DOUGLAS COUNTY, NV

2021-967202

05/11/2021 09:46 AM

Pgs=4

Rec:\$40.00 Total:\$40.00 NICHOLE L HIFKO



| APN# 1519-30-661-018 |
|---|
| Recording Requested by/Mail to: |
| Name: Elise Sierpien |
| Address: 13732 Whispering land |
| City/State/Zip: Sterling heights M. 48312 |
| Mail Tax Statements to: |
| Name: Elise Sierpier |
| Address: 13732 Whispering lane |
| City/State/Zin/Stan/Ima herchts Mr 483/2 |

| Death of joint Fereint | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| Title of Document (required) | | | | | | | | |
| (Only use if applicable) | | | | | | | | |
| | | | | | | | | |
| The undersigned hereby affirms that the document submitted for recording | | | | | | | | |
| DOES contain personal information as required by law: (check applicable) | | | | | | | | |
| ✓Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5) | | | | | | | | |
| Judgment – NRS 17.150(4) | | | | | | | | |
| Military Discharge – NRS 419.020(2) | | | | | | | | |
| | | | | | | | | |
| Elise Sreipier | | | | | | | | |
| Signature | | | | | | | | |
| Elise Sierpien | | | | | | | | |
| Printed Name | | | | | | | | |

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

| APN: 1319-30-631-018 | | | | | | |
|--|---|--|--|--|--|--|
| RECORDING REQUESTED BY: | | | | | | |
| Elise Sierpien | \ \ | | | | | |
| | \ \ | | | | | |
| AFTER RECORDATION, RETURN BY MAIL TO | | | | | | |
| Elise Sierpien 13732 Whispermy Jane Sterling heights, M. 48312 | | | | | | |
| | | | | | | |
| AFFIDAVIT – DEATH O | SPACE ABOVE THIS LINE FOR RECORDER'S USE FLOUNT TENANT | | | | | |
| < < | P JOHNI TENANI | | | | | |
| STATE OF MICHIGAN)) ss: | | | | | | |
| COUNTY OF) | | | | | | |
| Elise Sierpien, being 18 years or over, being first duly sworn, o | leposes and says: | | | | | |
| The decedent mentioned in the attached certified copy of Certificate of Death, is the same person as John F. Lobdell named as one of the parties in that certain Grant, Bargain, Sale Deed dated February 26, 1992, executed by Jack K. Sievers, a married man as his sole and separate property, to John F. Lobdell, and Elise Lobdell, now known as Elise Sierpien (surviving tenant), husband and wife as joint tenants with right of survivorship, and recorded on February 28, 1992, in Book 292, at Page 4745, Document No. 272108 of Official Records of Douglas County, State of Nevada, covering the following described real property in said County, State of Nevada: | | | | | | |
| SEE EXHIBIT "A" ATTACHED HERETO AND MA | ADE A PART HEREOF. | | | | | |
| A.P.N. 1319-30-631-018 | | | | | | |
| Dated: 3/23/2-1 | / /0 | | | | | |
| Ell | se Sierpien | | | | | |
| Elise Sie | pien V | | | | | |
| State of Michigan) ss. | | | | | | |
| County of Livingstm) ss. | | | | | | |
| Subscribed and sworn to (or affirmed) before me on the Elise Sierpien, proved to me on the basis of satisfactory eviden | ris 23 day of MAYCH, 2021, by the to be the person(s) who appear before me. | | | | | |
| Motory Public + Hushway | , | | | | | |
| | | | | | | |
| JAMIE L HARTMAN Notary Public - State of Michigan County of Livingston My Commission Expires Jan 13, 2026 Acting in the County of | | | | | | |

EXHIBIT "A"

Timeshare estate comprised of:

- PARCEL 1: An undivided 1/51st interest in and to that certain condominium estate described as follows:
 - (A) An undivided 1/26th interest as tenants in common, in and to the Common Area of Ridge Crest condominiums as said Common Area is set forth on that condominium map recorded August 4, 1988 in Book 848 of Official Records at Page 711, Douglas County, Nevada, as document No. 183624.
 - (B) Unit No. 209 as shown and defined on said condominium map recorded as Document No. 183624, Official Records of Douglas County, State of Nevada.
- PARCEL 2: A non-exclusive easement for ingress and egress for use and Enjoyment and incidental purposes over, on and through the Common Area as set forth in said condominium map recorded as Document No. 83624, Official Records of Douglas County, State of Nevada.
- PARCEL 3: An exclusive right to the use of a condominium unit and the non-exclusive right to use the real property referred to in subparagraph (A) of Parcel 1, and Parcel 2 above, during one "USE WEEK" as that term is defined in the Declaration of Timeshare Covenants, Conditions and Restrictions fur the Ridge Crest recorded April 27, 1989 as Document No. 200951 of Official Records, Douglas County, State of Nevada (the "CC&Rs"). The above described exclusive and non-exclusive rights may be Applied to any available unit in The Ridge Crest project during said "USE WEEK" as more fully set forth in the CC&R's.

