

APN Parcel No. 1318-15-818-001 PTN
Contract No.: 000570901710
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 William W Powell, Jr., the decedent mentioned in the attached certified copy of Certificate of Death, was the same person as WILLIAM W POWELL JR., named as one of the parties in that certain deed executed by Wyndham Vacation Resorts, Inc., to William W. Powell, Jr. and Patricia I. Powell, Joint Tenants with the Right of Survivorship, , recorded as instrument No. 0751468 on September 30th, 2009 of Official Records in the Office of County Recorder of Douglas County, State of Nevada.

Legal Description of Property:

A **105,000/109,787,500** undivided fee simple interest as tenants in common in **Units 8101, 8102, 8103, 8201, 8202, 8203, 8301, 8302 and 8303** 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: Doug Ward

ACKNOWLEDGEMENT

STATE OF) FLORIDA

COUNTY OF) ORANGE

Sworn to before me by means of X physical presence or _____ online notarization this 25th day of August, 2020 by He or she is personally known to me.


SIGNATURE: Kathy Chang-Yen
Printed Name: **KATHY CHANG-YEN**
Notary Public, State of Florida
My Commission Expires 04/18/2024



KATHY CHANG-YEN
NOTARY PUBLIC
STATE OF FLORIDA
Comm# GG971173
Expires 4/18/2024

STATE OF ARIZONA
CERTIFICATION OF VITAL RECORD

ORIGINAL
STATE COPY

STATE OF ARIZONA
DEPARTMENT OF HEALTH SERVICES-BUREAU OF VITAL RECORDS
CERTIFICATE OF DEATH

State File Number
102-2018-054799

1. DECEDENT'S LEGAL NAME (FIRST, MIDDLE, LAST, SUFFIX) WILLIAM, WESLEY, POWELL, JR.		2. AKA'S (IF ANY)		3. DATE OF DEATH 12/04/2018	
4. SEX MALE		5. SOCIAL SECURITY NUMBER [REDACTED]-5254		8. DATE OF BIRTH 03/28/1957	
7. AGE 61 YEARS					
8. CITY/TOWN, COUNTY AND ZIP OR LOCATION OF DEATH TUCSON, PIMA, 85704					
9. PLACE OF DEATH (TYPE OF PLACE OF DEATH AND FACILITY NAME/ADDRESS) HOSPICE FACILITY - CASA HOSPICE AT THE FOUNTAINS					
10. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) CADILLAC, MICHIGAN		11. MARITAL STATUS MARRIED		12. NAME OF SURVIVING SPOUSE PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) PATRICIA, IRENE, KINDLER	
13. DECEDENT'S USUAL RESIDENCE ADDRESS (STREET, CITY, COUNTY, STATE, ZIP) 3200 W PHILADELPHIA LANE, TUCSON, PIMA, AZ, 85741					
14. DECEDENT'S HISPANIC ORIGIN(S) NO, NOT SPANISH/HISPANIC/LATINO		15. DECEDENT'S RACE(S) WHITE		16. EVER IN ARMED FORCES NO	
17. OCCUPATION MASON		18. FATHER'S NAME (FIRST, MIDDLE, LAST, SUFFIX) WILLIAM, WESLEY, POWELL			
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (FIRST, MIDDLE, LAST, SUFFIX) NANCY, MILTON				20. INFORMANT'S NAME (FIRST, MIDDLE, LAST, SUFFIX) PATRICIA, IRENE, POWELL	
21. RELATIONSHIP SPOUSE				22. INFORMANT'S MAILING ADDRESS 3200 W PHILADELPHIA LANE, TUCSON, AZ, 85741	
23. NAME AND ADDRESS OF FUNERAL FACILITY OR RESPONSIBLE PERSON ANGEL VALLEY FUNERAL HOME 2545 N TUCSON BOULEVARD, TUCSON, AZ, 85716		24. FUNERAL DIRECTOR'S NAME OR RESPONSIBLE PERSON MIKE, ORCUTT		25. LICENSE NUMBER F1294	
26. METHOD(S) OF DISPOSITION CREMATION		27. NAME AND LOCATION OF 1ST DISPOSITION FACILITY OLD PUEBLO CREMATORY TUCSON, AZ, US		28. NAME AND LOCATION OF 2ND DISPOSITION FACILITY	
29. A. IMMEDIATE CAUSE OF DEATH LIVER FAILURE				30. APPROXIMATE INTERVAL UNKNOWN	
31. B. DUE TO OR AS A CONSEQUENCE OF: ALCOHOLIC CIRRHOSIS WITH ASCITES				32. APPROXIMATE INTERVAL YEARS	
33. C. DUE TO OR AS A CONSEQUENCE OF:				34. APPROXIMATE INTERVAL	
35. D. DUE TO OR AS A CONSEQUENCE OF:				36. APPROXIMATE INTERVAL	
37. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: HEPATIC ENCEPHALOPATHY, ANEMIA, CHRONIC KIDNEY DISEASE, AORTIC STENOSIS		38. INJURY? NO	39. INJURY AT WORK?	40. MANNER OF DEATH NATURAL DEATH	
		41. TIME OF DEATH 13:20	42. WAS AN AUTOPSY PERFORMED? NO	43. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?	
TO THE BEST OF MY KNOWLEDGE, THE INFORMATION ABOVE IS CORRECT AND THE DEATH OCCURRED DUE TO THE CAUSE(S) AND MANNER STATED.		44. NAME OF PERSON COMPLETING CAUSE OF DEATH JAMES, PATRICK, NICOLAI			45. DATE CERTIFIED 12/05/2018
46. CERTIFIER'S ADDRESS 7740 N ORACLE ROAD, TUCSON, AZ, 85704					

Date Registered: 12/06/2018

Date Issued: 12/12/2018

VS-49 Rev 12/2017



This is a true certification of the facts on file with the Arizona Department of Health Services, Bureau of Vital Records, PHOENIX, ARIZONA
Revised 07/2016

Krystal Colburn
KRYSTAL COLBURN
ASSISTANT STATE REGISTRAR



J1418910

This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE