

18-

Doc Number: **0832226**

10/18/2013 09:55 AM

OFFICIAL RECORDS

Requested By
ARLEEN BADOR

DOUGLAS COUNTY RECORDERS
Karen Ellison - Recorder

Page: 1 of 5 Fee: \$ 18.00

Bk: 1013 Pg: 3655



Deputy sd

Assessor's Parcel Number: 1319-30-645-003-PTN

Recording Requested By: Arleen Bador

Name: Arleen Bador

Address: 119 Huron Avenue

City/State/Zip Clifton, NJ 07013

Real Property Transfer Tax: \$ _____

Affidavit of Death of Joint Tenant

(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies)

This cover page must be typed or legibly hand printed.



Arleen Bador Only

SWORN TO AND SUBSCRIBED before me this the 20th day of September,
2013.

Jillian Hamilton
NOTARY PUBLIC

My Commission Expires: JILLIAN CHRISTINE HAMILTON
Notary Public of New Jersey
Commission Expires October 23, 2015

COPY

EXHIBIT 'A' (42)

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/48ths interest in and to Lot 42 as shown on Tahoe Village Unit No. 3-14th Amended Map, recorded April 1, 1994, as Document No. 333985, Official Records of Douglas County, State of Nevada, excepting therefrom Units 255 through 302 (inclusive) as shown on said map; and (B) Unit No. 255 as shown and defined on said map; 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 Seven recorded April 26, 1995, as Document No. 360927, as amended by Amended and Restated Declaration of Annexation of The Ridge Tahoe Phase Seven, recorded May 4, 1995, as Document No. 361461, and as described in the First Amended Recitation of Easements Affecting The Ridge Tahoe recorded June 9, 1995 as Document No. 363815, and subject to said Declarations; with the exclusive right to use said interest, in Lot 42 only, for one week each year in accordance with said Declarations.

Together with a 13-foot wide easement located within a portion of Section 30, Township 13 North, Range 19 East, MDB&M, Douglas County, Nevada, being more particularly described as follows:

BEGINNING at the Northwest corner of this easement said point bears S. 43°19'06" E., 472.67 feet from Control Point "C" as shown on the Tahoe Village Unit No. 3, 13th Amended Map, Document No. 269053 of the Douglas County Recorder's Office;

- thence S. 52°20'29" E., 24.92 feet to a point on the Northerly line of Lot 36 as shown on said 13th Amended Map;
- thence S. 14°00'00" W., along said Northerly line, 14.19 feet;
- thence N. 52°20'29" W., 30.59 feet;
- thence N. 37°33'12" E., 13.00 feet to the POINT OF BEGINNING.

A portion of APN: 42-010-40

REQUESTED BY
STEWART TITLE of DOUGLAS COUNTY
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'95 JUN 19 AIO 26

