

RECORDING REQUESTED BY:

JOHN EDWARD HACKLEY

WHEN RECORDED, MAIL TO
AND MAIL TAX STATEMENTS TO:

John E. Hackley
2459 Stanford Way
Antioch, CA 94531

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

Portion of Parcel No.: 42-282-07

AFFIDAVIT — DEATH OF JOINT TENANT

STATE OF CALIFORNIA
COUNTY OF CONTRA COSTA

JOHN EDWARD HACKLEY, of legal age, being first sworn, deposes and says:

That MARY LOUISE HACKLEY, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Mary L. Hackley, named as one of the parties in that certain Grant, Bargain, Sale Deed, dated July 13, 1990, executed by Harich Tahoe Developments, a Nevada general partnership to John E. Hackley and Mary L. Hackley, husband and wife, as joint tenants, with right of survivorship and recorded on August 2, 1990, in the Office of the Recorder of the County of Douglas, State of Nevada, as Document No. 231568 of Official Records, relating to the real property located in said County and more particularly described in Exhibit "A" (attached hereto and incorporated herein by reference).

Executed on 10/23/, 2017, in Contra Costa County, California. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

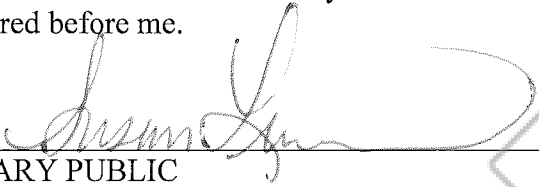


JOHN E. HACKLEY

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 that document.

STATE OF CALIFORNIA
COUNTY OF CONTRA COSTA

SUBSCRIBED AND SWORN TO (or affirmed) before me on OCT 13, 2017, by JOHN E. HACKLEY, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.



NOTARY PUBLIC

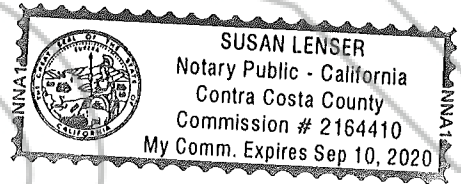


EXHIBIT "A"

A TIMESHARE ESTATE COMPRISED OF:

PARCEL ONE:

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

- (A) An undivided 1/106ths interest as tenants-in-common, in and to Lot 37 of Tahoe Village Unit No. 3 as shown on the Ninth Amended Map Recorded July 14, 1988 as Document No. 182057, Official Records of Douglas County, State of Nevada. Except therefrom Units 039 through 080 (Inclusive) and Units 141 through 204 (Inclusive) as shown and defined on that certain Condominium Plan Recorded as Document No. 182057, Official Records of Douglas County, Nevada.
- (B) Unit No. 053 as shown and defined on said Condominium Plan.

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 the modifications 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 the use and enjoyment and incidental purposes over, on and through Lots 29, 39, 40, and 41 as shown on Tahoe Village Unit No. 3 - Seventh Amended Map, recorded April 9, 1986 as Document No. 133178 of Official Records of Douglas County, State of Nevada and such recreational areas as may become a part of said timeshare project, for all those purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas County, State of Nevada.

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,
- and -
- (B) An easement for ingress, egress and public utility purposes, 32' wide, the centerline of which is shown and described on the Seventh Amended Map of Tahoe Village No. 3, recorded April 9, 1986, as Document No. 133178 of Official Records, Douglas County, State of Nevada.

PARCEL FIVE:

The exclusive right to use a unit of the same Unit Type as described in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded on August 18, 1988, as Document No. 184461 of Official Records of Douglas County, in which an interest is hereby conveyed in subparagraph (B) of Parcel One, 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 for all of the Purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions of the Ridge Tahoe, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas County, during ONE use weeks within the Prime SEASON, as said quoted term is defined in the Declaration of Annexation of The Ridge Tahoe Phase Five.

The above described exclusive rights may be applied to any available unit of the same Unit Type on Lot 37 during said use week within said "use season".

