

STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES
DIVISION OF HEALTH — VITAL STATISTICS

CERTIFICATE OF DEATH

2012002682


STATE FILE NUMBER

1a. DECEASED - NAME (FIRST, MIDDLE, LAST SUFFIX) Elizabeth Delores DICUS		2. DATE OF DEATH (Mo/Day/Year) February 16, 2012		3a. COUNTY OF DEATH Clark	
3b. CITY, TOWN OR LOCATION OF DEATH Henderson		3c. HOSPITAL OR OTHER INSTITUTION - Name (if not either, give street and number) St Rose Dominican Hospital, Siena Campus		3e. If Hosp. or Inst. indicate DOA, OP, Emer, Rm (Inpatient) (Specify) Inpatient	
4. SEX Female		5. RACE White		6. Hispanic Origin? Specify No - Non-Hispanic	
7a. AGE - Last birthday (Years) 75		7b. UNDER 1 YEAR MCS DAYS		7c. UNDER 1 DAY HOURS MINS	
8. DATE OF BIRTH (Mo/Day/Year) March 26, 1936		9a. STATE OF BIRTH (If not U.S.A. name country) Massachusetts		9b. CITIZEN OF WHAT COUNTRY United States	
10. EDUCATION 12		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) Michael D DICUS	
13. SOCIAL SECURITY NUMBER ██████████-3182		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Real Estate Appraiser		14b. KIND OF BUSINESS OR INDUSTRY Banking	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Clark		15c. CITY, TOWN OR LOCATION Henderson	
15d. STREET AND NUMBER 832 Holly Lake Way		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes		Ever in US Armed Forces? No	
16. FATHER/PARENT - NAME (First Middle Last Suffix) William BOURGEOIS			17. MOTHER/PARENT - NAME (First Middle Last Suffix) Annette ENGLISH		
18a. INFORMANT - NAME (Type or Print) Michael D DICUS		18b. MAILING ADDRESS (Street or R.F.D. No. City or Town, State, Zip) 832 Holly Lake Way Henderson, Nevada 89002			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		19b. CEMETERY OR CREMATORY - NAME Southern Nevada Veterans Memorial Cemetery		19c. LOCATION City or Town State Boulder City Nevada 89005	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) BART BURTON SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE 50		20c. NAME AND ADDRESS OF FACILITY Palm Mortuary-Henderson 800 S Boulder Hwy Henderson NV 89015	
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) BRIAN LEE MD SIGNATURE AUTHENTICATED			22a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) February 22, 2012		21c. HOUR OF DEATH 15:25		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c. HOUR OF DEATH		22d. PRONOUNCED DEAD (Mo/Day/Yr)	
21e. NAME OF ATTENDING PHYSICIAN (Type or Print)		22e. PRONOUNCED DEAD AT (Hour)		23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) BRIAN LEE MD 4409 S Pecos Rd Las Vegas, NV 89121	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) BRIAN LEE MD 4409 S Pecos Rd Las Vegas, NV 89121		23b. LICENSE NUMBER 12072		24a. REGISTRAR (Signature) SUSAN ZANNIS SIGNATURE AUTHENTICATED	
24a. REGISTRAR (Signature) SUSAN ZANNIS SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR February 23, 2012		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
PART I					
(a) Ovarian cancer Interval between onset and death					
DUE TO, OR AS A CONSEQUENCE OF Interval between onset and death					
(b) DUE TO, OR AS A CONSEQUENCE OF Interval between onset and death					
(c) DUE TO, OR AS A CONSEQUENCE OF Interval between onset and death					
(d) DUE TO, OR AS A CONSEQUENCE OF Interval between onset and death					
PART II OTHER SIGNIFICANT CONDITIONS Conditions contributing to death but not resulting in the underlying cause given in Part I				26. AUTOPSY (Specify Yes or No) No	
26a. ACCIDENT, SUICIDE, FROM UNCLE, OR BLENDING INVEST. (Specify)				27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No	
28a. DATE OF INJURY (Mo/Day/Yr)		28b. HOUR OF INJURY		28c. DESCRIBE HOW INJURY OCCURRED	
28d. INJURY AT WORK (Specify Yes or No)		28e. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		28f. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	

STATE REGISTRAR

"CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE DOCUMENT ON FILE WITH THE REGISTRAR OF VITAL STATISTICS, STATE OF NEVADA." This copy was issued by the Southern Nevada Health District from State certified documents as authorized by the State Board of Health pursuant to NRS 440.175.

NOT VALID WITHOUT THE RAISED SEAL OF THE SOUTHERN NEVADA HEALTH DISTRICT

Lawrence K. Sands, D.O., M.P.H.
Registrar of Vital Statistics
By: 
Date Issued: FEB 24 2012

TYPE OR PRINT IN PERMANENT BLACK INK

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

1640587

EXHIBIT "A"

(37)

An undivided 1/102nd interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/106th interest in and to Lot 37 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 039 through 080 (inclusive) and Units 141 through 204 (inclusive) as shown on that certain Condominium Plan recorded July 14, 1988, as Document No. 182057; and (B) Unit No. 073 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 Five recorded August 18, 1988, as Document No. 184461, as amended, 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 Lot 37 only, for one week every other year in the Odd -numbered years in the Prime "Season" as defined in and in accordance with said Declarations.

A Portion of APN: 1319-30-644-040