

APN: 1319-30-618-001

Escrow No. 20234370

Recording Requested By:
Vacation Ownership Title Agency

Mail Tax Statement to:
Tahoe Summit Village
P.O. Box 4719
Stateline, NV 89449

When Recorded Mail to:
Judith Willhite
1333 E. Monroe Ave.
Orange, CA 92867

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)

Aleta Hannum Signature

Aleta Hannum 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.

A.P.N. No.:	A ptn of 1319-30-618-001
Escrow No.:	20234370
Title No.	20234370
Recording Requested By:	
Vacation Ownership Title Agency, Inc.	
Mail Tax Statement To:	
Same as Below	
When Recorded Mail To:	
JUDITH WILLHITE	
1333 E. Monroe Ave.	
Orange, CA 92867	

AFFIDAVIT – DEATH OF JOINT TENANT

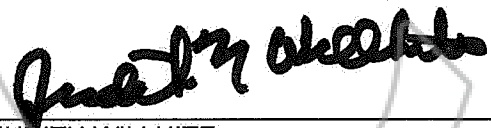
State of California)
) ss.
 County of Orange)

JUDITH WILLHITE, formerly known as Judith N. Barnes, of legal age, being first duly sworn, deposes and says:

That ROBERT A. BARNES, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as ROBERT A. BARNES named as one of the parties in that certain Grant Deed dated August 10, 1984 executed by TAHOE SUMMIT VILLAGE TIME SHARE DEVELOPERS, a Joint Venture to ROBERT A. BARNES and JUDITH N. BARNES, husband and wife as joint Tenants, recorded as Document No. 104994, on August 14, 1984 in Book 884 at Page 1212, of Official Records of Douglas, Nevada, and Re-Recorded as Document No. 105915 on August 30, 1984 in Book 884 at Page 3000 to correct the Grantor to TAHOE SUMMIT CORPORATION, a Nevada Corporation covering the following described property situated in Douglas County, State of Nevada:

SEE EXHIBIT "A" ATTACHED HERETO

Dated: 10/17/2023



 JUDITH WILLHITE

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

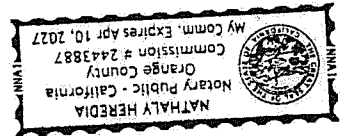
State of California
County of Orange

Subscribed and sworn to (or affirmed) before me on this Tuesday
day of October 17, 2023, by JUDITH WILLHITE

proved to me on the basis of satisfactory evidence to be the
person(s) who appeared before me.

(Seal)