APN 1319-30-631-018

CERTIFICATION OF VITAL RECORD

SACRAMENTO COUNTY

SACRAMENTO, CALIFORNIA

| | CERTIFICATE OF DEATH | | | | | | 3200534004590 | | | |
|---|--|--|--|-------------------|-----------------------------|----------------------------------|---------------------------|----------------------|--|--|
| STATE OF ALLERANDER USE BLACK AIX CAMY IN GRASHES, MINTERUTS OR ALTERATIONS STATE FILE NUMBER STATE FILE NUMBER STATE FILE NUMBER | | | | | | | LOCAL REGISTRATION NUMBER | | | |
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| 3 | AND ALSO MORREYS INCOME TO SAN TELESCOPE SAN | | | 2/1967 | ″ 38 | Months Days | Hours L | MALE MALE | | |
| SS | 9 BIATH STATE-FOREIGN COUNTRY 10 SOCIAL SECURITY NU | MBER 11 EVERING | S ARVED FORCES? | | | 7 DATE OF DEATH IN | nvactoryy 6. | HOUR (24 Hours) | | |
| 뜐 | NY ==================================== | 0 X YES | MO UNK | DIVOR | | 06/07/2005 | | 1059 | | |
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| E | BACHELOR'S YES | ction, employment agents | I 10 WE | ARS IN OCCUPATION | | | | | | |
| 띰 | 17. USUAL OCCUPATION Type of work for most of ISS. DO NOT USE RI | ETURED 18 1 | COMPUTERS | | ery exore : road constru | Caci, empoyment again. | (, etc.) 19 1E | 5 | | |
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| A 55. | CR/RES | > | 1 | OT EMBA | LMED | | - 1 | _ | | |
| FUNERAL LOCAL R | 44 NAME OF FUNERAL ESTABLISHMENT | 45 LICENSE NUMBER 46 SIGNATURE OF LOCAL REGISTRAR | | | | , / . > | - | manipolicayy | | |
| 52 | NAUTILUS SOCIETY | FD 1 | | | 1. I washir | FOTHER THAN HOSPIT | | 3/2005 AM | | |
| ų. | MERCY FOLSOM HOSPITAL | | 102 0 | IP X ERVO | | | ~g ∏De | cedent's Other | | |
| PLACE OF DEATH | TON COUNTY 105 FACILITY ADDRESS OF | H LOCATION WHERE FOU | ND (Stree) and number or le | , , | <u> </u> | 106. CITY | ALTC LING | | | |
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| | In death] (B) | | / | - | | (81) | | SY PERFORMED? | | |
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| EAT | leading to cause (C) | | | | | (CI) | 110 AUTO | PSY PERFORMED? | | |
| CAUSE OF DEATH | CAUSE (disease or in uny that | | | | - | ion | | OEYERN NING CAUSE? | | |
| AUS | inhated the events (D) resulting in death) LAST | | | | | 100 | X YE | | | |
| and the same | 112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BL | IT NOT RESULTING IN TH | E UNDERLYING CAUSE GI | VEN IN 107 | - | | | | | |
| | | | | | | | | | | |
| | 113 WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 10 | 7 OR 1127 (IT yes, I-ta type o | t operation and date.) | / | / | | YES T | RO UNK | | |
| - Z | | SIGNATURE AND TITLE | OF CERTIFIER | <i></i> | | 118 LICENSE N | OMBER 117 C | DATE mm/dt/ccyy | | |
| PHYSICIAN'S CERTIFICATION | AT THE HOUR, CATE, AND PLACE STATED FROM THE CAUSES STATED Decedent Atlanded Since Decedent Last Seen A Ivo | The Parks of the P | The state of the s | | | - 1 | | | | |
| HYSIC THE | (A) rom/dd/ccyy (B) mm/dd/ccyy 118 | TYPE ATTENDING PHYS | ICIANS NAME, MAILING A | DDRESS, ZIP CODE | | | | | | |
| <u>* 8</u> | | | | | | T de numme ne | | 400 110110 10411 | | |
| | MANNER OF DEATH NEW OPPOSES DEATH OCCUPRED AT THE HOUP DATE AND MANNER OF DEATH Natural Accident Horse de | Suicide X Pandio | | YES | NO | UNK IZI NGONY DA | TE HUNGOCKY | 122 HOUR (24 HOUR) | | |
| ≥ | 123 PLACE OF INJURY (a.g., home, construction sits, wooded area, stc.) | | | | | | | | | |
| 8 N | | | | | | | | | | |
| 30 | 123 PLACE OF INJURY (a.g., home, construction sits, wooded area, sitc.) 124 DESCRIBE HOW INJURY DOCURRED (Events which resurred in right) 125. LOCATION OF INJURY (Street and number, or location, and city, and ZIP) | | | | | | | | | |
| CO 125. LOCATION OP INJURY (Street and number, or location, and CVP) | | | | | | | | | | |
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| 3 | OSOS/2005 BILLY GUILLOT, DEPUTY CORONER | | | | | | | | | |
| STA | TRAN | E | | | | FAX AUTH. | 6280 | CENSUS TRACT | | |
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CERTIFIED COPY OF VITAL RECORD STATE OF CALIFORNIA, COUNTY OF SACRAMENTO

STATE OF SACIFORNIA, GOSTOT OF SACIAMENT

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Sacramento County Clerk/Recorder.

DATE ISSUED:

MAR 1 0 2021



Dorna allred

DONNA ALLRED, COUNTY CLERK-RECORDER
SACRAMENTO COUNTY, CALIFORNIA

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the County Clerk/Recorder

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