DOUGLAS COUNTY, NV

2021-977136

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VACATION OWNERSHIP TITLE AGENCY

KAREN ELLISON, RECORDER

A portion of: 1319-30-721-001 Escrow No. 20213178

Recording Requested By:

Vacation Ownership Title Agency

Mail Tax Statement to: Holiday Inn Club Vacations Inc. 9271 So. John Young Parkway Orlando, FL 32819

When Recorded Mail to: Wilson Title Services, LLC 4045 S. Spencer Street, Suite A62 Las Vegas, NV 89119

AFFIDAVIT – DEATH OF JOINT TENANT (Title of Document)

(Only use if applicable)
The undersigned hereby affirms that the document submitted for recording contains personal
information as required by law: (check applicable)
X Affidavit of Death of Joint Tenant – NRS 440.380(1)(A) & NRS 40.525(5)
Judgment – NRS 17.150(4)
Willitary Discharge = NNS 419.020(2)
Ma (A) Simpature
Signature
Channel Hannel
Shanna Haney Printed Name
<u></u>
This document is being (re-)recorded to correct document #, and is
correcting
Δ.
This page added to provide additional information required by NRS 111.312 Sections 1-2.
(Additional recording fee applies)

This cover page must be typed.

Recording Requested By: Holiday Inn Club Vacations Incorporated 9271 S. John Young Pkwy. Orlando, FL 32819

After Recording Mail To: Wilson Title Services, LLC 4045 S. Spencer Street, Suite A62 Las Vegas, NV 89119

Send Subsequent Tax Bills To: Holiday Inn Club Vacations Incorporated 9271 S. John Young Pkwy. Orlando, FL 32819

Escrow: 20213178 APN: 1319-30-721-001

AFFIDAVIT - DEATH OF JOINT TENANT

ANN HERTZ, aka D. ANN HERTTZ, of legal age, being first duly sworn, deposes and says:

- 1. That JOEL R. HERTZ, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as JOEL R. HERTZ named as one of the parties in that certain GRANT, BARGAIN, SALE DEED dated April 9, 2004 executed by Sunterra Ridge Pointe Developments, LLC, a Delaware limited company to Joel R. Hertz and D. Ann Hertz, husband and wife as joint tenants with right of survivorship, recorded as Instrument No. 0610525, on April 19, 2004 in Book 0404, Page 08293, of Official Records of Douglas County, Nevada, covering the following described property situated in Douglas County, State of Nevada:
- 2. The real property subject hereof is situated in Douglas County, State of Nevada, bounded and described as follows:

See Exhibit 'A' attached hereto and by reference made a part hereof.

3. That the undersigned affiant, ANN HERTZ, is the surviving spouse of the named decedent.

I, <u>ANN HERTZ</u>, 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.

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DATED this	· ·
Signature ANN HERTZ	
STATE OF: Klenois	
STATE OF: <u>Seatt</u> ss	
SUBSCRIBED AND SWORN before me this 7th day of June ,20 & by ANN HERTZ. Land Land	<u>a/</u> ,
Official Seal Diane L Andrews Notary Public, State of Illinois My Commission Expires 6/23/2022	

