



KAREN ELLISON, RECORDER

APN 1319-30-542-022

WHEN RECORDED MAIL TO:

Julie A. Clark  
7181 Briarwood Circle  
Centennial, CO 80112

MAIL TAX STATEMENTS TO:

Ridge Sierra  
P.O. Box 859  
Sparks, NV 89432

DECLARATION (OR AFFIDAVIT) OF DEATH

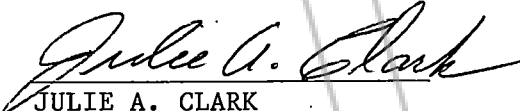
State of Colorado

County of Wapahoe

I, Julie A. Clark "being duly sworn" say I am 18 years of  
who acquired title as Julie A. Rinehart  
age or over; Thomas D. Rinehart, the decedent mentioned in the  
attached Certificate of Death, is the same person as Thomas D. Rinehart,  
named as one of the parties in the deed dated February 1, 1988, executed  
by Harlesk Management, Inc. to Thomas D. Rinehart and the  
undersigned, as Joint Tenants, recorded on March 3, 1988, as  
Instrument # 173640 in Book 388, Page 457, of the Official  
Records of Douglas County, Nevada, covering the property situated in  
Stateline, County of Douglas, State of Nevada,  
described as follows:

Timeshare No. 02-012-32-01

A.P.N. 1319-30-542-022


  
JULIE A. CLARK

Subscribed and sworn to before me  
on December 1, 2017

by Julie A. Clark

Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

AUDRIANA RASCON  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20174041874  
MY COMMISSION EXPIRES OCTOBER 08, 2021

  
\_\_\_\_\_  
Notary Public

(seal of notary public)

LF 134  
CF \_\_\_\_\_



STATE OF MICHIGAN  
DEPARTMENT OF PUBLIC HEALTH  
**CERTIFICATE OF DEATH**

STATE FILE NUMBER  
**1187806**

TYPE/PRINT  
IN  
PERMANENT  
BLACK INK

NAME OF DECEDENT  
FOR USE BY PHYSICIAN OR INSTITUTION  
THOMAS RINEHART

**DECEDENT**

**PARENTS**

**INFORMANT**

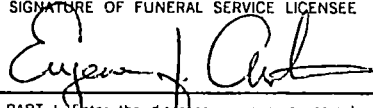
**DISPOSITION**

**CAUSE OF DEATH**

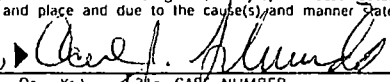
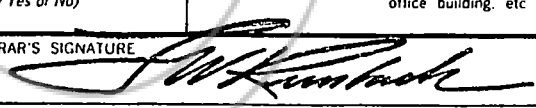
**CERTIFIER**

**MEDICAL EXAMINER**

B-36  
Rev. 1/90

1 DECEDENT'S NAME (First, Middle, Last) <b>THOMAS D. RINEHART</b>				2 SEX <b>MALE</b>	3 DATE OF DEATH (Month Day Year) <b>MAY 29, 1996</b>
4a AGE - Last Birthday (Years) <b>57</b>	4b UNDER 1 YEAR MONTHS: _____ DAYS: _____	4c UNDER 1 DAY HOURS: _____ MINUTES: _____	5 DATE OF BIRTH (Month, Day, Year) <b>August 23, 1938</b>		6 COUNTY OF DEATH <b>WAYNE</b>
7a LOCATION OF DEATH (Enter place officially pronounced dead in 7a, 7b, 7c) HOSPITAL OR OTHER INSTITUTION - Name (If not in either, give street and number) <b>BON SECOURS HOSPITAL</b>			7b IF HOSP OR INST Inpatient, Op / Emer Room, DOA (Specify) <b>EMER. ROOM</b>		7c CITY, VILLAGE, OR TOWNSHIP OF DEATH <b>GROSSE POINTE</b>
8 SOCIAL SECURITY NUMBER <b>██████████-9481</b>		9a USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired) <b>Attorney</b>		9b KIND OF BUSINESS OR INDUSTRY <b>Law</b>	
10a CURRENT RESIDENCE - STATE <b>Michigan</b>	10b COUNTY <b>Wayne</b>	10c LOCALITY (Check one box and specify) <input checked="" type="checkbox"/> INSIDE CITY OR VILLAGE OF <b>Grosse</b> <input type="checkbox"/> TWP OF <b>Pointe Park</b>		10d STREET AND NUMBER <b>1100 Grayton</b>	
10e ZIP CODE <b>48230</b>	11 BIRTHPLACE (City and State or Foreign Country) <b>Detroit, Michigan</b>	12 MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) <b>Married</b>	13 SURVIVING SPOUSE (If wife, give name before first married) <b>Julie Allardyce</b>	14 WAS DECEDENT EVER IN U.S. ARMED FORCES? (Specify Yes or No) <b>Yes</b>	
15 ANCESTRY - Mexican, Puerto Rican, Cuban, Central or South American, Chicano, other Hispanic, Afro-American, Arab, English, French, Finnish, etc (Specify below) <b>Belgian-Irish</b>		16 RACE - American Indian, Black, White, etc If Asian, give nationality i.e. Chinese, Filipino, Asian Indian, etc (Specify below) <b>White</b>		17 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) <b>5+</b> College (14 or 5+) <b>5+</b>	
18 FATHER'S NAME (First, Middle, Last) <b>George D. Rinehart</b>			19 MOTHER'S NAME (First, Middle, Surname before first married) <b>Grace M. VanCoppennolle</b>		
20a INFORMANT'S NAME (Type/Print) <b>Julie A. Rinehart</b>		20b MAILING ADDRESS (Street and Number or Rural Route Number, City or Village, State, ZIP Code) <b>1100 Grayton, Grosse pte.Prk., MI 48230</b>			
21 METHOD OF DISPOSITION - Burial, Cremation, Removal, Donation, Other (specify) <b>Cremation</b>		22a PLACE OF DISPOSITION (Name of Cemetery, Crematory, or other place) <b>White Chapel Cemetery</b>		22b LOCATION - City or Village, State <b>Troy, Michigan</b>	
23 SIGNATURE OF FUNERAL SERVICE LICENSEE 		24 LICENSE NUMBER (of Licensee) <b>6273</b>	25 NAME AND ADDRESS OF FACILITY <b>Verheyden Funeral Home 16300 Mack, Grosse Pte.Prk., MI 48224</b>		

