

18-

APN# 42-210-09

Recording Requested by/Mail to:

Name: Falco & McGrath

Address: 1940A Tice Valley Blvd.

City/State/Zip: Walnut Creek, CA 94595



00021501201508689750050054

KAREN ELLISON, RECORDER

Mail Tax Statements to:

Name: Dolores F. Leonard

Address: 2183 Granite Drive

City/State/Zip: Alamo, CA 94507

Affidavit of Death of Joint Tenant

Title of Document (required)

----- (Only use if applicable) -----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)

Dolores F. Leonard

Signature

Dolores F. Leonard

Printed Name

This document is being (re-)recorded to correct document # \_\_\_\_\_, and is correcting

\_\_\_\_\_  
\_\_\_\_\_

**AFFIDAVIT OF DEATH OF JOINT TENANT**

STATE OF CALIFORNIA }

SS

COUNTY OF CONTRA COSTA }

BEFORE ME, the undersigned Notary Public, personally appeared, DOLores F. LEONARD, "Affiant", who upon being duly sworn, deposes and states upon his or her oath or affirmation, the following:

1. My name is DOLores F. LEONARD and I reside at 2183 GRANITE DR., ALAMO, CA, 94507
2. I owned real property as a joint tenant with JOHN E. LEONARD, such real property located in DOUGLAS County, State of NEVADA, described as follows:  
  
See Attached Legal Description, EXHIBIT "A".  
Title deed is recorded in Book 886, Page 1046 in the office of the register of deeds in the county and state aforesaid.
3. JOHN E. LEONARD, my joint tenant identified above, departed this life on the 27<sup>th</sup> day of APRIL, 1999. A copy of the death certificate of JOHN E. LEONARD is attached.
4. On the date of the death of JOHN E. LEONARD, the above described real estate was owned by DOLores F. LEONARD and JOHN E. LEONARD, as joint tenants and the joint tenancy had not been severed by any act of the parties or by operation of law.
5. Affiant is the sole surviving joint tenant of the property described above.

Dated this the 27 day of Aug., 20 15.

Dolores F. Leonard  
Affiant

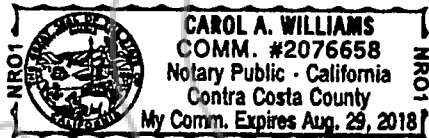
JURAT

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of this document.

STATE OF CALIFORNIA

COUNTY OF CONTRA COSTA

Subscribed and sworn to (or affirmed) before me on this 27th day of August in the year 2015 by DOLORES F. LEONARD, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.



*Carol A. Williams*

Notary Public

EXHIBIT "A"

A Timeshare Estate comprised of:

Parcel One:

An undivided 1/51st interest in and to that certain condominium described as follows:

- (a) An undivided 1/20th interest, as tenants-in-common, in and to Lot 31 of Tahoe Village Unit No. 3, Fifth-Amended Map, recorded October 29, 1981, as Document No. 61612 as corrected by Certificate of Amendment recorded November 23, 1981, as Document No. 62661, all of Official Records Douglas County, State of Nevada. Except therefrom units 81 to 100 Amended Map and as corrected by said Certificate of Amendment.
- (b) Unit No. 099 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 No. 3, recorded January 22, 1973, as Document No. 63805, 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 No. 63681, in Book 173 Page 229 of Official Records and in modification thereof recorded September 28, 1973, as Document No. 69063 in Book 973 Page 812 of Official Records and recorded July 2, 1976, as Document No. 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 No. 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 No. 63026, being over a portion of Parcel 26-A (described in Document No. 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 No. 3, recorded October 29, 1981, as Document No. 61612, and amended by Certificate of Amendment recorded November 23, 1981, as Document No. 62661, 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     SUMMER     "use season", as said quoted terms are defined in the Declaration of Restrictions, recorded September 17, 1982 as Document No. 71000 of said Official Records.

The above described exclusive and non-exclusive rights may be applied to any available unit in the project, during said use week within said season.

