

STATE OF NEVADA
COUNTY OF DOUGLAS

On 11/6/12

Sally Medina personally appeared before me, whom I know to be the
(Name of subscribing witness)

person who signed this jurat of a subscribing witness while under oath, and swears that he/she

was present and witnessed Donald Berry
(Name of document signer)

sign his or her name to the above document.

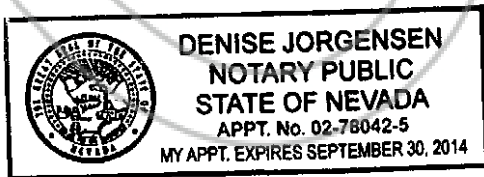
Sally Medina

(Signature of subscribing witness)

Signed and sworn to before me by Sally Medina, this 26 day of
NOV., 2012

Denise Jorgensen
Notary Public

(Notary Seal)



STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

OFFICE OF RECORDER

COUNTY OF SISKIYOU

YREKA, CALIFORNIA

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS
VD-11 (REV. 2007)

3200247000204

LOCAL REGISTRATION NUMBER

1. NAME OF DECEDENT—FIRST (GIVEN) Virginia		2. MIDDLE Mae		3. LAST (FAMILY) Berry	
4. DATE OF BIRTH M/M/DD/CCYY 06/01/1926		5. AGE YRS. 76		6. SEX Female	
7. DATE OF DEATH M/M/DD/CCYY 06/22/2002		8. HOUR 2140			
9. STATE OF BIRTH CA		10. SOCIAL SECURITY NO. -6245		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> USMC	
12. MARITAL STATUS Married		13. EDUCATION—YEARS COMPLETED 12			
14. RACE Caucasian		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER Self Employed	
17. OCCUPATION Homemaker		18. KIND OF BUSINESS Own Home		19. YEARS IN OCCUPATION 14	
20. RESIDENCE—STREET AND NUMBER OR LOCATION 817 Mac Ln.					
21. CITY Mt. Shasta		22. COUNTY Siskiyou		23. ZIP CODE 96067	
24. YRS IN COUNTY 14		25. STATE OR FOREIGN COUNTRY CA			
26. NAME, RELATIONSHIP Don Berry—Husband			27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 817 Mac Ln. Mt. Shasta, CA. 96067		
28. NAME OF SURVIVING SPOUSE—FIRST Don		29. MIDDLE Berry		30. LAST (MARRIAGE NAME) Berry	
31. NAME OF FATHER—FIRST Roy		32. MIDDLE Rodgers		33. LAST Rodgers	
34. BIRTH STATE ID		35. NAME OF MOTHER—FIRST Nona		36. MIDDLE Mae	
37. LAST (MARRIAGE) Nesbit		38. BIRTH STATE MO			
39. DATE M/M/DD/CCYY 06/26/2002		40. PLACE OF FINAL DISPOSITION RES/ 817 Mac Ln. Mt. Shasta, CA. 96067			
41. TYPE OF DISPOSITION(S) CR/RES		42. SIGNATURE OF EMBALMER Not Embalmed		43. LICENSE NO.	
44. NAME OF FUNERAL DIRECTOR Mt. Shasta Memorial Chapel		45. LICENSE NO. FD-156		46. SIGNATURE OF LOCAL REGISTRAR C. Liana Nott	
47. DATE M/M/DD/CCYY 06/24/2002		48. COUNTY Siskiyou			
101. PLACE OF DEATH Own Residence		102. IF HOSPITAL, SPECIFY ONE: <input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DCA		103. FACILITY OTHER THAN HOSPITAL: <input type="checkbox"/> COM. HOSP. <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER	
104. CITY Mt. Shasta		105. COUNTY Siskiyou			
106. STATE CA		107. DEATH WAS CAUSED BY (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D) (A) LUNG CANCER		108. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
109. SYMPTOM ADDRESS—STREET AND NUMBER OR LOCATION 817 Mac Ln.		110. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		111. DEATH IN DOMESTIC CASE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO 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 CAUSE STATED. DECEDENT LAST SEEN ALIVE M/M/DD/CCYY 01/05/1993 06/15/2002		115. SIGNATURE AND TITLE OF CERTIFIER Harvey Sternberg MD 50 Alamo Ave. Weed, CA. 96094		116. LICENSE NO. 652017	
117. DATE M/M/DD/CCYY 6/24/02		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP Harvey Sternberg MD 50 Alamo Ave. Weed, CA. 96094			
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> FEVERING INVESTIGATION <input type="checkbox"/> DEATH NOT YET DETERMINED		120. INJURY AT WORK <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		121. INJURY DATE M/M/DD/CCYY	
122. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP) 817 Mac Ln. Mt. Shasta, CA. 96067		123. HOUR 2140		124. PLACE OF INJURY	
125. SIGNATURE OF CORONER OR DEPUTY CORONER Mike Mallory		126. DATE M/M/DD/CCYY 11-19-2012		127. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER MIKE MALLORY SISKIYOU COUNTY ASSESSOR-RECORDER	
128. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP) 817 Mac Ln. Mt. Shasta, CA. 96067		129. DATE M/M/DD/CCYY 11-19-2012		130. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER MIKE MALLORY SISKIYOU COUNTY ASSESSOR-RECORDER	

BK: 1112
 PG: 7848
 11/30/2012 11:10 AM
 08 13639 Page 3 of 4

CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF SISKIYOU

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Siskiyou County Assessor-Recorder.

DATE ISSUED **11-19-2012**

By: Mike Mallory



000048002
Mike Mallory
MIKE MALLORY
SISKIYOU COUNTY ASSESSOR-RECORDER

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the Assessor-Recorder.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



EXHIBIT "A"**(33)**

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/20th interest in and to Lot 33 as shown on Tahoe Village Unit No. 3 - 13th Amended Map, recorded December 31, 1991, as Document No. 268097, re-recorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 121 through 140 (inclusive) as shown on that certain Condominium Plan recorded August 20, 1982, as Document No. 70305; and (B) Unit No. 131 as shown and defined on said Condominium Plan; together with those easements appurtenant thereto and such easements 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 III recorded February 21, 1984, as Document No. 097150, as amended by document recorded October 15, 1990, as Document No. 236691, and as described in the Recitation of Easements Affecting the Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest in Lots 31, 32 or 33 only, for one week each year in the Swing "Season" as defined in and in accordance with said Declarations.

A Portion of APN: 1319-30-723-012