

A Portion of APN: 1319-15-000-020

Recording Requested By:

Matthew A. Gray
McDonald Carano LLP
P. O. Box 2670
Reno, NV 89509

Mail Future Tax Statements To:

Robert Piccolo, Trustee
5420 Camus Road
Carson City, NV 89701

The undersigned hereby affirms that this document submitted for recording **DOES** contain the personal information of the decedent per NRS 239B.030(2)(a), NRS 440.380(1)(a) and NRS 40.525(5).

AFFIDAVIT OF DEATH OF TRUSTEE

STATE OF NEVADA)
 : ss.
DOUGLAS COUNTY)

ROBERT W. PICCOLO, being first duly sworn, upon oath deposes and says:

1. Affiant is over the age of twenty-one years, legally competent and possessed of his rights.

2. CAROLINE S. PICCOLO, the decedent mentioned in the certified copy of the Certificate of Death attached hereto as Exhibit "A", and incorporated herein and made a part hereof by this reference, is the same person as CAROLINE S. PICCOLO, named as one of the parties in that certain Quitclaim Deed dated March 28, 2007, by and between ROBERT PICCOLO and CAROLINE PICCOLO, husband and wife as joint tenants with right of survivorship, of Carson City, Nevada (“Grantor”) and ROBERT W. PICCOLO and CAROLINE S. PICCOLO, Trustees of the ROBERT AND CAROLINE PICCOLO REVOCABLE TRUST, u/a/d March 28, 2007, whose address is 5420 Camus Road, Carson City, Nevada 89701 (“Grantee”) recorded as Document No. 0698122 on March 29, 2007, of Official Records of Douglas County, State of Nevada, more particularly described as:

A timeshare estate comprised of an undivided interest as tenants in common in and to that certain real property and improvement as follows:

An undivided 1/1224th interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

ADJUSTED PARCEL G as shown on that Record of Survey to Support a Boundary Line Adjustment recorded on September 20, 2002 in the Office of the Douglas County Recorder as Document No. 0552536, adjusting that Record of Survey recorded April 29, 2002 as Document No. 0540898, pursuant to that Final Subdivision Map LDA #98-05 for DAVID WALLEY'S RESORT, a Commercial Subdivision, filed for record with the Douglas County Recorder on October 19, 2000, in Book 1000, at Page 3464, as Document No. 0501638, and by Certificate of Amendment recorded November 3, 2000, in Book 1100, Page 467, as Document No. 0502689, Official Records of Douglas County, Nevada.

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 No. 0466255, 0485265, 0489957, 0509920 and 0521436, and that Declaration of Annexation of David Walley's Resort Phase III recorded on July 1, 2003 in the Office of the Douglas County Recorder as Document No. 0582120 and subject to said Declaration; with the exclusive right to use said interest for one Use Period within a TWO BEDROOM UNIT every year 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.

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TOGETHER WITH all and singular, the tenements, hereditaments and appurtenances thereunto belonging or anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD the said premises, together with the appurtenances, unto the said Grantee, and to their assigns forever.

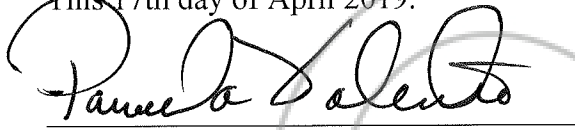
3. Affiant, ROBERT W. PICCOLO, further states that CAROLINE S. PICCOLO, died in the County of Carson City, State of Nevada, on November 8, 2010, and, that as a result of her death, ROBERT W. PICCOLO became the sole Trustee of the ROBERT AND CAROLINE PICCOLO REVOCABLE TRUST, u/a/d March 28, 2007, pursuant to the terms of the Trust.

4. Upon the recording of this Affidavit, title to the property will be held as follows:
ROBERT W. PICCOLO, Trustee of the ROBERT AND CAROLINE PICCOLO REVOCABLE TRUST, U/A/D March 28, 2007.

DATED: This 17th day of April 2019.


ROBERT W. PICCOLO, Trustee

Subscribed and sworn to before me this
This 17th day of April 2019.


