

*This document includes a certified death certificate as required by NRS 40.525(5) which contains a social security number as required by NRS 440.380(1)(a).*



ANDERSON, DORN & RADER, LTD.

**APN: 1320-04-001-024**  
**a portion of 1319-22-000-003**

**RECORDING REQUESTED BY:**

Bryce L. Rader, Esq.  
Anderson, Dorn & Rader, Ltd.  
500 Damonte Ranch Parkway, Suite 860  
Reno, Nevada 89521

**AFTER RECORDING MAIL TO:**

Anderson, Dorn & Rader, Ltd.  
500 Damonte Ranch Parkway, Suite 860  
Reno, Nevada 89521

**MAIL TAX STATEMENT TO:**

Donna Huber, Trustee  
2548 Clapham Lane  
Minden, Nevada 89423

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**AFFIDAVIT OF DEATH OF TRUSTEE**

We, DONNA Q. HUBER and PATRICIA STURGESS, Trustees of the HUBER LIVING TRUST, dated October 23, 1989, the undersigned, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

- (1) By instrument dated October 23, 1989, DOUGLAS S. HUBER and DONNA Q. HUBER executed the HUBER LIVING TRUST (the "Trust").
- (2) DOUGLAS S. HUBER deceased on July 11, 2016, at Reno, Nevada, a resident of Douglas County, Nevada. Attached hereto is a certified copy of the death certificate of said DOUGLAS S. HUBER.
- (3) Said trust appointed DONNA Q. HUBER to serve as sole Trustee upon the death of DOUGLAS S. HUBER. DONNA Q. HUBER reserved the right to amend or revoke the Trust Agreement in whole or in part and by amendment

dated August 17, 2016, DONNA Q. HUBER appointed herself and PATRICIA STURGESS as Co-Trustees.

- (4) Pursuant to the terms of the Trust, we have assumed the responsibilities of Co-Trustees.
- (5) The following described real property is part of the Trust estate: See Exhibit "A" attached.
- (6) We are authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as Trustees with respect to the Trust's interest in the described property.
- (7) No other person has a right to the interest of the Trust in the described property.
- (8) The described property shall be transferred to us as Co-Trustees.


Executed in the County of Washoe, State of Nevada, on August 17, 2016.

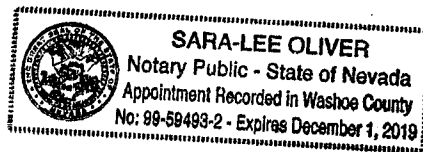
  
DONNA Q. HUBER, Trustee

  
PATRICIA STURGESS, Trustee

STATE OF NEVADA                    )  
  ) ss:  
COUNTY OF WASHOE            )

Signed and sworn to (or affirmed) before me on August 17, 2016, by DONNA Q. HUBER and PATRICIA STURGESS, Trustees.

  
Notary Public



## EXHIBIT "A"

### Legal Description:

Parcel 1 of that certain Parcel Map for Douglas and Donna Huber filed for Record April 18, 1990 in Book 490 of Official Records at Page 2485, Document No. 224168.

**APN: 1320-04-001-024**

**Property Address: 2548 Clapham Lane, Minden, Nevada**

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### Legal Description:

A timeshare estate comprised of an undivided interest as tenants in common in and to that certain real property and improvements, with Even Year Use, Week #17-018-17-82, as follows:

An undivided 1/2142<sup>nd</sup> interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

ADJUSTED PARCEL F: A parcel of land located within a portion of the West one-half of the Northeast one-quarter (W1/2 NE ¼) of Section 22, Township 13 North, Range 19 East, Mount Diablo Meridian, more particularly described as follows:

Commencing at the one-quarter corner common to Sections 15 and 22, T13N, R19E, M.D.M., a found 1985 BLM brass cap as shown on the Record of Survey prepared by David D. Winchell and recorded September 28, 1989 in the office of the Recorder, Douglas County, Nevada as Document No. 211937; thence South 57°32'32" East, 640.57 feet to the POINT OF BEGINNING; thence North 80°00'00" East, 93.93 feet; thence North 35°00'00" East, 22.55 feet; thence North 10°00'00" West, 92.59 feet; thence North 80°00'00" East, 72.46 feet; thence South 10°00'00" East, 181.00 feet; thence South 80°00'00" West, 182.33 feet; thence North 10°00'00" West, 72.46 feet to the POINT OF BEGINNING.

(Reference is made to Record of Survey for Walley's Partners Ltd. Partnership, in the office of the County Recorder of Douglas County, Nevada, recorded on September 17, 1998 in Book 998, at Page 3261, as Document No. 449576.)

Together with those easements appurtenant thereto and such easements and use rights described in the Declaration of Time Share Covenants, Conditions and Restrictions for David Walley's Resort recorded September 23, 1998, as Document No. 0449993, and as amended by Document Nos. 0466255, 0485265, 0489957, 0509920 and 0521436, and subject to said Declaration; with the exclusive right to use said interest for one Use Period

within a DELUXE UNIT every other year in Even-numbered years in accordance with said Declaration.

Together with a perpetual non-exclusive easement of use and enjoyment in, to and throughout the Common Area and a perpetual non-exclusive easement for parking and pedestrian and vehicular access, ingress and egress as set forth in Access Easement and Abandonment Deed recorded September 20, 2002, in Book 0902, at Page 06242, as Document No. 0552534, Official Records, Douglas County, Nevada.

