

APN Parcel No. 1318-15-819-001 PTN
Contract No.: 000430509687
Recording requested by: White Rock Title, LLC
WHEN RECORDED RETURN TO:
First American Title Insurance Company
Vacation Ownership Services
400 South Rampart Boulevard, Suite 290
Las Vegas, NV 89145

AFFIDAVIT OF DEATH


STATE OF FLORIDA
COUNTY OF ORANGE

The undersigned Affiant, of legal age being first duly sworn, deposes and says: THAT SANDRA J GREENE, the decedent mentioned in the attached certified copy of Certificate of Death, was the same person as SANDRA J GREENE, named as one of the parties in that certain deed executed by Wyndham Vacation Resorts, Inc., to Robert A Greene and Sandra J Greene Joint Tenants with the Right of Survivorship, , recorded as instrument No. 0665464 on January 11th, 2006 of Official Records in the Office of County Recorder of Douglas County, State of Nevada.

Legal Description of Property:

A 105,000/90,245,000 undivided fee simple interest as tenants in common in Units 9101, 9102, 9103, 9104, 9201, 9203 and 9204 in South Shore Condominium ("Property"), located at 180 Elks Point Road in Zephyr Cove, Nevada 89449, according to the Final Map #01-026 and Condominium Plat of South Shore filed of record in Book 1202, Page 2181 as Document Number 559872 in Douglas County, Nevada, and subject to all provisions thereof and those contained in that certain Declaration of Condominium - South Shore ("Timeshare Declaration") dated October 21, 2002 and recorded December 5, 2002 in Book 1202, Page 2182 as Instrument Number 559873, and also subject to all the provisions contained in that certain Declaration of Restrictions for Fairfield Tahoe at South Shore and recorded October 28, 2004 in Book 1004, Page 13107 as Instrument Number 628022, Official Records of Douglas County, Nevada, which subjected the Property to a timeshare plan called Fairfield Tahoe at South Shore ("Timeshare Plan").

Being more particularly described in the deed recorded concurrently herewith and hereby incorporated in its entirety by this reference.



Affiant: Nicki Richmond

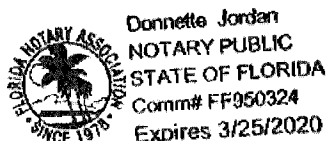
ACKNOWLEDGEMENT

Dated this 12/16/2019

Subscribed and Sworn before me, Notary Public, on 12/16/2019 personally appeared Nicki Richmond, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/arc 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.

WITNESS my hand and official seal

SIGNATURE: 
Printed Name: Donnette Jordan
My Commission Expires 03/25/2020



DEATH CERTIFICATION

STATE FILE NUMBER: 139-11-003482

DECEDENT'S NAME: *SANDRA JANE GREENE*

SEX: FEMALE

AKA's: NA

SOCIAL SECURITY NUMBER: [REDACTED]-9421

ARMED FORCES: NO

DATE OF BIRTH: JANUARY 20, 1940

AGE: 71 YEARS

TYPE OF PLACE OF DEATH: HOSPICE FACILITY

COUNTY OF DEATH: GREENVILLE

NAME AND ADDRESS OF PLACE OF DEATH: MCCALL HOSPICE HOUSE OF GREENVILLE, SIMPSONVILLE, SC 29680

PLACE OF DISPOSITION: CREMATION SOCIETY OF SOUTH CAROLINA

DISPOSITION LOCATION: GREENVILLE, SOUTH CAROLINA

METHOD OF DISPOSITION: CREMATION

DECEDENT'S RESIDENCE: 179 NORTH PUTT CORNERS ROAD, NEW PALTZ, ULSTER COUNTY, NY, 12561

MARITAL STATUS: MARRIED

PLACE OF BIRTH: NEW YORK

SURVIVING SPOUSE'S NAME: ROBERT A GREENE

FATHER'S NAME: FREDERICK JOHN SCHLOBOHM

MOTHER'S NAME PRIOR TO FIRST MARRIAGE: FRANCES DALY

INFORMANT'S NAME: ROBERT A GREENE

RELATIONSHIP: HUSBAND

MAILING ADDRESS: 179 N PUTT CORNERS ROAD, NEW PALTZ, NY, 12561

FUNERAL HOME: CREMATION SOCIETY OF SOUTH CAROLINA, INC., 328 DUPONT DRIVE, GREENVILLE, SC, 29607

FUNERAL DIRECTOR: RANDALL G. HARRELD

LICENSE NUMBER: 2489

EMBALMER'S NAME: NA

LICENSE NUMBER: NA

ACTUAL OR PRESUMED DATE OF DEATH: FEBRUARY 02, 2011

MANNER OF DEATH: NATURAL

ACTUAL OR PRESUMED TIME OF DEATH: 0010

CAUSE OF DEATH - PART I

WIDELY METASTATIC INFILTRATING LOBULAR BREAST CANCER

OTHER SIGNIFICANT CONDITIONS - PART II:

LEPTOMENINGEAL CARCINOMATOSIS NOTED 12/2010

CORONER CONTACTED? NO

AUTOPSY PERFORMED? NO

AUTOPSY AVAILABLE? NA

DATE OF INJURY: NA

TIME OF INJURY: NA

INJURY AT WORK? NA

PLACE OF INJURY: NA

LOCATION OF INJURY: NA

HOW THE INJURY OCCURRED?

NA

CERTIFIER NAME AND TITLE: DR. PATRICK C CAREY

LICENSE NUMBER: 28742

CERTIFIER'S ADDRESS: 1836 W GEORGIA ROAD, SIMPSONVILLE, SC, 29680

DATE FILED: FEBRUARY 05, 2011

DATE OF ISSUANCE: FEBRUARY 07, 2011

SPECIAL INSTRUCTIONS:

NA

SC01460073

This is a true certification of the facts on file in the Division of Vital Records, SC Department of Health and Environmental Control.

C. Earl Hunter
C. Earl Hunter

Commissioner and State Registrar

Guang Zhao
Guang Zhao

Assistant State Registrar

This copy is not valid unless prepared on an engraved border displaying the state seal and issuing agency logo.

Revision Date: 08/01/2009