NOTARY PUBLIC

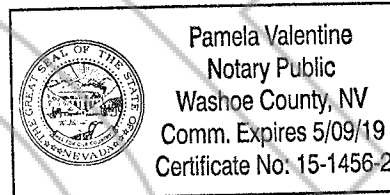
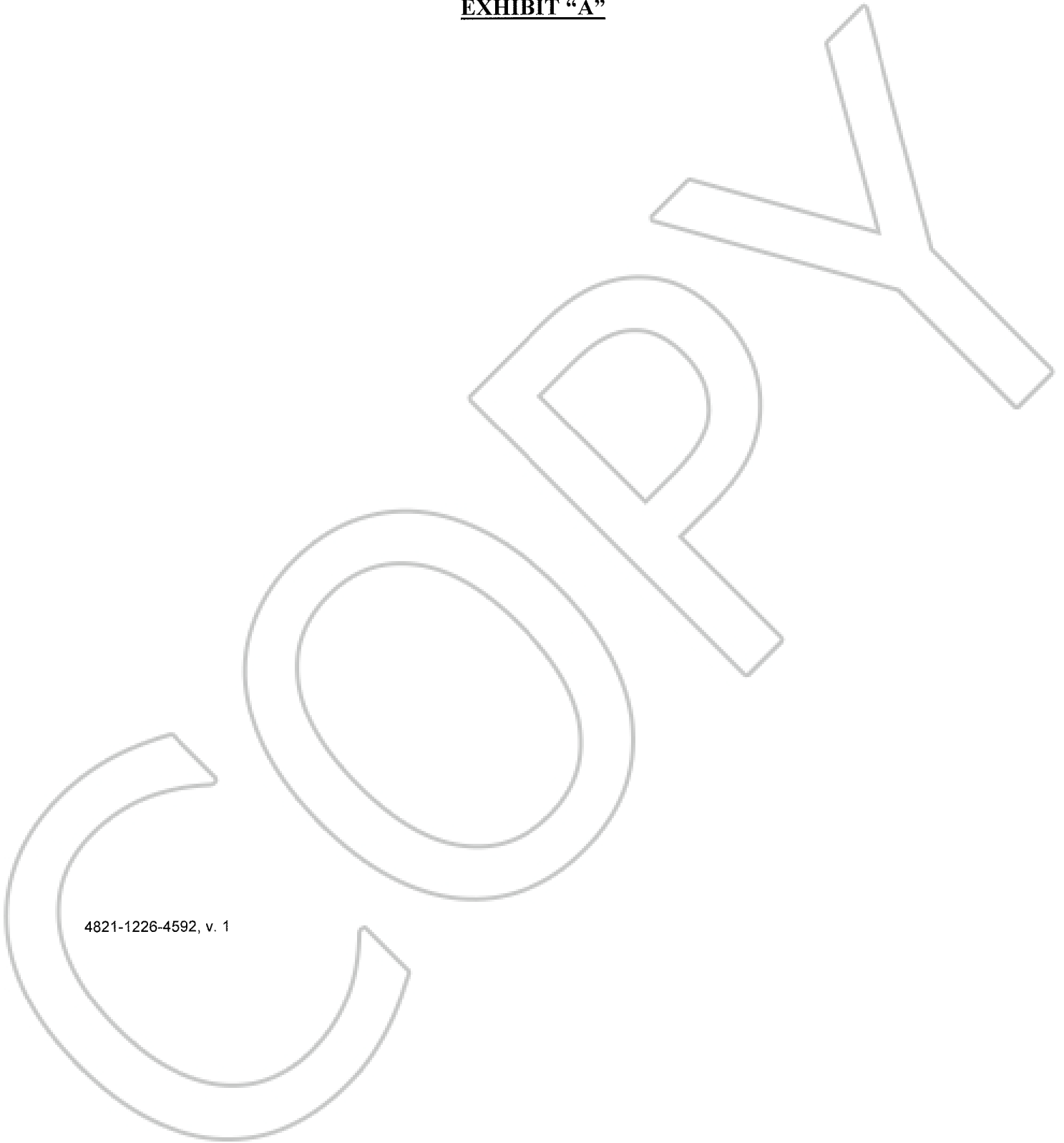


EXHIBIT "A"



4821-1226-4592, v. 1

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH
VITAL STATISTICS
CERTIFICATE OF DEATH

2010016904
STATE FILE NUMBER

TYPE OR
PRINT IN
PERMANENT
BLACK INK

DECEDENT

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

1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) Caroline Simone PICCOLO		2. DATE OF DEATH (Mo/Day/Year) November 08, 2010		3a. COUNTY OF DEATH Carson City	
3b. CITY, TOWN, OR LOCATION OF DEATH Carson City		3c. HOSPITAL OR OTHER INSTITUTION -Name (if not either, give street and number) 5420 Camus Rd		3e. If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify) Home	
4. SEX Female		5. RACE White		6. Hispanic Origin? Specify No - Non-Hispanic	
7a. AGE-Last birthday (Years) 60		7b. UNDER 1 YEAR MOS DAYS		7c. UNDER 1 DAY HOURS MINS	
8. DATE OF BIRTH (Mo/Day/Yr) December 30, 1949		9a. STATE OF BIRTH (if not U.S.A., name country) England		9b. CITIZEN OF WHAT COUNTRY United States	
10. EDUCATION 16		11. MARRIED; NEVER MARRIED; WIDOWED; DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) Robert William PICCOLO	
13. SOCIAL SECURITY NUMBER 9846		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired) Budget Analyst		14b. KIND OF BUSINESS OR INDUSTRY State of Nevada	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Carson City		15c. CITY, TOWN OR LOCATION Carson City	
15d. STREET AND NUMBER 5420 Camus Rd		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes		Ever in US Armed Forces? No	
16. FATHER - NAME (First Middle Last Suffix) Raymond J CAPITAIN			17. MOTHER - NAME (First Middle Last Suffix) Margaret TAPLIN		
18a. INFORMANT- NAME (Type or Print) Robert W PICCOLO		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 5420 Camus Rd Carson City, Nevada 89701			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Walton's Sierra Crematory		19c. LOCATION City or Town State Carson City Nevada 89706	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) RICK NOEL SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE 620		20c. NAME AND ADDRESS OF FACILITY Walton's Chapel of the Valley 1281 N Roop Carson City NV 89706	
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) FORREST CRAIG CONRATH M.D. 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) November 08, 2010		21c. HOUR OF DEATH 05:30		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22d. PRONOUNCED DEAD (Mo/Day/Yr)		22e. PRONOUNCED DEAD AT (Hour)	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Forrest Craig Conrath M.D. 85 Kirman Ave #401 Reno, NV 895021344				23b. LICENSE NUMBER 5454	
24a. REGISTRAR (Signature) CHRISTINA GRIFFITH SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) November 12, 2010		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				Interval between onset and death	
(a) Metastatic Rectal Carcinoma				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(b)				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(c)				Interval between onset and death	
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(d)				Interval between onset and death	
PART II				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes					
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

355077

VRS Rev 20100216

360397

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: 11/12/2010

R. D. White
SIGNATURE AUTHENTICATED

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

