

A portion of: 1319-30-724-020
Escrow No. 20213172

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)
 Affidavit of Death of Joint Tenant – NRS 440.380(1)(A) & NRS 40.525(5)
 Judgment – NRS 17.150(4)
 Military Discharge – NRS 419.020(2)

Shanna Haney Signature
Shanna Haney Printed Name

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

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: 20213172
APN: 1319-30-724-020

AFFIDAVIT – DEATH OF JOINT TENANT

DEBRA LYNN BECKER, of legal age, being first duly sworn, deposes and says:

1. That **WILLIAM E. BECKER**, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as **WILLIAM E. BECKER** named as one of the parties in that certain GRANT, BARGAIN, SALE DEED dated April 3/2002 executed by Ridge Tahoe Property Owner's Association, A Nevada non-profit corporation to William E. Becker, who erroneously acquired title as William L. Becker and Debra Lynn Becker, husband and wife as joint tenants with right of survivorship, recorded as Instrument No. 0544854, on June 17, 2002 in Book 0602, Page 5153, 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, DEBRA LYNN BECKER, is the surviving spouse of the named decedent.

I, DEBRA LYNN BECKER, 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.

DATED this 22 day of June, 20 21,

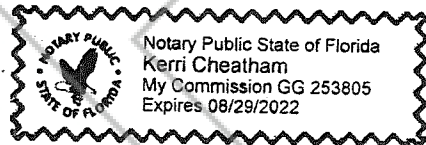
Debra Lynn Becker
Signature DEBRA LYNN BECKER

STATE OF: Florida)

COUNTY OF: Collier)^{SS}

SUBSCRIBED AND SWORN before me this 22 day of June, 2021,
by DEBRA LYNN BECKER.

Kerri Cheatham
Notary Public Signature
Printed Name: Kerri Cheatham
My Commission Expires: 8/29/2022



STAMP/SEAL

CERTIFICATION OF VITAL RECORD

VIEW PRESENCE OF WATERMARK HOLD TO LIGHT TO VIEW

STATE OF MARYLAND

Department of Health and Mental Hygiene
Division of Vital Records



320180024180000



File Number *32018MD002408*

Certificate of Death

1. Decedent's Name, AKA Name (if any) WILLIAM E BECKER DR. WILLIAM E. BECKER		2. Date of Death 01/17/2018	3. Time of Death 1627
4a. Facility Name WESTERN MARYLAND HEALTH SYSTEM		4b. City, Town or Location of Death CUMBERLAND	4c. County of Death ALLEGANY
5. Social Security Number 6590	6. Sex M	7. Age 73 YR	8. Date of Birth 04/06/1944
9. Birthplace MARYLAND		10. Address 7833 CLASSICS DRIVE	
Usual Residence of Decedent 10a. State FLORIDA		10b. County COLLIER	10c. City, Town or Location NAPLES
		10d. Inside City Limits? UNK	
		10f. Zip Code 34113	
11. Marital Status MARRIED	12. Ever in U.S. Armed Forces? NO	13. Hispanic Origin? NO	14. Race WHITE
15. Decedent's Education DOCTORATE OR PROFESSIONAL		16a. Decedent's Usual Occupation UROLOGIST	16b. Business/Industry HEALTHCARE
17. Father's Name CHARLES BECKER		18. Mother's Name Prior to First Marriage JULIA PUGLISI	
19. Surviving Spouse's Name DEBRA LYNN KULEWSKY			
20a. Informant's Name DEBRA LYNN BECKER		20b. Informant's Relationship WIFE	20c. Informant's Mailing Address 7833 CLASSICS DRIVE, NAPLES, FLORIDA 34113
21a. Method of Disposition CREMATION	21b. Place of Disposition SCARPELLI FUNERAL HOME, P.A.	21c. Date of Disposition 01/19/2018	21d. Location CRESAPTOWN, MARYLAND 21502
22a. Signature of Funeral Service Licensee ELIZABETH WHITE		22b. License No M01785	22c. Name and Address of Funeral Facility SCARPELLI FUNERAL HOME, P.A. 108 VIRGINIA AVE, CUMBERLAND, MD 21502
23a. Part I. Disease, injuries, or complications that directly caused the death PNEUMONIA			Approximate Interval Between Onset and Death -
Immediate Cause (final disease or condition resulting in death) a. Due to (or as a consequence of):			
Conditions, if any, leading to immediate cause b. Due to (or as a consequence of):			
c. Due to (or as a consequence of):			
d. Due to (or as a consequence of):			
Part II. Other significant conditions contributing to death but not resulting in the underlying cause in Part I CEREBRAL AMYLOID ANGIOPATHY			23b. Did tobacco use contribute to the cause of death? UNK
24a. Was an autopsy performed? NO	24b. Were autopsy findings available prior to completion of cause of death?	25a. Was case referred to medical examiner? NO	25b. Medical Examiner Countersignature
26. Place of Death INPATIENT		27. Manner of Death NATURAL	28a. Date of Injury
28b. Time of Injury		28c. How injury occurred	28d. injury at work?
		28e. Transportation Injury?	28f. Place of injury
28g. Location of Injury			
29a. Certifier Type CERTIFYING PHYSICIAN		29b. Signature and Title of Certifier SAAD MAHMOOD, MD	29c. License No D81070
		29d. Date signed 01/18/2018	
30a. Name of person who completed cause of death SAAD MAHMOOD		30b. Address of person, who completed cause of death 12500 WILLOWBROOK RD, CUMBERLAND, MARYLAND 21502	
For Office Use Only:			
31. Date Filed 01/22/2018	32. Registrar at Filing GENEVA G. SPARKS	33. Date Issued 01/23/2018	34. This is to certify that this is a true and correct copy of the official record on file in the office of the Maryland Division of Vital Records. Registrar's Signature <i>Geneva G. Sparks</i>

3130869

DO NOT ACCEPT UNLESS ON SECURITY PAPER WITH SEAL OF VITAL RECORDS CLEARLY EMBOSSED.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

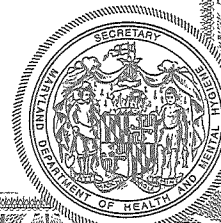


EXHIBIT "A"

(34)

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/38th interest in and to Lot 34 as shown on Tahoe Village Unit No. 3 - 13th Amended Map, recorded December 31, 1991, as Document No. 268097, re-recorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 001 through 038 (inclusive) as shown on that certain Condominium Plan recorded June 22, 1987, as Document No. 156903; and (B) Unit No. 019 as shown and defined on said Condominium Plan; together with those easements appurtenant thereto and such easements described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe recorded August 21, 1984, as Document No. 097150, as amended, by Documents recorded October 15, 1990, June 22, 1987 and November 10, 1987 as Document Nos. 236691, 156904 and 166130, 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 the same unit type conveyed, in Lot 34 only, for one week each year in the Prime "Season" as defined in and in accordance with said Declarations.

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