



Recording requested by and return to:
Susie Bell
Timeshare Closings for Less, Inc.
1540 International Parkway, Suite 2000
Lake Mary, FL 32746

Tax Parcel: A Portion of: 1319-30-519-007

AFFIDAVIT DEATH OF TRUSTEE

State of Nevada }
County of Douglas }

Robert C. Hartman ("Declarant"), Surviving Trustee, is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

1. **Harriett A. Hartman** ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on 11/10/2009 at Martinez, CA.
2. Decedent is the same person named as the trustee in that certain Declaration of Trust dated June 12, 1990, executed by **Robert C. Hartman and Harriett A. Hartman** as trustor(s) (the "Trust").
3. Decedent is the same person who was erroneously named Harriet A. Hartman as a grantor in that certain Quitclaim Deed dated June 12, 1990 which was recorded July 18, 1990 in Book 790, Page 2366 as Document No. 230393 of Official Records of Douglas County, Nevada.
4. Decedent as a trustee is the same person who was named as a grantee in that certain Quitclaim Deed dated June 12, 1990 which was recorded July 18, 1990 in Book 790, Page 2366 as Document No. 230393 of Official Records of Douglas County, Nevada.
5. Declarant is the surviving trustee of said trust upon the death of **Harriett A. Hartman**. The Trust was in effect at the date of the death of the Decedent and has not been revoked. Declarant has consented to act as trustee under the Trust.

Robert C. Hartman, surviving trustee is filing this Affidavit with the Douglas County Recorder to establish the interest of **Robert C. Hartman** as surviving trustee pursuant to the aforesaid trust. The trust estate includes an interest in real property located in Douglas County, State of Nevada, which is attached hereto as Exhibit "A" and incorporated herein by this reference.



STATE OF California

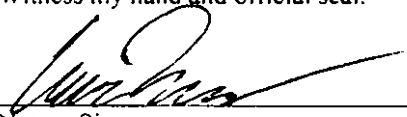
COUNTY OF Contra Costa

On June 6th, 2013 before me Conor Murphy, a notary public in and for said state, personally appeared **Robert C. Hartman**, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same in his authorized capacity and that by his signature on the instrument, the person, or entity upon behalf of which the person 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.

(Seal Below)

Witness my hand and official seal.


Notary Signature

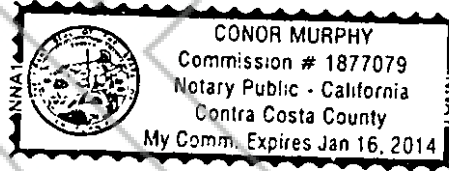




Exhibit "A"

Parcel One: 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 31 as shown on Tahoe Village Unit No. 3, Fifth-Amended Map, recorded October 29, 1981, as Document Number 61612 as corrected by Certificate of Amendment recorded November 23, 1981 as Document Number 62661, all of Official Records Douglas County, State of Nevada, excepting therefrom Units 81 to 100 Amended Map and as corrected by Certificate of Amendment. (b) Unit Number 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 Number 3, recorded January 22, 1973, as Document Number 63808, 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 Number 63681, in Book 173 at Page 229 of Official Records and in modification thereof recorded September 28, 1973 as Document Number 69063 in Book 973 Page 812 of Official Records and recorded July 2, 1976 as Document Number 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 Number 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 Number 63026, being over a portion of Parcel 26-A (described in Document Number 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 Number 3, recorded October 29, 1981, as Document Number 61612, and amended by Certificate of Amendment recorded November 23, 1981 as Document Number 626651, 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 **WINTER** "use season", as said quoted terms are defined in the Declaration of Restrictions, recorded September 17, 1982 as Document Number 71000 of said Official Records.

