DOUGLAS COUNTY, NV

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2022-990617

its

WHITE ROCK GROUP, LLC
KAREN ELLISON, RECORDER

APN Parcel No. 1318-15-822-001 PTN

Contract No.: 000410627111

Recording requested by: White Rock Group, LLC

WHEN RECORDED RETURN TO:

White Rock Group, LLC 700 South 21st Street Fort Smith, AR 72901

AFFIDAVIT OF DEATH

STATE OF FLORIDA

COUNTY OF ORANGE

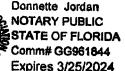
The undersigned Affiant, of legal age being first duly sworn, deposes and says: THAT <u>KENNETH</u> <u>SPRAGUE</u>, the decedent mentioned in the attached certified copy of Certificate of Death, was the same person as <u>KENNETH E SPRAGUE</u>, named as one of the parties in that certain deed executed by Wyndham Vacation Resorts, Inc., to Patricia A. Fail and Kenneth E, Sprague Joint Tenants With The Right of Survivorship, , recorded as instrument No. 695637 on February 23rd, 2007 of Official Records in the Office of County Recorder of Douglas County, State of Nevada.

Legal Description of Property:

A 308,000/183,032,500 undivided fee simple interest as tenants in common in Units 12101, 12102, 12103, 12201, 12202, 12203, 12302, 14102, 14103, 14104, 14202, 14203, 14204 and 14302 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
entirety by this/reference. /
Beet
Affiant: Clara Luz Binet
ACKNOWLEDGEMENT
STATE OF Florida)
COUNTY OF Orange)
Sworn to before me by means of X physical presence or online notarization this 19th day of
July, 2022 by Clara Luz Binet. He or she is personally known to me.
CICNATUDE
SIGNATURE:
Printed Name: Donnette Jordan SARY 40. Donnette Jordan

Printed Name: Donnette Jordan Notary Public, State of Florida My Commission Expires 03/25/2024



