

A portion of APN: 1319-15-000-020
R.P.T.T.: \$ 0.00
Send Subsequent Tax Bills To:
OLCC Nevada, LLC.
8505 W Irlo Bronson Mem. Hwy
Kissimmee, FL 34747



KAREN ELLISON, RECORDER

After Recording Mail To:
Diana G. King
701-160 Richmond Rd E
Susanville, CA 96130-5022

Inventory Control No: 36023063300

AFFIDAVIT TERMINATING JOINT TENANCY

The undersigned, Diana G. King of legal age, being first duly sworn, deposes and states the following as required by NRS 111.365:

1. That Christopher Lee King, having become deceased on 06/07/2019, pursuant to the attached certified copy Certificate of Death, is the same person Christopher L. King, named as one of the parties in that certain David Walley's Resort Grant, Bargain, Sale Deed dated 08/15/2012 By Walley's Partners Limited Partnership, a Nevada limited partnership, to : Christopher L. King and Diana G. King, Husband and Wife, As Joint Tenants with Right of Survivorship, recorded on 03/21/2013, as Recorded Document No. 0820425 of Official Records of the Douglas County Recorder's Office, Douglas County, State of Nevada.
2. The real property subject hereof is situated in the Douglas of Clark, State of Nevada, bounded and described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND BY THIS REFERENCE MADE A PART HEREOF.

MORE commonly known as: 2001 Foothill Road, Genoa, Nevada 89411

3. That the undersigned affiant, Diana G. King, the surviving joint tenant of the named decedent.



David Walley's Resort



I, Diana G. King, hereby affirm that this document submitted for recording contains personal information (social security number, driver's license numbers or identification card number) of a person as required by a specific law, public program or grant that requires the inclusion of the personal information. The Nevada Revised Statute (NRS), public program or grant referenced is (NRS) 40.525.

Diana G. King, Affiant
Surviving Joint Tenant (Print Name), Title

DATED this 1st day of August, 20 19,

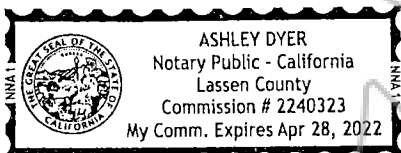
Diana G. King
Signature of Surviving Joint Tenant

STATE OF California)

SS

COUNTY OF Lassen)

SUBSCRIBED AND SWORN before me this 1 day of
August, 20 19, by Diana G. King.



Notary Stamp/Seal

Ashley Dyer
Notary Public Signature

ASHLEY DYER
Notary Public Print Name

My Commission Expires: April 28, 2022

EXHIBIT "A"
LEGAL DESCRIPTION

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 1/1,224th 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 (W 1/2 NE 1/4) 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 Section 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" 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 No. 0466255, and subject to said Declaration; with the exclusive right to use said interest for one Use Period within a DELUXE UNIT each year in accordance with said Declaration.

Per NRS 111.312 – The Legal Description appeared previously in that certain David Walley's Resort Grant, Bargain, Sale Deed recorded on 03/21/2013, as Recorded Document No. 0820425 of Douglas County Records, Douglas County, Nevada.