COUNTY of CONTRA COSTA

MARTINEZ, CALIFORNIA

3052013102496

CERTIFICATE OF DEATH

3201307003007

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1 NAME OF DECEDENT - FIRST (Given) MARY		3 LAST (Family) HACKLEY	
2 MIDDLE LOUISE		4 DATE OF BIRTH mm/dd/yyyy 08/06/1952	
5 AGE Yrs. 60		6 UNDER ONE YEAR Months Days Hours Minutes	
7 UNDER 24 HOURS Hours Minutes		8 SEX F	
9 BIRTH STATE/FOREIGN COUNTRY CA		10 SOCIAL SECURITY NUMBER [REDACTED] 1236	
11 EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12 MARITAL STATUS/SRDP (at Time of Death) MARRIED	
13 EDUCATION - Highest Level/Degree (see worksheet on back) HS GRADUATE		14 15. WAS DECEDENT HISPANIC/LATINO/SPANISH? (if yes see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
16 DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) CAUCASIAN		17 DATE OF DEATH mm/dd/yyyy 05/23/2013	
18 HOURS (24 Hours) 1320		19 YEARS IN OCCUPATION 30	
17 USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED HOMEMAKER		18 KIND OF BUSINESS OR INDUSTRY (e.g. grocery store, road construction, employment agency, etc.) OWN HOME	
20 DECEDENT'S RESIDENCE (Street and number or location) 2459 STANFORD WAY			
21 CITY ANTIOCH		22 COUNTY/PROVINCE CONTRA COSTA	
23 ZIP CODE 94531		24 YEARS IN COUNTY 60	
25 STATE/FOREIGN COUNTRY CA		26 INFORMANT'S NAME RELATIONSHIP JOHN E HACKLEY, HUSBAND	
27 INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state and zip) 2459 STANFORD WAY, ANTIOCH, CA 94531		28 NAME OF SURVIVING SPOUSE/SRDP - FIRST JOHN	
29 MIDDLE E		30 LAST (BIRTH NAME) HACKLEY	
31 NAME OF FATHER/PARENT - FIRST ALFRED		32 MIDDLE J	
33 NAME OF MOTHER/PARENT - FIRST SUZIE		34 MIDDLE MARIE	
35 LAST (BIRTH NAME) TREZZA		36 BIRTH STATE AR	
37 LAST (BIRTH NAME) TREZZA		38 BIRTH STATE CA	
39 DISPOSITION DATE mm/dd/yyyy 06/12/2013		40 PLACE OF FINAL DISPOSITION RESIDENCE JOHN E HACKLEY - HUSBAND 2459 STANFORD WAY, ANTIOCH, CA 94531	
41 TYPE OF DISPOSITION(S) CRURES		42 SIGNATURE OF EMBALMER [Signature] DELL CRANE	
43 LICENSE NUMBER EMB7239		44 NAME OF FUNERAL ESTABLISHMENT PITTSBURG FUNERAL CHAPEL	
45 LICENSE NUMBER FD510		46 SIGNATURE OF LOCAL REGISTRAR [Signature] WENDEL BRUNNER, MD	
47 DATE mm/dd/yyyy 05/29/2013		101 PLACE OF DEATH USUAL RESIDENCE	
102 CITY CONTRA COSTA		103 FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location) 2459 STANFORD WAY	
104 CITY ANTIOCH		105 IF HOSPITAL SPECIFY ONE <input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA <input type="checkbox"/> Hospice	
106 IF OTHER THAN HOSPITAL SPECIFY ONE <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other		107 CAUSE OF DEATH Enter the chain of events, diseases, injuries, or complications that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. (A) METASTATIC NON SMALL CELL LUNG CANCER	
108 TIME INTERVAL BETWEEN ONSET TO DEATH (A) 2 YRS		109 DEATH REPORTED TO CORONER? (A) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
110 PERIODIC MALARIA (B) 2013-2290		111 BIOPSY PERFORMED? (B) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
112 AUTOPSY PERFORMED? (C) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		113 USED IN DETERMINING CAUSE? (D) YES <input type="checkbox"/> NO <input type="checkbox"/>	
114 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 NONE		115 WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (if yes, list type of operation and date) NO	
116 IF FEMALE PREGNANT IN LAST YEAR? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/>		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: Decedent Last Seen Alive: [REDACTED]	
115 SIGNATURE AND TITLE OF CERTIFIER [Signature] RAKESH BHUTANI M.D.		116 LICENSE NUMBER A36433	
117 DATE mm/dd/yyyy 05/28/2013		118 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE RAKESH BHUTANI M.D. 4501 SAND CREEK ROAD, ANTIOCH, CA 94531	
119 I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		120 INJURED AT WORK? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	
121 INJURY DATE mm/dd/yyyy		122 HOUR (24 Hours)	
123 PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)			
124 DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)			
125 LOCATION OF INJURY (Street and number or location and city and zip)			
126 SIGNATURE OF CORONER / DEPUTY CORONER [Signature]		127 DATE mm/dd/yyyy	
128 TYPE NAME TITLE OF CORONER / DEPUTY CORONER		STATE REGISTRAR	
A B C D E		FAX AUTH #	
CENSUS TRACT		010001002363003	

CERTIFIED COPY OF VITAL RECORDS

* 0 0 0 8 3 0 7 2 7 *

STATE OF CALIFORNIA }
COUNTY OF CONTRA COSTA } SS

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:

DATE ISSUED:

OCT 31 2014

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

JOSEPH E. CANGIAMILLA
CONTRA COSTA COUNTY RECORDER

