes or No)	building, etc. (Specify)	N	office 28g. LOCATIO	N STREET OR R.F.D. No.	CITY OR TOWN STATE		
35 N	V 10 11 12 12 1							
27	N			REGISTRAR				
	ration in the	/	/ The Late H		H # #11 J JJJ JAH	BK 1112		



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VRS-Rev-20090802



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:

MAY 2.0 2010



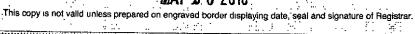




EXHIBIT B LEGAL DESCRIPTION

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 1/2142nd interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

ADJUSTED PARCEL F: A parcel of land located within a portion of the West one-half of the Northeast one-quarter (W 1/2 NE 1/4) of Section 22, Township 13 North, Range 19 East, Mount Diablo Meridian, more particularly described as follows:

Commencing at the one-quarter corner common to Sections 15 and 22, T13N, R19E, M.D.M., a found 1985 BLM brass cap as shown on the Record of Survey prepared by David D. Winchell and recorded September 28, 1989 in the office of the Recorder, Douglas County, Nevada as Document No. 211937; thence South 57°32'32" East, 640.57 feet to the POINT OF BEGINNING; thence North 80°00'00" East, 93.93 feet; thence North 35°00'00" East, 22.55 feet; thence North 10°00'00" West, 92.59 feet; thence North 80°00'00" East, 72.46 feet; thence South 10°00'00" East, 181.00 feet; thence South 80°00'00" West, 182.33 feet; thence North 10°00'00" West, 72.46 feet to the POINT OF BEGINNING.

(Reference is made to Record of Survey for Walley's Partners Ltd. Partnership, in the office of the County Recorder of Douglas County, Nevada, recorded on September 17, 1998 in Book 998, at Page 3261, as Document No. 449576.)

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. 044993, and subject to said Declaration; with the exclusive right to use said interest for one Use Period every other year in ___odd ____-numbered years in accordance with said Declaration.

Per NRS 111.312, this legal description was previously recorded at Document #0462859, Book 0399, Page 2062, on March 9, 1999.