	Rec:\$40.00 Total:\$40.00 DAVID FISHER	2021-975555 10/15/2021 11:40 AM
APORTION OF	MANAGER STREET	Pgs=5
APORTON OF APN# 1319-30-643-029	00143942202109755650	050054
Recording Requested by/Mail to:	KAREN ELLISON, RECO	RDER
Name: DAUID FISHER	\ \	
Address: 1320 EAGLE RIDGE RD	\ '	\
City/State/Zip: OAK HARBOR, WA 98277	_	
Mail Tax Statements to:		\
Name: David Fisher		
Address 1320 Eagle Ridge Rd		
Address 1320 Eagle Ridge Rd  City/State/Zip: Dak Harbor, WA 98277		
	<del>                                     </del>	
AFFIDAUD OF DEA	9784	
Title of Document (required)		
(Only use if applicable)		
The undersigned hereby affirms that the document submitted DOES contain personal information as required by law: (che		
Affidavit of Death – NRS 440.380(1)(A) & NRS	40.525(5)	
Judgment – NRS 17.150(4)		
Military Discharge NR\$419.020(2)		
May Cla		
DAVID FISHER		
Printed Name		

This document is being (re-)recorded to correct document #\_

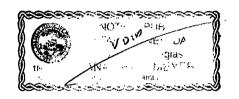
DOUGLAS COUNTY, NV

\_\_\_\_\_, and is correcting

## AFFIDAVIT OF DEATH OF JOINT TENANT

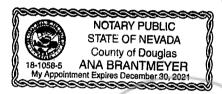
	144100
STATE OF_	NEVADA SS
COLINTY O	F DOUGLAS
COOMITO	
BEFO	ORE ME, the undersigned Notary Public, personally appeared,
<u>DAVI</u>	n FISHER, "Affiant", who upon being duly sworn, deposes and
states upon h	is or her oath or affirmation, the following: "AKA DAUE FISHE
1.	My name is <u>NAVIN FISHER</u> and I reside at 320 EAGUE RIOGE RO
. /3	320 EAGUE PIOGERO
·	
2.	I owned real property located in DOUGLAS County, State of
	such tour property recuted in
	NEUAOA , described as follows:
•	See Attached Legal Description.  Exhibit 1804  See Attached Legal Description.  Title deed is recorded in Book 1002  Page 14403 in the office of
	Title deed is recorded in Book 1002, Page 14403 in the office of
	the register of deeds in the county and state aforesaid# 55639/
3.	TULIS FISHER, my joint tenant identified above, departed this life on the 25 day of, 20_15. A copy of the death certificate of
	this life on the 25 day of 10/19, 20/13. A copy of the death
	celtificate of is attached.
4.	On the date of the death of JULIE FISHER, the above
	On the date of the death of TUHE FISHER, the above described real estate was owned by TUHE FISHER and
	DAUE FISHER, as joint tenants and the joint tenancy
	had not been severed by any act of the parties or by operation of law.
5.	Affiant is the sole surviving joint tenant of the property described above.
٥.	Attiant is the sole surviving joint tenant of the property described above.
	=T/4
Dated	this the 15 114 day of 600 1880, 20 21.
	Affiant
	DAVID FISHER
	Tepro to 1

SWORN TO AND SUBSCRIBED before me this the 15th day of October. 20 2(\_.



NOTARY PUBLIC PROTECTION

My Commission Expires: Describer 30 7021



An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/50th interest in and to Lot 28 as shown on Tahoe Village Unit No. 3-13th Amended Map, recorded December 31, 1991, as Document No. 268097, rerecorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 1 through 50 (inclusive) as shown on said map; and (B) Unit No. 24 as shown and defined on said map; together with those easements appurtenant thereto and such easements described in the Fourth Amended and of Time Conditions Declaration Share Covenants, Restrictions for The Ridge Tahoe recorded February 14, 1984, Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase Six, recorded December 18, 1990, as Document No. 241238, as amended by Amended Declaration of Annexation of The Ridge Tahoe Phase Six, recorded February 25, 1992, as Document No. 271727, and as described in the Recitation of Easements Affecting The Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest, in for one week each year in accordance with said Lot 28 only, Declarations.

A portion of APN: 1319-30-643-029

REQUESTED BY
Stewart Title of Douglas County
IN OFFICIAL RECORDS OF
DOUGLAS CO. MEYADA