Kansas Department of Health and Environment Office of Vital Statistics

CERTIFICATE OF DEATH

115-2020-08117

<u> </u>					<u></u>		State File Number				
1. Decedent's Legal Name (First, Middle, L	ast)	2. Sex	3. Date 0	f Death (Month, Day, Year)	4. S	ocial Security Num	ber	5. Date	Filed By St	ate Registrar	
KENNETH SPRAGUE		MALE	02/20/2020			8855	04/21/2020			:	
6. Last Name Prior to First Marriage.	7a. Date Of Birth	7b, Age					04/21/2020 9. Decedent Ever In U.S. Armed Forces				
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	03/21/1930	90 YEAI	R(S)	LONE ELM, KANSA	AS.		Y	Ś	ars .	illiani di seriesa de la composición d Participado de la composición de la co	
10a, Place Of Death	10b. Fac	cility Name (If Not Ins	titution, Street	And Number)			10c. County	Of Death	San Transport	10d. Zip Code	
	# 	eseal, saetiliilii.					i Serron i i i i	<u>.</u>		1000	
INPATIENT 10e. City or Town Of Death	KU ME	DICAL HOSPITA		Inna Delay to Elect Manualman		13a Baddana	JOHNSON			66160	
10e. City or Town Of Death 11. Marital Status 12. Surviving Spouse (Name Prior to First Marriage) 13a. Residence Street Address											
KANSAS CITY WIDOWED 25561 SE 200 RD											
13b. State or Foreign Country 13c. County or Province 13d. City or Town							13e. Zip Code 13f. Inside City Limits				
KANSAS	ANDERSON	KI	NCAID	<u> </u>		66	66039 NO				
14. Decedent's Ancestry			15. Deced	lent's Race	24.4	Tarini Mari S	•	- N	arie – wes No		
AMERICAN			VARIETE	_		1			N	N	
AMERICAN WHITE 16; Decedent's Hispanic Origin											
NOT SPANISH, HISPANIC, LATI	NO.	areas teams		and the second	et a suet a tr	rana min	species etco - 10	Lend Control	etters to a like	and a superior	
17. Decedent's Education		18. Deced	lent's Occupat	ion	7.7	19. Decedent's	Industry	****			
	Rose : PARRILLEGO.		- N.			000 1.00	5e				
HIGH SCHOOL GRADUATE OR G		FARME		Matth - 11/0 arount Wintle Names	Clock Middle	AGRICULTU	IRE		·		
20. Pauter/Parent birui Manie (Filst, Mico	le, Last)		₹1.	Mother/Parent Birth Name	(CRSC, MIGGIE,	Last)					
ARZY SPRAGUE			НА	ZÉL BEAL							
22a. Informant's Name (First, Middle, Last) Programme Victoria	22b. Maili		treet, Number, City, State,	And Zip Code)		1	22c. Relatio	onship To D	ecedent	
to the same and					water tal					1.00	
JOEL SPRAGUE	والمراجع المستوني والمراجعة		E 200 RD,	KINCAID, KANSAS,		and the second	1	SON		igi - Salas S	
23. Method Of Disposition	24a, Place C	of Disposition	-		24b.	Location		1, 151			
BURIAL	LONE ELA	# CEMETERY	Name of the last		100	JE EI M. KANC	۸۵			*	
25. Funeral Service Licensee And License I		4 CEMETERY	- paper exercise	26. Name Of Em		NE ELM, KANS Icense Number	W2				
25. Funeral Service: Licensee And: License Number 26. Name Of Embalmer And License Number											
/e/STACEY WHITCOMB - 2761 JOHN W GATTSHALL - 3537											
27. Name And Address Of Firm FEUERE	ORN FAMILY FUN	VERAL SERVICE-	GARNETT,	219 OAK STREET PO	D BOX 408	GARNETT, K			Section Section	Telefo second og	
28, Cause Of Death Part I. Events (disea	ses, injuries, or compli	cations) that directly c	aused the dea	th.	turne e tu		Approx	mate Interva	st: Onset	To Death	
	DI LIMIT FORCE TO	Nina bite cec	ONE TO EV	(DI OGYANI			10.24				
Disease Or Condition Resulting	BLUNT FORCE TR	AUMA DUE SECO	JUD TO EX	RPLOSION			(A)				
In Dayle) RV									;		
							B)				
Conditions, if any, leading											
To cause listed on line A) UNDERLYING CAUSE (disease D)							9 .				
or Injury that Initiation the							ים			:	
events resulting in death)	N	The state of the s					"	44.4	4 (45)4 (1) (5)	ه مهردو در میردین	
Part II. Other Significant Conditions Contrib	outing To Death But No	Resulting In The Und	Jerlying Cause	Given In Part I. 2	9a. Autopsy	29b. Au	topsy Findings	Available To	o 29c.	Coroner	
/		The same of the sa				Complet	e The Cause (n Death	Cont	acted	
/		The state of the s		Y	'ES	YES			YES	r.	
	er e		in interest		- 144 - 144 - 144		41414	Jan 1.			
30. Did Tobacco Use Contribute To Death?	31.	lf Female	estate indestati	addatistic Distribut	.2009.6000	िक्षांक अक्षेत्र स	Parketter of	32. Man	nner Of Dea	th	
- FIANZAI CONAINI	1	1						. A JESTA	NE KIT	i i	
UNKNOWN 33a. Date Of Injury 331	a. Time Of Injury	33c. Injury At Work	33d How	Injury Occurred			- 100 m	ACCID	ENI		
33a. Date of Injury	A Time Or anjury	33C INJUIN AL WORK	330. HOW	nijury occurred						, in the second	
03/11/2020 7:3	34 AM	NO	GAS LIN	E EXPLOSION							
33e. Place Of Injury		27 P. T.		33f. Location (Street An	d Number Or	Rural Route, City C	or Town, State	, And Zip Co	de)	The same of the same	
RESIDENCE	بمنتهان أستن المناسم	No. 1 1987	المراجع المحاود	1826 360, MORAN			<u></u>	erie i e	بنندستهن	<u> </u>	
34a. Date Pronounced Dead	34b. Tm	e Pronounced Dead	34c. Actua	I Or Presumed Time Of De	ath	34d. Name Of	Person Pronou	ncing Death	iê "	34e. License No.	
03/20/2020	0.21 4	vit	0.21 44) -					33	VARANCE S	
03/29/2020	9:31 A	णः. 	9:31 AM	kg Tananan arang		}			ä		
35a. Pronouncing and Certifying Physician	****	35b. License No.	35c. Date	Certified 35d. Add	iress And Zip	Code Of Person Co	mpleting Caus	e Of Death	 		
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	utv di	999999	/e/RICK_L_BROCK - SPEC DEPUTY 9999999 04/17/2020 420 S 20TH PO BOX 247, FREDONIA, KANSAS, 66736								