

Doc Number: **0830644**

09/16/2013 02:57 PM

OFFICIAL RECORDS

Requested By:

KINGSBURY CROSSING

DOUGLAS COUNTY RECORDERS  
Karen Ellison - Recorder

Page: 1 of 3

Fee: \$ 16.00

Bk: 0913 Pg: 3197



Deputy sd

RECORDING REQUESTED BY:

CHRISTINE A PAONESSA

WHEN RECORDED MAIL TO:

CHRISTINE A PAONESSA  
3764 BLACK FEATHER TRAIL  
CASTLE ROCK CO 80104

---

**AFFIDAVIT OF DEATH OF JOINT TENANT**

Assessor Parcel Number: 1318-26-01-006

State of Colorado ss

County of Douglas

I Christine A Paonessa, affiant of legal age, being first duly sworn, deposes and says: That John A Paonessa, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as named as one of the parties in that certain Grant Deed recorded August 28, 1991 as Document #1991-259005 and executed to John A Paonessa and Christine A Paonessa in the official records of Douglas County, Nevada, covering the following described property situated in the said County, state of California:

The land referred to herein is situated in the State of Nevada County of Douglas, City of Stateline and is described as follows:

AN UNDIVIDED ONE THREE THOUSAND TWO HUNDRED and THIRTEENTH INTEREST 1/3213) as tenant in common of that certain lot, piece or parcel of land situate in the County of Douglas, State of Nevada, being a portion of the North 1/2 of the Northwest 1/4 of Section 26, Township 13 North, Range 18 East, M.D.B.&M. described as follows:

Parcel 3, as shown on that amended Parcel Map for John E. Michelsen and Walter Cox recorded February 3, 1981, in Book 281 of Official Records, at page 172, Douglas County, Nevada, as document No. 53178, said map being an amended map of Parcels 3 and 4 as shown on that certain map for John E. Michelsen and Walter Cox, recorded February 10, 1978, in Book 278 of Official Records, at page 591, Douglas County, Nevada, as Document No. 17578.

Excepting from the real property the exclusive right to use and occupy all of the Dwelling Units and Units as defined in the "Declaration of Timeshare Use" and subsequent amendments thereto as hereinafter referred to.

Also excepting from the real property and reserving to grantor, its successors and assigns, all those certain easements referred to in paragraphs 2.5, 2.6 and 2.7 of said Declaration of Timeshare Use and amendments thereto together with the right to grant said easements to others.

Together with the exclusive right to use and occupy a "Unit" as defined in the Declaration of Timeshare Use recorded February 16, 1983, in Book 283 at Page 1341 as Document No. 76233 of Official Records of the County of Douglas, State of Nevada and amendment to Declaration of Timeshare Use recorded April 20, 1983 in Book 483 at Page 1021, Official Records of Douglas County, Nevada as Document No.

78917, and second amendment to Declaration of Timeshare Use recorded July 20, 1983 in Book 783 of Official Records at Page 1688, Douglas County, Nevada as Document No 84425 and third amendment to Declaration of Timeshare Use recorded October 14, 1983 in Book 1083 at Page 2572, Official Records of Douglas County, Nevada, as Document No. 89535, ("Declaration"), during a "Use Period", within the HIGH season within the "Owner's Use Year", as defined in the Declaration, together with a nonexclusive right to use the common areas as defined in the Declaration.

Subject to all covenants, conditions, restrictions, limitations, easements, rights-of-way of record.

These statements are true and correct based upon the personal knowledge of affiant.

Sworn to and executed this 3<sup>rd</sup> day of September 2013

Christine A Paonessa  
CHRISTINE A PAONESSA  
3764 BLACK FEATHER TRAIL  
CASTLE ROCK CO 80104

Subscribed and Sworn to before me on this 3<sup>rd</sup> day of September, 2013 by

Christine Paonessa personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

[Signature]  
Signature

Notary Public Commissioned for said County and State

HANNAH MOORE  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20124054473  
MY COMMISSION EXPIRES 8/20/2016