CERTIFICATION OF VITAL RECORD

COUNTY OF ORANGE

HEALTH CARE AGENCY

1200 N. MAIN STREET, SUITE 100-A SANTA ANA, CALIFORNIA 92701

		20161109	est de au at a	439	– USE		STATE OF CALI / NO ERASURES.						CAL REGISTRA	de plate			
STATE FILE NUMBER 1. NAME OF DECEDENT- FIRST (GWan)					2. MIDDLE 3. LAST (Femily)								CAL MEGISTRAI	ION NOMBI	2 H	-	
DATA	JOEL				RICHARD HERTZ						<u> </u>	ER ONE YEAR					
ONAL DA	AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)							04/11/		7	AGEYRA 79	Months	IF LINDER 2 Hours	Minutes	e, sex M		
PERSC	9. BIRTH STATE/FOR	TH STATE/FOREIGN COUNTRY 10. SOCIAL SECURITY NU 2917				11. EVER IN U	S. ARMED FO						e of death m 28/2016	m/dd/ccyy	8. HOUR 215	(24 Hours) 5	
DECEDENT'S PERSONAL	15. EUCATION - Refrest Leventriagne Large State (Large St																
2	17. USUAL OCCUPATION - Type of work for most of life, DO NOT USE RETIRED PROFESSIONAL FARM MANAGER 18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment of the construction of											picyment agency	, etc.) 1M	57	DOCUPATION		
Ж	20. DECEDENT'S RESIDENCE (Street and number, or location) 13 OAKVIEW DRIVE																
USUAL	21. CITY 22. COUNTY/PROVINCE 25. ZIP CODE 24. YEARS IN COUNTY												GN COUNTR	Ϋ́			
												LLINOIS	wn, state and	izip)			
	BE DOROTHY ANN HERTZ, SPOUSE 13 OAKVIEW DRIVE, MONTICELLO, IL 61896																
AND	28. NAME OF SURVIVING SPOUSE/SRIDP-FIRST DOROTHY			ANN	1				FIELD		١.						
SPOUSE/SHDP AND PARENT INFORMATION	31, NAME OF FATHI	ER/PARENT-FIRS	अ		SZ. MIDDLE	7 1 17 27 17			33, LAST HERT	Z	W. St. A.	1 7	4	14	34. BIRTH		
POUSE TENT I	35. NAME OF MOTH	1.44	IST		36. MIDDLE	V - 40, 345			37. LAST (E		(E)			38. BIRTH STATE			
_	MARJORY 38, DISPOSITION DA	2 /	40. PLACE OF FIN	VAL DISPOS	ELMIN		E OF D	OROT	VAUG		RTZ		1	211,172 11,173	IOWA		
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AL DIR L'REGI	CR/TR/RE	s				▶ NOT	EMBA	MED			(f-alodi),		99 - A.		6		
FUNERAL DIRECTOR/ LOCAL REGISTRAR	44. NAME OF FUNERAL ESTABLISHMENT THE OMEGA SOCIETY					45. LICENSI FD128	O I		G. HAI				47: DATE mm/del/coyy 06/03/2016				
<u>.</u>	101. PLACE OF DEA		MEDICAL	CENTE	P			102. IF	HOSPITAL, SE	The property	E 103.	IF OTHER Hospico	THAN HOSPITA Name Home	AL, SPECIFY	ONE Decedent's	Other	
LACE OF DEATH	104. COUNTY ORANGE	JLOD, L	105. FACILITY	ADDRESS C	R LOCATION		ND (Street and	number, or	location)				108. CITY ANAHE		111		
	107. CAUSE OF DE	ATH	Enter the chain of e	wents disc	assa, inturkas,	or complication	s that direct	y caused des	th. DO NOT en	ter terminal	events such		Time Interval Between Onset and Deat	reem 106. DEA	STH REPORTED	TO CORONER?	
	es cordes arroid, respiratory lenest, driventrouler fibrillation without showing the estadogy. DO NOT ABBRINATE. IMMEDIATE CAUSE: (N SHOCK Group fibrillation of										Ĭŝ	HOURS	TU	YES REFERENCEMENT	X NO		
	condition resulting in death) (9) ACUTE CARDIOPULMONARY ARREST										(en)	109.8	OPSY PERF				
EATH	Sequentially, list conditions, if any,					ZEANEIDE							HOURS		JTOPSY PER	X NO	
SAUSE OF DEATH	on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events	<u> </u>								HOURS		YES D IN DETERM	X NO				
CAUS	resulting in death) LAST											HOURS YES NO					
	113. WAS OPERATION PERFORMED FOR ANY CONDITION IN THE 107 OR 1127 (I) Yes, list type of operation and date.) 114. WAS OPERATION PERFORMED FOR ANY CONDITION IN THEM 107 OR 1127 (I) Yes, list type of operation and date.) 115. WAS OPERATION PERFORMED FOR ANY CONDITION IN THEM 107 OR 1127 (I) Yes, list type of operation and date.)																
	113, WAS OPERATION	ON PERFORMED	FOR ANY CONDITION	IN ITEM 10	OR 1127 (II	yes, list type o	f operation and	date.)	5.34	, and 1	2010-0-4		1	13A IF FEMAL	E, PREGNANT NO	IN LAST YEAR? UNK	
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PHYSICIAN'S CERTIFICATION	Decedent Attend (A) mm/dd/ccy		Decedent Last Seen A mm/dd/ccyy	Alive 11	B, TYPE ATT	SH-HOO ENDING PHYS	JRUIN I	KAJUL , MAILING	ODRESS, ZIP	CODE M	. MASH	I-HO	A26154 ORDIN F	U IDULAS	6/01/2 IN M.D	016	
는 B	05/28/2016		5/28/2016 TH DOCURRED AT THE H	3	010 W	ORANG	E AVE	# 404,	ANAHE	EIM, C	A 9280	4	21. INJURY DA				
	MANNER OF DEATH	H Natural	Accident	Homicide [Suicide		getton	Could not be determined		ES .	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	UNK	in .				
EONLY	123, PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)																
R'S US	124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in Injury)									·							
CORONER'S USE ONLY	125. LOCATION OF INJURY (Street and number, or location, and city, and zip)																
ō	126, SIGNATURE O	F CORONER / DE	EPUTY CORONER	-	<u> </u>	19 10 di	27. DATE mm	/dd/ccyy	128. TYPE	NAME, TI	LE OF CORC	NER/DE	PUTY CORONE	R			
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CERTIFIED COPY OF VITAL RECORD STATE OF CALIFORNIA, COUNTY OF ORANGE

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Vital Records Section, Orange County Health Care Agency.

June 8, 2016

lu D Hardle H-O.

ERIC G. HANDLER, MD.
COUNTY HEALTH OFFICER

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the Registrar.



EXHIBIT "A" (160)

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 1/2652nd interest in and to Lot 160 as designated on TAHOE VILLAGE UNIT No. 1 - 14th AMENDED MAP, recorded September 16, 1996, as Document No. 396458, in Book 996, at Page 2133, Official Records, Douglas County, Nevada, EXCEPTING THEREFROM that certain real property described as follows: Beginning at the Northeast corner of Lot 160; thence South 31°11'12" East, 81.16 feet; thence South 58°48'39" West, 57.52 feet; thence North 31°11'12" West, 83.00 feet; thence along a curve concave to the Northwest with a radius of 180 feet, a central angle of 18°23'51", an arc length of 57.80 feet, the chord of said curve bears North 60°39'00" East, 57.55 feet to the Point of Beginning. Containing 4,633 square feet, more or less, as shown on that Boundary Line Adjustment Map recorded as Document No. 0463765; together with those easements appurtenant thereto and such easements and use rights described in the Declaration of Timeshare Covenants, Conditions and Restrictions for THE RIDGE POINTE recorded November 5, 1997, as Document No. 0425591, and as amended on March 19, 1999 as Document No. 0463766, and subject to said Declaration; with the exclusive right to use said interest, in Lot 160 only, for one Use Period every other year in Odd-numbered years in accordance with said Declaration.

A Portion of APN: 1319-30-712-001