Signature *JWH*



CERTIFICATE OF DEATH
STATE OF CALIFORNIA
USE BLACK INK ONLY

3-90-42-001230

LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

STATE FILE NUMBER		1A. NAME OF DECEDENT—FIRST (GIVEN)		1B. MIDDLE	1C. LAST (FAMILY)	2A. DATE OF DEATH—MO., DAY, YR.		2B. HOUR	3. SEX
		Robert		Anderson	BARNES	END JUNE 25, 1990		0530	Male
4. RACE		5. SPANISH/HISPANIC—SPECIFY		6. DATE OF BIRTH—MO., DAY, YR.		7. AGE IN YEARS	IF UNDER 1 YEAR MONTHS	IF UNDER 24 HOURS HOURS	IF UNDER 24 HOURS MINUTES
Cauc.		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		September 22, 1921		68			
8. STATE OF BIRTH		9. CITIZEN OF WHAT COUNTRY		10A. FULL NAME OF FATHER		10B. STATE OF BIRTH	11A. FULL MAIDEN NAME OF MOTHER		11B. STATE OF BIRTH
Ill.		U.S.A.		Russell Daniel Barnes		Ill.	Olive Matilda Anderson		N.Y.
12. MILITARY SERVICE?		13. SOCIAL SECURITY NO.		14. MARITAL STATUS		15. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER MAIDEN NAME)			
19 44 To 19 45 <input type="checkbox"/> NONE		-3318		Married		Judy Nygaard			
16A. USUAL OCCUPATION		16B. USUAL KIND OF BUSINESS OR INDUSTRY		16C. USUAL EMPLOYER		16D. YEARS IN OCCUPATION	17. EDUCATION—YEARS COMPLETED		
Machinist		Computer Output		NCR/MSD		50	12		
18A. RESIDENCE—STREET AND NUMBER OR LOCATION		18B. CITY		18C. ZIP CODE					
149 Fairchild Dr. #16		Mountain View		94043					
18D. COUNTY		18E. NUMBER OF YEARS IN THIS COUNTY		18F. STATE OR FOREIGN COUNTRY		20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT			
Santa Clara		13		CA		Judy Barnes - Wife			
19A. PLACE OF DEATH		19B. IF HOSPITAL, SPECIFY ONE: IP, ER/OP, DOA		19C. COUNTY		20. NAME, RELATIONSHIP, MAILING ADDRESS AND ZIP CODE OF INFORMANT			
RESIDENCE				SANTA BARBARA		149 Fairchild Dr. #16			
19D. STREET ADDRESS—STREET AND NUMBER OR LOCATION		19E. CITY		TIME INTERVAL BETWEEN ONSET AND DEATH		22. WAS DEATH REPORTED TO CORONER? REFERRAL NUMBER			
1265 SAN ANTONIO CREEK ROAD		SANTA BARBARA				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CNR-90-164			
21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C)		23. WAS BIOPSY PERFORMED?		24. WAS AUTOPSY PERFORMED?		24B. WAS IT USED IN DETERMINING CAUSE OF DEATH?			
IMMEDIATE CAUSE (A) RESPIRATORY ARREST		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (B) METASTATIC CARCINOMA LUNG				9 MOS.					
DUE TO (C)									
25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21		26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25? IF YES, LIST TYPE OF OPERATION AND DATE.							
CORONARY ARTERY DISEASE		THORACOTOMY 9/89							
1. CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		27B. SIGNATURE AND DEGREE OR TITLE OF PHYSICIAN		27C. PHYSICIAN'S LICENSE NUMBER		27D. DATE SIGNED			
		<i>Joseph Yorke</i>		G27801		6/25/90			
27A. DECEDENT ATTENDED SINCE MONTH, DAY, YEAR		DECEDENT LAST SEEN ALIVE MONTH, DAY, YEAR		27E. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS					
5/1/90		5/31/90		DR. JOSEPH YORKE, M.D. 334 S. PATTERSON AVENUE, SANTA BARBARA, CA					
1. CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		28A. SIGNATURE AND TITLE OF CORONER OR DEPUTY CORONER		28B. DATE SIGNED					
29. MANNER OF DEATH—specify one: natural, accident, suicide, homicide, pending investigation or could not be determined		30A. PLACE OF INJURY		30B. INJURY AT WORK		30C. DATE OF INJURY MONTH, DAY, YEAR		31. HOUR	
				<input type="checkbox"/> YES <input type="checkbox"/> NO					
32. LOCATION (STREET AND NUMBER OR LOCATION AND CITY)		33. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)							
34A. DISPOSITION(S)		34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS		34C. DATE MO., DAY, YEAR		35A. SIGNATURE OF EMBALMER		35B. LICENSE NUMBER	
Crem./Sea		3 Miles out to Sea Point Loma San Diego, CA		June 29, 1990		Not Embalmed			
36A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH)		36B. LICENSE NO.		37. SIGNATURE OF LOCAL REGISTRAR		38. REGISTRATION DATE			
Telophase Society of America		1273		<i>Lawrence Hart</i>		JUN 29 1990			
A.		B.		C.		D.		E.	
								F. CENSUS TRACT	

V5-11 (REV. 3-89)

MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

SANTA BARBARA COUNTY HEALTH DEPARTMENT
This is to certify that this is a true copy
of the certificate on file in this office.

FEE JUL 11 1990
PAID

Lawrence Hart, M.D.

EXHIBIT "A"
LEGAL DESCRIPTION

File Number: 20234370

All that parcel of land in the County of Douglas, State of Nevada, and being more particularly described as follows:

PARCEL 1: An undivided 1/51st interests in and to that certain condominium described as follows: (i) An undivided 1/9th interest, as tenants-in-common, in and to Lot 28 of Tahoe Village Unit No. 2, Third Amended Map, recorded February 26, 1981, as Document No. 53845, Official Records of Douglas County, State of Nevada, except therefrom Units 1 to 9; (ii) Unit No. **A** (also known as Condominium Unit No. **101**), as shown and defined on said last mentioned map, Unit Type **A** (also known as a **2-Bedroom**).

PARCEL 2: A non-exclusive right to use the real property known as The Common Area on the Official Map of Tahoe Village Unit No. 2, recorded March 29, 1974 as Document No. 72495, records of said county and state, for all those purposes provided for in the Declarations of Covenants, Conditions and Restrictions recorded September 28, 1973 as Document No. 69063 in Book 973 Page 812 of Official Records and in the Modification recorded July 2, 1976 as Document No. 1472 in Book 776 Page 87 of Official Records.

PARCEL 3: The exclusive right to use said Unit and the nonexclusive right to use the real property referred to in subparagraph (a) of Parcel One and Parcel Two above during One (1) "Use Period" within the Summer "Season" as said quoted terms are defined in the Declaration.

The above described exclusive and non-exclusive rights may be applied to any available unit in the project, during said Use Period within said Season.

TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise pertaining, and the reversion and reversions, remainder and remainders, rents, issues, and profits thereof.

A portion of APN: 1319-30-618-001

Commonly known as: Tahoe Summit Village, Unit No. 101, Unit Type A (also known as a 2-Bedroom), Summer Season, Legacy Key 280134, Stateline, NV 89449