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LASSEN

SUSANVILLE, CALIFORNIA 96130

CERTIFICATE OF DEATH

3201918000085

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS VS-1 (06/27/2008)		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Show)		2. MIDDLE		3. LAST (Family)	
CHRISTOPHER		LEE		KING	
AKA, ALSO KNOWN AS - include full AKA (FIRST, MIDDLE, LAST)				4. DATE OF BIRTH mm/dd/yyyy	5. AGE Yrs.
				12/28/1948	70
6. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER		11. EVER IN U.S. ARMED FORCES?	12. MARITAL STATUS/SRDP (at Time of Death)
CA		0255		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	MARRIED
9. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER		13. EDUCATION - Highest Level/Degree (if work/school on back)	14. DATE OF DEATH mm/dd/yyyy
CA		0255		HS GRADUATE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	06/07/2019
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.)		19. YEARS IN OCCUPATION	
MAINTENANCE MECHANIC		HIGH DESERT STATE PRISON		10	
20. DECEDENT'S RESIDENCE (Street and number, or location)					
701-160 RICHMOND ROAD E.					
21. CITY		22. COUNTY/PROVINCE		23. ZIP CODE	24. YEARS IN COUNTY
SUSANVILLE		LASSEN		96130	20
25. STATE/FOREIGN COUNTRY		27. INFORMANT'S MAILING ADDRESS (Street and number, or full route number, city or town, state and zip)			
CA		701-160 RICHMOND ROAD E., SUSANVILLE, CA 96130			
28. INFORMANT'S NAME, RELATIONSHIP					
DIANA KING, WIFE					
23. NAME OF SURVIVING SPOUSE/SRDP - FIRST		29. MIDDLE		30. LAST (BIRTH NAME)	
DIANA		GAIL		DYER	
31. NAME OF FATHER/PARENT - FIRST		32. MIDDLE		33. LAST	
LYNN		WALTER		JOHNSON	
34. BIRTH STATE		36. MIDDLE		37. LAST (BIRTH NAME)	
OH		MAE		BURDINE	
35. NAME OF MOTHER/PARENT - FIRST		36. MIDDLE		38. BIRTH STATE	
MARGARET		MAE		TX	
39. DISPOSITION DATE mm/dd/yyyy					
06/18/2019					
40. PLACE OF FINAL DISPOSITION (Street and number, or full route number, city or town, state and zip)					
DIAMOND CREST CEMETERY 471-500 DIAMOND CREST ROAD, SUSANVILLE, CA 96130					
41. TYPE OF DISPOSITION(S)					
BU					
42. SIGNATURE OF EMBALMER					
NOT EMBALMED					
43. LICENSE NUMBER					
-					
44. NAME OF FUNERAL ESTABLISHMENT					
WALTON'S COLONIAL MORTUARY					
45. LICENSE NUMBER					
FD707					
46. SIGNATURE OF LOCAL REGISTRAR					
JULIE M. BUSTAMANTE					
47. DATE mm/dd/yyyy					
06/14/2019					
101. PLACE OF DEATH					
RESIDENCE					
104. COUNTY		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location)		106. CITY	
LASSEN		701-160 RICHMOND ROAD E.		SUSANVILLE	
102. IF HOSPITAL, SPECIFY ONE					
<input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DCA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input checked="" type="checkbox"/> Home <input type="checkbox"/> Other					
103. IF OTHER THAN HOSPITAL, SPECIFY ONE					
<input type="checkbox"/> 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.					
IMMEDIATE CAUSE (Final disease or condition resulting in death)				108. DEATH REPORTED TO CORONER?	
A) HYPERTENSIVE HEART DISEASE				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
B) DIABETES				109. BIOPSY PERFORMED?	
C) EMPHYSEMA				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
D) GRAVES DISEASE				110. AUTOPSY PERFORMED?	
				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107				111. USED IN DETERMINING CAUSE?	
NONE				<input type="checkbox"/> YES <input type="checkbox"/> NO	
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date)					
NO					
113A. IF FEMALE, PREGNANT IN LAST YEAR?					
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK					
114. 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		115. SIGNATURE AND TITLE OF CERTIFIER	
06/20/2008		05/13/2019		GREGORY MICHAEL VALCESCHINI M.D.	
116. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE					
GREGORY VALCESCHINI M.D. PO BOX 270130, SUSANVILLE, CA 96127					
117. LICENSE NUMBER					
G60595					
117. DATE mm/dd/yyyy					
06/13/2019					
118. 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"/> Accidental <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined					
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					
127. DATE mm/dd/yyyy					
128. TYPE NAME, TITLE OF CORONER/DEPUTY CORONER					
JULIE M. BUSTAMANTE LASSEN COUNTY CLERK-RECORDER					

CERTIFIED COPY OF VITAL RECORDS



STATE OF CALIFORNIA }
COUNTY OF LASSEN } SS.

DATE ISSUED JUN 14 2019

This is a true and exact reproduction of the document officially registered and placed on file with the LASSEN COUNTY CLERK-RECORDER.

JULIE BUSTAMANTE
LASSEN COUNTY CLERK-RECORDER

This copy not valid unless prepared on engraved border displaying seal and signature of County Clerk-Recorder.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