SPACE BELOW FOR RECORDER'S USE

REQUESTED BY  
**DOUGLAS COUNTY TITLE**  
IN OFFICIAL RECORDS OF  
DOUGLAS COUNTY, NEVADA

'86 AUG 11 P12:44

SUZANNE BEAUBREAU  
RECORDER

56<sup>00</sup> PAID *[Signature]* DEPUTY

**138863**  
BOOK **886** PAGE **1046**

**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY of CONTRA COSTA**  
MARTINEZ, CALIFORNIA

**CERTIFICATE OF DEATH**

3199907002243

STATE FILE NUMBER		USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 7/97)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) <b>JOHN</b>		2. MIDDLE <b>EDWARD</b>		3. LAST (FAMILY) <b>LEONARD</b>			
4. DATE OF BIRTH M/M/DD/CCYY <b>09/25/1928</b>		5. AGE YRS. <b>70</b>		6. SEX <b>M</b>		7. DATE OF DEATH M/M/DD/CCYY <b>04/27/1999</b>	
8. HOUR <b>1050</b>		9. STATE OF BIRTH <b>CA</b>		10. SOCIAL SECURITY NO. <b>3303</b>		11. MILITARY SERVICE <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
12. MARITAL STATUS <b>Married</b>		13. EDUCATION—YEARS COMPLETED <b>12</b>					
14. RACE <b>Caucasian</b>		15. HISPANIC—SPECIFY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		16. USUAL EMPLOYER <b>San Francisco Elevator Co.</b>			
17. OCCUPATION <b>Elevator Contractor</b>		18. KIND OF BUSINESS <b>Elevator Construction</b>		19. YEARS IN OCCUPATION <b>42</b>			
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) <b>2183 Granite Drive</b>							
21. CITY <b>Alamo</b>		22. COUNTY <b>Contra Costa</b>		23. ZIP CODE <b>94507</b>		24. YRS IN COUNTY <b>30</b>	
25. STATE OR FOREIGN COUNTRY <b>CA</b>		26. NAME, RELATIONSHIP <b>Dolores Leonard (wife)</b>					
27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) <b>2183 Granite Drive, Alamo, CA 94507</b>		28. NAME OF SURVIVING SPOUSE—FIRST <b>Dolores</b>		29. MIDDLE <b>Francis</b>		30. LAST (MAIDEN NAME) <b>Mesina</b>	
31. NAME OF FATHER—FIRST <b>James</b>		32. MIDDLE <b>Edward</b>		33. LAST <b>Leonard</b>		34. BIRTH STATE <b>unknown</b>	
35. NAME OF MOTHER—FIRST <b>Loretta</b>		36. MIDDLE <b>V</b>		37. LAST (MAIDEN) <b>O'Riley</b>		38. BIRTH STATE <b>unknown</b>	
39. DATE M/M/DD/CCYY <b>05/03/1999</b>		40. PLACE OF FINAL DISPOSITION <b>Wife:Dolores Leonard Res: 2183 Granite Drive, Alamo, CA 94507</b>					
41. TYPE OF DISPOSITION(S) <b>CR/RES</b>		42. SIGNATURE OF EMBALMER <i>Rose W. Campbell</i>				43. LICENSE NO. <b>4502</b>	
44. NAME OF FUNERAL DIRECTOR <b>HULL'S WALNUT CREEK CHAPEL</b>		45. LICENSE NO. <b>FD 250</b>		46. SIGNATURE OF LOCAL REGISTRAR <i>Michael Brunson (M)</i>		47. DATE M/M/DD/CCYY <b>04/30/1999</b>	
101. PLACE OF DEATH <b>JOHN MUIR MEDICAL CENTER</b>		102. IF HOSPITAL, SPECIFY ONE: <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. FACILITY OTHER THAN HOSPITAL: <input type="checkbox"/> CONV. <input type="checkbox"/> MOSP. <input type="checkbox"/> RES. <input type="checkbox"/> CARE <input type="checkbox"/> OTHER		104. COUNTY <b>CONTRA COSTA</b>	
105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) <b>1601 YGNACIO VALLEY ROAD</b>		106. CITY <b>WALNUT CREEK</b>		107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)		108. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER	
IMMEDIATE CAUSE (A) <b>CARDIOPULMONARY ARREST</b>		TIME INTERVAL BETWEEN ONSET AND DEATH <b>10 MIN</b>		109. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (B) <b>PULMONARY EMBOLISM</b>		TIME INTERVAL BETWEEN ONSET AND DEATH <b>3-DAYS</b>		110. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (C)		TIME INTERVAL BETWEEN ONSET AND DEATH		111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO			
DUE TO (D)		TIME INTERVAL BETWEEN ONSET AND DEATH		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 <b>PROSTATE CANCER</b>			
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. <b>NO</b>							
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE M/M/DD/CCYY <b>07/26/1995</b>		115. SIGNATURE AND TITLE OF CERTIFIER <i>Mark Nathan, MD</i>		116. LICENSE NO. <b>G35395</b>		117. DATE M/M/DD/CCYY <b>04/28/1999</b>	
DECEDENT LAST SEEN ALIVE M/M/DD/CCYY <b>04/27/1999</b>		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP <b>MARK NATHAN, MD 106 LA CASA VIA, WALNUT CREEK, CA 94598</b>					
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		120. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO		121. INJURY DATE M/M/DD/CCYY		122. HOUR	
123. PLACE OF INJURY		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)		126. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE MM/DD/CCYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	
STATE REGISTRAR		A		B		C	
		D		E		F	
		G		H		FAX AUTH. #1947 meg	
						CENSUS TRACT <b>346109</b>	

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA  
COUNTY OF CONTRA COSTA

Joseph E. Canciamilla\* 000773516\*

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

ATTEST:

*Joseph E. Canciamilla*  
MAY 28 2013

*Stephen J. Weir*  
CONTRA COSTA COUNTY RECORDER

DATE ISSUED:

This copy not valid unless prepared on engraved border displaying date and signature of Deputy Recorder.