LINDA SLATER
RECORDER

\$ 8.00 PAID Ko DEPUTY

364280
BK 0695 PG 2697

STATE OF NEW JERSEY

B0006253592

NEW JERSEY DEPARTMENT OF HEALTH

STATE FILE NUMBER

CERTIFICATE OF DEATH

20130015362

1a. Legal Name of Decedent (First, Middle, Last, Suffix) Victor F Bador				LIMB ONLY <input type="checkbox"/>	
1b. Also Known As (AKA), If Any (First, Middle, Last, Suffix)					
2. Sex Male	3. Social Security Number 4082	4a. Age 71 Years	5. Date of Birth (Mo/Day/Yr) 07/02/1941		
6. Birthplace (City & State/Foreign Country) Woodbury, Vermont					
7a. Residence-State New Jersey		7b. County Passaic		7c. Municipality/City Clifton City	
7d. Street and Number 119 Huron Avenue		7e. Apt No.	7f. Zip Code 07013	7g. Inside City Limits? Yes	
8a. Ever in US Armed Forces? Yes		8b. If Yes, Name of War:		8c. War Service Dates (From/To):	
9. Domestic Status at Time of Death Married			10. Name of Surviving Spouse/Partner (Name given at birth or on birth certificate) Arleen Brown		
11. Father's Name (First, Middle, Last) William Bador					
12. Mother's Name Prior to First Marriage (First, Middle, Last) Madeline Bailey					
13a. Name of Informant Arleen Bador				13b. Relationship to Decedent Spouse	
13c. Mailing Address (Street and Number, City, State, Zip Code) 119 Huron Avenue, Clifton, NJ 07013					
14. Method of Disposition Cremation		15. Place of Disposition (name of cemetery, crematory, other) Evergreen Crematory		16. Location- City & State/Foreign Country Hillside Township, New Jersey	
17. Name and Complete Address of Funeral Facility Izabela Funeral Service, LLC, 425 Ridge Road, Lyndhurst, NJ 07071					
18. Electronic Signature of Funeral Director <i>Izabela Bacza</i>				19. NJ License Number 23JP00492400	
20. Decedent Education High school graduate or GED completed		21. Decedent of Hispanic Origin? Not Spanish / Hispanic / Latino		22. Decedent Race White	
23. Occupation of Decedent (Type of work done most of life, even if retired)		24. Kind of Business/Industry			
25. Name and Address of Last Employer					
26. Date Pronounced Dead (Mo/Day/Yr) 03/11/2013		28. Name of Person Pronouncing Death			
27. Time Pronounced Dead (24-hr) 1730		29. License Number		30. Date Signed (Mo/Day/Yr)	
31. Date of Death (Mo/Day/Yr) 03/11/2013		32. Time of Death (24-hr) Approx-1730		33. Was Medical Examiner Contacted? Yes	
34. Place of Death Decedent's Home					
35a. Facility Name (if not institution, give street and number) 119 Huron Ave.					
35b. Municipality Clifton City		35c. County Passaic			
CAUSE OF DEATH: 36a. PART I - IMMEDIATE CAUSE - final disease or condition resulting in death. Subsequently list conditions, if any, leading to the cause listed on Line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.					
Immediate Cause a. Gunshot wound of head				Interval Between Onset and Death Immediate	
Due to (or as a consequence of): b.					
Due to (or as a consequence of): c.					
Due to (or as a consequence of): d.					
36b. PART II - Enter other significant conditions contributing to death but not resulting in underlying cause given in PART I				37. Was an Autopsy Performed? Yes	
38. Were Autopsy Findings Available to Complete Cause of Death? Yes					
39. Date of Injury (Mo/Day/Yr) 03/11/2013		40. Time of Injury (24-hr) Unknown		41. Place of Injury (e.g. home, construction site, restaurant) Home	
42. Injury at work? No					
43a. Location of Injury (Number and Street, Zip Code) 119 Huron Ave. 07013		43b. Municipality Clifton City		43c. County Passaic	
43d. State NJ					
44. Describe How Injury Occurred Shot self with a rifle				45. If Transportation Injury: Not Applicable	
46. Manner of Death Suicide		47. Did Decedent Have Diabetes? Yes		48. Did Tobacco Use Contribute to Death? No	
49. If Female, Pregnancy State Not applicable					
50. Certifier Type Medical Examiner		51. Name, Address, and Zip Code of Certifier Di Wang, M.D. 325 Norfolk St, Newark, NJ 07103			
52. Electronic Signature of Certifier <i>Di Wang</i>		53. License Number 25MA08627800		54. Date Certified (Mo/Day/Yr) 03/14/2013	
55. Electronic Signature of Local Registrar <i>Sarah Anderson</i>		56. District No. V0246		57. Date Received 03/14/2013	
Case ID Number 1581948					

THIS DOCUMENT CONTAINS A UNIQUE STATE OF NJ WATERMARK HOLD AT LIGHT TO VERIFY

THIS DOCUMENT CONTAINS A UNIQUE STATE OF NJ WATERMARK HOLD AT LIGHT TO VERIFY

Record Contains Amendment

BK 1013 PG 3658 10/18/2013
0832226 Page 5 of 5

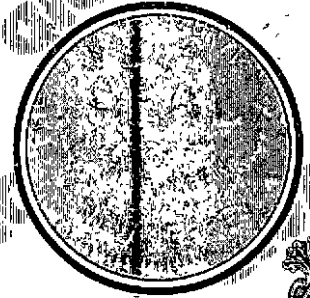
DATE ISSUED: **March 15, 2013**

ISSUED BY:
Lyndhurst Township
Gloria Cucco, Local Registrar

This is to certify that the above is correctly copied from a record on file in my office.

Certified copy not valid unless the raised Great Seal of the State of New Jersey or the seal of the issuing municipality or county, is affixed hereon.

Vincent T. Arrisi
Vincent T. Arrisi
State Registrar
Office of Vital Statistics and Registry



REG-42B
JAN 13

THIS DOCUMENT HAS MULTIPLE SECURITY FEATURES TO DETER FRAUD; VOID IF ALTERED