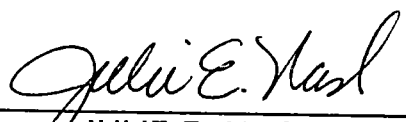
**THIS SECTION NOT FILMED PURSUANT TO  
F.S. 382.008 AND F.S. 382.025**

28 ACTUAL PLACE OF DEATH (Home, Nursing Home, Hospital, Ambulance) (Specify) <b>HOSPITAL</b>		29 WAS CASE REFERRED TO MEDICAL EXAMINER? (Specify Yes or No) <b>YES</b>		31a (Check one only) <input type="checkbox"/> The case reviewed and determined not to be a medical examiner's case <input checked="" type="checkbox"/> On the basis of examination and of investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated	
30a To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated (Signature and Title)  30b DATE SIGNED (Mo., Day, Yr.) _____		30c TIME OF DEATH <b>M</b>		31b DATE SIGNED (Mo., Day Yr.) <b>MAY 30, 1996</b>	
30d NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		31c CASE NUMBER <b>4709-96</b>		31d PRONOUNCED DEAD (Mo., Day Yr.) <b>MAY 29, 1996</b>	
32a NAME AND ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (ITEM 26) (Type or Print) <b>CARL J. SCHMIDT, MD. ASST. MED. EXAM. 1300 E. WARREN, DET, MI 48207</b>		32b LICENSE NUMBER <b>060850</b>		31e TIME OF DEATH <b>8:08 A.M.</b>	
33a ACC SUICIDE, HOM., NATURAL OR PENDING INVEST (Specify) <b>Natural</b>		33b DATE OF INJURY (Mo., Day, Yr.) _____		33c TIME OF INJURY <b>M</b>	
33e INJURY AT WORK (Specify Yes or No)		33f PLACE OF INJURY - At home, farm, street, factory, office building, etc (Specify)		33g LOCATION - Street or RFD No City Village or Twp State	
34a REGISTRAR'S SIGNATURE 				34b DATE FILED (Month, Day, Year) <b>JUN - 3 1996</b>	

Doc# 1762335 10/09/2009 2:29PM  
Filed & Recorded in Official Records of  
MONROE COUNTY DANNY L. KOLHAGE

**THIS IS TO CERTIFY THAT THIS IS A TRUE AND EXACT COPY OF A DEATH  
CERTIFICATE FILED IN THE CITY CLERK'S OFFICE OF THE CITY OF GROSSE  
POINTE, MICHIGAN.**

Doc# 1762335  
Bk# 2435 Pg# 834

  
**JULIE E. NASH  
DEPUTY CITY CLERK**

MONROE COUNTY  
OFFICIAL RECORDS

EXHIBIT "A"  
(Sierra 02) 02-012-32-01

A timeshare estate comprised of:

PARCEL 1: An undivided 1/51<sup>st</sup> interest in and to that certain condominium estate described as follows:

- (A) An undivided 1/8<sup>th</sup> interest as tenants in common, in and to the Common Area of **Lot 3** of Tahoe Village Unit No. 3, as shown on the map recorded December 27, 1983, as Document No. 93408, Official Records of Douglas County, State of Nevada, and as said Common Area is shown on the Record of Survey of Boundary Line Adjustment Map recorded April 21, 1986, as Document No. 133713, Official Records of Douglas County, State of Nevada
- (B) Unit No. **A4** as shown and defined on said condominium map recorded as Document No. 93408, Official Records of Douglas County, State of Nevada.

PARCEL 2: A non-exclusive easement for ingress and egress and for the use and enjoyment and incidental purposes over, on and through the Common Area as set forth in said condominium map recorded as Document No. 93408, Official Records of Douglas County, State of Nevada, and as said Common Area is shown on the Record of Survey of Boundary Line Adjustment Map recorded as Document No. 133713, Official Records of Douglas County, State of Nevada.

PARCEL 3: An exclusive right to the use of a condominium unit and the non-exclusive right to use the real property referred to in subparagraph (A) of Parcel 1, and Parcel 2 above, during one "USE WEEK" within the **PRIME** "use season" as that term is defined in the Second Amended and Restated Declaration of Timeshare Covenants, Conditions and Restrictions for the Ridge Sierra recorded as Document No. 183661, and as Amended by that certain Addendum recorded as Document No. 184444, Official Records, Douglas County, State of Nevada (the "CC&R's"). The above described exclusive and non-exclusive rights may be applied to any available unit in The Ridge Sierra project during said "USE WEEK" in the above referenced "use season" as more fully set forth in the CC&R's.

A Portion of APN: 1319-30-542-022