CERTIFICATION OF VITAL RECORD

STATE OF COLORADO  
 COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT  
 HOLD TO LIGHT TO VIEW WATERMARK



BK 0913  
 PG 3199  
 9/16/2013

\*AMENDED NOV. 6, 2001  
 #9a-c & 33f per mort.rec.gwj

STATE OF COLORADO  
 CERTIFICATE OF DEATH

STATE FILE NUMBER  
**2001018045**

1. DECEDENT'S NAME (Print Name, Last, First, Middle, Initial)		2. SEX	3. DATE BORN (Month, Day, Year)
John Anthony Paonessa		Male	August 12, 2001
4. SOCIAL SECURITY NUMBER	5. AGE (Years, Months, Days)	6. DATE OF BIRTH (Month, Day, Year)	7. PLACE OF BIRTH (City and State or Foreign Country)
2847	60	August 15, 1940	Utica, New York
8. WAS DECEDENT EVER IN U.S. ARMED FORCES?	9. PLACE OF DEATH (Check only one)	10. FACILITY NAME (if not insurance, give street and number)	
No	HOSPITAL <input type="checkbox"/> Inpatient <input type="checkbox"/> Outpatient <input type="checkbox"/> DON <input type="checkbox"/> OTHER <input type="checkbox"/> Nursing Home <input type="checkbox"/> Residence <input type="checkbox"/> Other (Specify) *Highway	US Highway 50	
11. DECEDENT'S USUAL OCCUPATION (Give brief or most active during most of working life. Do not use retired)		12. MARRIAGE STATUS - Married, Never Married, Widowed, Divorced, Separated	13. SPOUSE (If wife, give maiden name)
Manager/Sales		Married	Christine Wajda
14. RESIDENCE - STATE	15. CITY, TOWN OR LOCATION OF DEATH	16. STREET AND NUMBER	17. COUNTY OF DEATH
Colorado	Douglas	Castle Rock	San Juan
18. INSIDE CITY LIMITS? <input type="checkbox"/> No <input type="checkbox"/> Yes	19. ZIP CODE	20. WAS DECEDENT OF HIS PARENTS' BIRTHPLACE? (Specify No, Yes, or U.S. born, foreign born, etc.)	21. DECEDENT'S EDUCATION (Specify only highest through 7th College 12 through 16 or 17+)
80104		No	17+
22. FATHER'S NAME (Print Middle, Last)		23. MOTHER'S NAME (Print Middle, Last (Maecor Name))	24. INFORMANT'S NAME and relationship to decedent
Anthony Paonessa		Rose Demanda	Christine Paonessa/Spouse
25. METHOD OF DISPOSITION		26. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)	27. LOCATION (City or Town, State)
<input type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Reinterment State <input type="checkbox"/> Donation <input type="checkbox"/> Other (Specify)		Valley Lawn Crematory	Montrose, Colorado
28. SIGNATURE OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH		29. NAME AND ADDRESS OF FACILITY	
<i>Rebecca Brunster</i>		Montrose Valley Funeral Home 505 South 2nd St. Montrose, Co. ZIP 81401	
30. REGISTERED SIGNATURE		31. DATE FILED (Month, Day, Year)	
<i>Beverly E. Rich</i>		8-23-01	
32. TIME OF DEATH (Specify if pronounced dead)		33. WAS CORNER NOTIFIED? (Yes or No)	
UNKNOWN		Yes	
34. TO BE COMPLETED ONLY BY CERTIFYING PHYSICIAN		35. TO BE COMPLETED BY CORONER	
26. To the best of my knowledge, death occurred at the time, date and place, and due to the cause and manner as stated.		27. On the basis of examination and/or medical history, my opinion death occurred at the time, date and place, and due to the cause and manner as stated.	
28. DATE SIGNED (Month, Day, Year)		29. DATE SIGNED (Month, Day, Year)	
		August 19, 2001	
30. NAME, TITLE AND MAILING ADDRESS OF CERTIFIER/CORONER (Type/Print)			
John Jacobs, Coroner, P.O. Box 239 Silverton, Colorado (San Juan County) ZIP 81433			
31. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type/Print)			
32. MANNER OF DEATH		33a. DATE OF INJURY (Month, Day, Year)	33b. TYPE OF INJURY
<input type="checkbox"/> Natural <input type="checkbox"/> Pending Investigation <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Undetermined Manner		Unknown	Unknown
33c. PLACE OF INJURY - At home, farm, street, factory, office, building, etc. (Specify)		33d. DESCRIBE HOW INJURY OCCURRED	
Street		motor vehicle accident	
34. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)). Do not enter mode of dying (e.g. Cardiac or Respiratory Arrest) alone.		35. LOCATION (Street and Number or Rural Route (Number, City, County, State))	
(a) Multiple Traumatic Injuries		*BEEVER CANYON & GILBY, San Juan, CO N 37° 53.144' W 107° 43.199'	
(b) Motor Vehicle Accident			
(c)			
36. PART OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause in Part I (e.g., alcohol abuse, obesity, smoker).		37. AUTOPSY (Yes or No)	
		Yes	
38. PARTIAL OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause in Part I (e.g., alcohol abuse, obesity, smoker).		39. IF YES were findings considered in determining cause of death?	
		Yes	

DATE ISSUED

JUL 11 2013

*Ronald S. Hyman*  
 RONALD S. HYMAN  
 STATE REGISTRAR

THIS IS A TRUE CERTIFICATION OF NAME AND FACTS AS RECORDED IN THIS OFFICE. Do not accept unless prepared on security paper with engraved border displaying the Colorado state seal and signature of the Registrar. PENALTY BY LAW, Section 25-2-118, Colorado Revised Statutes, 1982, if a person alters, uses, attempts to use or furnishes to another for deceptive use any vital statistics record. NOT VALID IF PHOTOCOPIED.



006184952

REV 01/07