COUNTY of CONTRA COSTA

MARTINEZ, CALIFORNIA



BK 613
PG-5253

825692 Page: 4 of 4 06/20/2013

CERTIFICATE OF DEATH

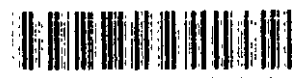
3200907005869

STATE FILE NUMBER		USL BLACK INK ONLY / NO ERASURES, WHITOUT OR ALTERATIONS		LOCAL REGISTRATION NUMBER	
1 NAME OF DECEDENT - FIRST (Given) HARRIETT		2 MIDDLE ANN		3 LAST (If given) HARTMAN	
4A AKA - ALSO KNOWN AS - (Include full AKA (First, Middle, Last))					
9 BIRTH STATE (People in Country) OH		10 SOCIAL SECURITY NUMBER 2612		11 EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
12 EDUCATION - (High School Degree (See instructions on back)) HS GRADUATE		13 WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, see explanation on back) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		14 DECEDENT'S RACE - (Up to 3 races may be listed (see worksheet on back)) CAUCASIAN	
17 USUAL OCCUPATION - (Type of work for most of life. DO NOT USE RETIREE)		18 KIND OF BUSINESS OR INDUSTRY (e.g. grocery store, food concern, etc., employment agency, etc.)		19 YEARS IN OCCUPATION 35	
20 DECEDENT'S RESIDENCE (Street and number or location) 5595 JASPER COURT					
21 CITY CONCORD		22 COUNTY PROVINCE CONTRA COSTA		23 ZIP CODE 94521	
24 YEARS IN COUNTY 45		25 STATE/FOREIGN COUNTRY CA			
26 INFORMANT'S NAME RELATIONSHIP ROBERT C. HARTMAN, HUSBAND			27 INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP) 5595 JASPER COURT, CONCORD, CA 94521		
28 NAME OF SURVIVING SPOUSE - FIRST ROBERT		29 MIDDLE CARL		30 LAST (Modern Name) HARTMAN	
31 NAME OF FATHER - FIRST THEODORE		32 MIDDLE R.		33 LAST RICKEY	
34 BIRTH STATE OH		35 NAME OF MOTHER - FIRST RUTH		36 LAST (Modern Name) PITTENGER	
37 BIRTH STATE OH		38 DISPOSITION DATE (mm/dd/yyyy) 11/13/2009			
39 PLACE OF FINAL DISPOSITION SCATTER AT SEA OFF THE COAST OF SAN FRANCISCO COUNTY, CA					
41 TYPE OF DISPOSITIONS CR/SEA		42 SIGNATURE OF EMBALMER NOT EMBALMED		43 LICENSE NUMBER	
44 NAME OF FUNERAL ESTABLISHMENT QUIMET BROS CONCORD FUNERAL CHP		45 LICENSE NUMBER FD1006		46 SIGNATURE OF LOCAL REGISTRAR WENDEL BRUNNER, MD	
47 DATE (mm/dd/yyyy) 11/13/2009		48 SIGNATURE OF LOCAL REGISTRAR			
101 PLACE OF DEATH USUAL RESIDENCE					
102 COUNTY CONTRA COSTA		103 FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location) 5595 JASPER COURT		104 CITY CONCORD	
107 CAUSE OF DEATH Enter the chain of events - diseases, injuries, or complications - that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.					
IMMEDIATE CAUSE (Final disease or condition resulting in death) (A) CHRONIC OBSTRUCTIVE PULMONARY DISEASE		Time Interval Between Onset and Death (AT) YEARS 0		108 DEATH REPORTED TO CORONER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Securability, list conditions (any listed) to be reviewed by the coroner. UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST		109 B. OPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		110 AUTOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 NO		111 USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO		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. Decedent Affected Since (A) mm/dd/yyyy (B) mm/dd/yyyy 07/--/1997 05/14/2009		116 SIGNATURE AND TITLE OF CERTIFIER SARAH B RAHMAN M.D.		117 LICENSE NUMBER A60027	
115 I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		118 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE ELISE HUGHES WATKINS M.D. 106 LA CASA VIA SUITE#100, WALNUT CREEK, CA 94583		119 DATE (mm/dd/yyyy) 11/13/2009	
123 PLACE OF INJURY (e.g. home, construction site, wooded area, etc.)		120 INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121 INJURY DATE (mm/dd/yyyy)	
124 DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)		122 HOUR (24 Hours)			
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	
STATE REGISTRAR		A B C D E		FAX AUTH #	
CENSUS TRACY					

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA }
COUNTY OF CONTRA COSTA } SS

DATE ISSUED **NOV 13 2009**



* 000811914 *

This is a true and exact reproduction of the document officially registered and placed on file in the office of the CONTRA COSTA COUNTY DEPARTMENT OF HEALTH SERVICES.

Wendel Brunner MD
CONTRA COSTA COUNTY HEALTH OFFICER

This copy not valid unless prepared on engraved border displaying seal and signature of Contra Costa County Health Officer.