**A portion of APN: 1319-22-000-003**

Per NRS 111.312- The Legal Description above appeared previously in that Grant, Bargain, Sale Deed recorded on June 30, 2004, as Document No. 0617530 in Douglas County Records, Douglas County, Nevada.

**STATE OF NEVADA**  
**CERTIFICATION OF VITAL RECORD**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**DIVISION OF PUBLIC AND BEHAVIORAL HEALTH**  
**VITAL STATISTICS**  
**CERTIFICATE OF DEATH**

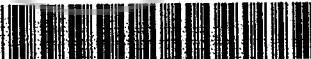
CASE FILE NO. 3903798

**2016012650**  
STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK	1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) <b>Douglas Smith HUBER</b>		2. DATE OF DEATH (Mo/Day/Year) <b>July 11, 2016</b>		3a. COUNTY OF DEATH <b>Washoe</b>	
	3b. CITY, TOWN, OR LOCATION OF DEATH <b>Reno</b>		3c. HOSPITAL OR OTHER INSTITUTION -Name (if not either, give street an <b>Renown Regional Medical Center</b>		3e. if Hosp. or Inst. indicate DOA,OP/Emer. Rm. Inpatient (Specify) <b>Inpatient</b>	
DECEDENT	5. RACE (Specify) <b>White</b>		6. Hispanic Origin? Specify: No - Non-Hispanic		7a. AGE-Last birthday (Years) <b>83</b>	
	7b. UNDER 1 YEAR MOS: _____ DAYS: _____		7c. UNDER 1 DAY HOURS: _____ MINS: _____		8. DATE OF BIRTH (Mo/Day/Yr) <b>October 26, 1932</b>	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	9a. STATE OF BIRTH (if not US/CA name country) <b>Utah</b>		9b. CITIZEN OF WHAT COUNTRY <b>United States</b>		10. EDUCATION <b>18</b>	
	11. MARITAL STATUS (Specify) <b>Married</b>		12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage) <b>Donna QUAYLE</b>			
PARENTS	13. SOCIAL SECURITY NUMBER <b>1974</b>		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of <b>General Manager</b>		14b. KIND OF BUSINESS OR INDUSTRY <b>Dairy Manufacturing</b>	
	15a. RESIDENCE - STATE <b>Nevada</b>		15b. COUNTY <b>Douglas</b>		15c. CITY, TOWN OR LOCATION <b>Minden</b>	
POSITION	15d. STREET AND NUMBER <b>2548 Clapham Ln.</b>		15e. INSIDE CITY LIMITS (Specify Yes or No) <b>Yes</b>		Ever in US Armed Forces? <b>Yes</b>	
	16. FATHER/PARENT - NAME (First Middle Last Suffix) <b>Alma HUBER</b>			17. MOTHER/PARENT - NAME (First Middle Last Suffix) <b>Nettie SMITH</b>		
TRADE CALL	18a. INFORMANT - NAME (Type or Print) <b>Donna HUBER</b>		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) <b>2548 Clapham Ln. Minden, Nevada 89423</b>			
	19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) <b>Removal/Burial</b>		19b. CEMETERY OR CREMATORY - NAME <b>Midway City Cemetery</b>		19c. LOCATION City or Town State <b>Midway Utah 84049</b>	
CERTIFIER	20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) <b>TAMAR R ROBINSON</b>		20b. FUNERAL DIRECTOR LICENSE NUMBER <b>870</b>		20c. NAME AND ADDRESS OF FACILITY <b>FitzHenry's Carson Valley Funeral Home 1360 Highway 395 N Gardnerville NV 89410</b>	
	21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) <b>SIGNATURE AUTHENTICATED CHARLENE A LETCHFORD M.D.</b>		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)			
REGISTRAR	21b. DATE SIGNED (Mo/Day/Yr) <b>July 14, 2016</b>		21c. HOUR OF DEATH <b>17:00</b>		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)	
CAUSE OF DEATH	23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) <b>Charlene A. Letchford M.D. 1155 Mill St Reno, NV 89502</b>				23b. LICENSE NUMBER <b>14306</b>	
	24a. REGISTRAR (Signature) <b>BRIDGES SANDI</b>		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) <b>July 18, 2016</b>		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)				Interval between onset and death	
	PART I (a) <b>Pneumonia</b>				Days	
DUE TO, OR AS A CONSEQUENCE OF (b) <b>Left Middle Cerebral Artery Stroke</b>				Interval between onset and death		
DUE TO, OR AS A CONSEQUENCE OF (c) <b>Diabetes</b>				Weeks		
DUE TO, OR AS A CONSEQUENCE OF (d)				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 <b>Dyslipidemia</b>				Interval between onset and death		
26. AUTOPSY (Specify Yes or No) <b>No</b>				27. WAS CASE REFERRED TO CORONER (Specify Yes or No) <b>No</b>		
28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY		
28d. DESCRIBE HOW INJURY OCCURRED		28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY: At home, farm, street, factory, office building, etc. (Specify)		
28g. LOCATION		STREET OR R.F.D. No.		CITY OR TOWN		
STATE						

STATE REGISTRAR

000636251



CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED: 7/26/2016

This copy is not valid unless prepared on engraved border displaying date, seal and signature of Registrar.

*Cody Phinney*  
SIGNATURE AUTHENTICATED

VRS-Rev-20120523a

