

APN: 1319-15-000-020
Escrow No. RTAVTS19162965

Recording Requested By:
Stewart Vacation Ownership

Mail Tax Statement to:
Walley's P.O.A.
P.O. Box 158
Genoa, NV 89411

When Recorded Mail to:
Paul S. Bonaccorsi
2650 Blue Haven Lane
Carson City, NV 89701

AFFIDAVIT – DEATH OF JOINT TENANT
(Title of Document)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

- Affidavit of Death of Joint Tenant – NRS 440.380(1)(A) & NRS 40.525(5)
- Judgment – NRS 17.150(4)
- Military Discharge – NRS 419.020(2)

Aleta Hannum Signature

Aleta Hannum Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

This page added to provide additional information required by NRS 111.312 Sections 1-2.
(Additional recording fee applies)

This cover page must be typed.

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

RECORDING REQUESTED BY
STEWART VACATION OWNERSHIP

WHEN RECORDED MAIL TO:

Paul S. Bonaccorsi
2650 Blue Haven Lane
Carson City, NV 89701

Escrow No: RTAVTS19162965

RECORDERS USE ONLY

AFFIDAVIT – DEATH OF TRUSTEE

STATE OF NEVADA

ss.

COUNTY OF WASHOE

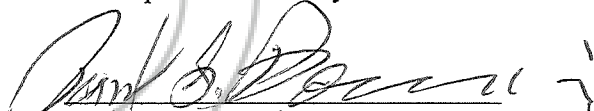
PAUL S. BONACCORSI, of legal age, being duly sworn, deposes and says

That PHAEDRA K. BONACCORSI, the decedent mentioned in the attached Certificate of Death, is the same person as PHAEDRA BONACCORSI named as one of the Trustees of that certain P & P BONACCORSI – 1998 TRUST, dated July 17, 1998 and designated one of the Trustees in the Deed recorded in Douglas County, State of Nevada on April 19, 2005 in Book 0405 at Page 7263 as Document No. 642111.

In accordance with the above referenced trust, PAUL S. BONACCORSI shall act as successor trustee of said trust on the death of PHAEDRA BONACCORSI.

PAUL S. BONACCORSI is filing this Affidavit with the Douglas County Recorder to establish the succession of PAUL S. BONACCORSI, as successor trustee pursuant to the aforesaid trust. The trust estate includes an interest in real property located in Douglas County, State of Nevada, which is more fully described in Exhibit 'A' attached hereto and incorporated herein by reference.

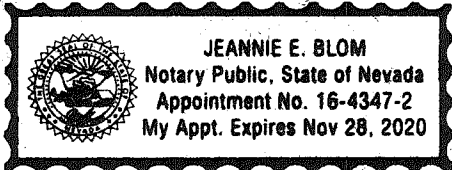
Dated: July 19, 2019


Paul S. Bonaccorsi

STATE OF NEVADA)
)ss.
COUNTY OF WASHOE)

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME ON THIS 19 DAY OF JULY, 2019. BY PAUL S. BONACCORSI, PERSONALLY KNOWN TO ME OR PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON(S) WHO APPEARED BEFORE ME.

SIGNATURE  (SEAL)
NOTARY PUBLIC



STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH
VITAL STATISTICS

CERTIFICATE OF DEATH

2013018046

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) Phaedra K BONACCORSI		2. DATE OF DEATH (Mo/Day/Year) October 30, 2013		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) 2650 Blue Haven Ln		3e. If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify) Home	
4. SEX Female		5. RACE White (Specify)		6. Hispanic Origin? Specify No - Non-Hispanic	
7a. AGE-Last birthday (Years) 74		7b. UNDER 1 YEAR MOS DAYS		7c. UNDER 1 DAY HOURS MIN	
8. DATE OF BIRTH (Mo/Day/Yr) January 31, 1939		9a. STATE OF BIRTH (if not U.S.A., name country) Pennsylvania		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) Paul S BONACCORSI	
13. SOCIAL SECURITY NUMBER ██████-3890		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired) Receptionist		14b. KIND OF BUSINESS OR INDUSTRY Medical	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Carson City		15c. CITY, TOWN OR LOCATION Carson City	
15d. STREET AND NUMBER 2650 Blue Haven Ln		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes		Ever in US Armed Forces? No	
16. FATHER/PARENT - NAME (First Middle Last Suffix) Charles MCGINNIS			17. MOTHER/PARENT - NAME (First Middle Last Suffix) Julia KIZIS		
18a. INFORMANT - NAME (Type or Print) Paul BONACCORSI		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 2650 Blue Haven Ln Carson City, Nevada 89701			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Fitzhenry's Crematory		19c. LOCATION City or Town State Carson City Nevada 89701	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JAMES SMOLENSKI SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE 217		20c. NAME AND ADDRESS OF FACILITY Fitzhenrys Funeral Home 3945 Fairview Dr Carson City NV 89701	
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) NITA SCHWARTZ 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 06, 2013		21c. HOUR OF DEATH 13:45		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) Nita Schwartz M.D. 710 W. Washington St. Carson City, NV 89703				23b. LICENSE NUMBER 9114	
24a. REGISTRAR (Signature) NICOLE SHORE SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) November 06, 2013		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: Coronary Atherosclerosis Interval between onset and death					
(a) 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) Interval between onset and death					
PART II: OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1. Diabetes Mellitus, Sleep Apnea, Peripheral Vascular Disease				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No					
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

CERTIFIED COPY OF VITAL RECORDS

506454

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.

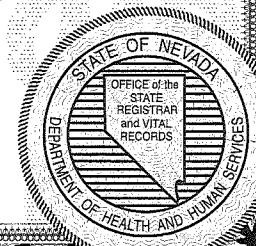
DATE ISSUED:

11/13/2013

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

R. J. White
STATE REGISTRAR
SIGNATURE AUTHENTICATED

VRS-Rev-20120523a



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Inventory No.: 17-073-32-81

EXHIBIT "A"
(Walley's)

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

An undivided 1/2448th 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 Nos. 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 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 Relocation recorded on May 26, 2006, in Book 0506 at Page 10729, as Document No. 0676008; and Access Easement recorded on July 26, 2006, in Book 0706 at Page 9371, as Document No. 0680633, all of Official Records, Douglas County, Nevada.

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

This document is recorded as an
ACCOMMODATION ONLY and without liability
for the consideration therefore, or as to the
validity or sufficiency of said instrument, or
for the effect of such recording on the title of
the property involved.