2002 OCT 31 AM 10: 48

LINDA SLATER
RECORDER

S 15 PAID BLOEPUTY

0556392 BK1002PG14406

## STAVED BOAT OF BOAT

## ECERTIFICATION OF VITAL RECORD

## **COUNTY OF AMADOR**

**JACKSON, CALIFORNIA 95642** 

3052015105821			CERTIFICATE OF DEATH STAIL OF CALLI LOWAR USE BLACK PAK ONLY NO FANSINES, WHIFFOUTS OR ALTERATIONS WHITE AREA WASON			3201503000164			
	STATE FILE NUMBER  1 NAME OF DECEDENT- FIRST (Given)  2 MIDDL		2 MIDDLE	DEACK DAK DNLY NO FRASURES WINTFOURS OR ALTERATIONS VS-1 (AFRY 3/06)  LC  3. LAST (Family)			LOCAL REGISTRATION	LOCAL REGISTRATION NUMBER	
DECEDENT'S PERSONAL DATA	JULIE		ANN			FISI	HER		
	AKA. ALSO KNOWN AS - Include 'Ull A	KA (FIRST MIDDLE LAST			12/16/	1960	77 5 AGE Y-3 L		NOTER 14 HOUPS 6 SEX
	9 BIRTH STATE FOREIGN COLINTRY CA	10 SOCIAL SECURITY N		EVER IN U.S. ARMED FO	<u> </u>	MARRIED	SRDP* sz "ma zł Joan"	7 DATE OF DEATH rim d 05/25/2015	2015
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DEC	17 USUAL OCCUPATION - Type of wor		HETIRED					on employment agency en	19 YEARS IN OCCUPATION
USUAL RESIDENCE	70 DECEDENT'S RESIDENCE (Street and number or occurrence)								
	4001 RESERVATION ROAD			E 1 23 ZIP CODE 24 YEARS IN COUNTY			Y 35 STATE/FOREIGN	COUNTRY	
- FES CK	IONE		ADOR		95640	1	25	CA	
INFOR-	75 INFORMANT'S NAME RELATIONSHIP  27 INFORMANT'S MAILING ADDRESS (Street and number of your fount, state and zp)  28 DAVID FISHER SR, HUSBAND  27 INFORMANT'S MAILING ADDRESS (Street and number of your fount, state and zp)  28 DAVID FISHER SR, HUSBAND								state_andzp)
_	28. NAME OF SURVIVING SPOUSE SP	RDP FIRST	. 29. MHODLE			30 LAST (BIRTH	The contract of the contract o	\	
SRDP	31 NAME OF FATHER PARENT-FIRST		32 <b>W</b> IDDLE			33 LAST HARTMA	\NI		34. BIRTH STATE
SPOUSE/SRDP AND PARENT INFORMATION	35 NAME OF MOTHER PARENT-FIRS	<del>τ</del>	36 MIDDLE	$\leftarrow$	\.	37 LAST BIRTH			38 BIATH STATE
-	BARBARA  19. DISPOSITION DATE: mm-dd/cbyy	40" PLACE OF FINAL DISPOS	ANN	AVID EISHE	D SD	SHIELDS	5		CA
ECTOR	05/29/2015	4001 RESERVA	TION RO	AD, IONE, C	A 95640	D <sub>10</sub>			Luciona
AL DIR L REGI	CR/RES		1	NOT EMBA	No.				+3. LICENSE NUMBER
FUNERAL DIRECTOR/ LOCAL REGISTRAR	DANERI MORTUARY	Y Y	The second line of the second	D1636	796	ERLY L. C	100	ĘŢ	17 DATE mm dd ccyy 05/29/2015
	101 PLACE OF DEATH OWN RESIDENCE				102 IF H	USPITAL SPECIF		DITHER THAN HOSPITAL, S	V Decements
PLACE OF DEATH	164 COUNTY AMADOR	4001 RESERV		7%	1 12mper 34 lo			IONE	A dame
	107 CAUSE OF DEATH	Unter the manual events in tustion and second or the	sases nures fritor	" mp (th) shake com	r huser fleath	CO NOT enter fer	anua iminis such	Triver forual floweren	SE PEATH REPORTED TO COHONERS
	IMMEDIATE CAUSE A SPONT final disease or condution resulting					\		MINS.	C2015-043
	in death: 8. Sequentians, list							ar ar	69 BIOPSY PERFORMED™
OF DEATH	conditions, if any eading to cause on Line A. Enter UNDERLYING		·		$\top$			cn	110 AUTOPSY PERFORMED?
JSE OF	CAUSE (disease or noury that nitrated the events (D)	<del></del>			-	-		חם	X YES Y. SEDIN DETERMINANCE CAUSE
CAL	resulting in death LAST  112 OTHER SIGNIFICANT CONDITION	S CONTRIBUTING TO DEATH B	UT NOT RESULTING	G IN THE UNDERLYING	CAUSE GIVEN	IN 107			X YES NE.
-	NONE  113 IVAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? Noves 1st type of operation and date.  113 IVAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? Noves 1st type of operation and date.								
	NO		7 OR 112 11 (483.11	st type of operation and	uare.	/			X vo
ATION	114 LIDERTIEV THAT TO THE BEST OF MY KN AT THE HOUR ITATE AND A ACE STATED FR Decement Attended Single	ICWLEDGE DEATH FOCTURARE OM FHE CALISES STATED Decedent Last Seen Alive	5 SIGNATURE AN	D TITLE OF CERTIFIER				116 LICENSE NI ME	ER 117 DATE mmdd ccyy
PHYSICI CERTIFICA	A) mm/dd/ccp (B)	. ,	3 TYPE ATTENDIN	NG PÄYSICIAN'S NAME	MAI. ING AD	DRESS ZIP CODI	E		
- 5	THAT IN MY DANGED DEATH			ROM THE PAUSES STATED	Gud 7.	120 INJURE		121 INJURY DATE	эт ад то.у 122. HOUR (24 нашя)
<u>,</u>	MANNER DE CESTH X Natural 1	Aprilent Him Jack   onstruction site   wooded ireal e	ethous [	Tipora	18.0 · · · · · · · · · · · · · · · · · · ·	YES .	<u> </u>	<u>'  </u>	
ISE ON	124 DESCRIBE NOW INJURY OCCURRIFD (highers which is suited in num)								
CORONER'S USE ONLY									
CORO	175 + OCATION OF INJURY iStreet and number or location, and city, and zip)								
1	126 SIGNATURE OF CORONER DEP BRANDON CONE	UTY CORDNER	Ę.	127 DATE 707 05/27/20		)		EPUTY COR	ONER
STA	TE A B	C D	E			Y Nama i arah 1 maja 1 kilik darah		FAX AUTH.	CENSUS TRACT
-			<u>t</u>		*01000	1002949403*			

CERTIFIED COPY OF VITAL RECORDS STATE OF CALIFORNIA, COUNTY OF AMADOR

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

DATE ISSUED (1 / 1 / 2015



Kimberly J Grady

Kimberly L. Grady

Amador County Clerk-Racorder

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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