

APN: 1319-30-645-003
Escrow No. 20233959

Recording Requested By:
Vacation Ownership Title Agency

Mail Tax Statement to:
Ridge Tahoe P.O.A.
P.O. Box 5790
Stateline, NV 89449

When Recorded Mail to:
Sandra D. Dye
3152 Willow Haven Ct.
Thousand Oaks, CA 91362

AFFIDAVIT – By Surviving Spouse Succeeding to Title to Community Property
(Title of Document)

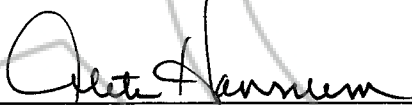
------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

Affidavit – By Surviving Spouse Succeeding to Title to Community Property

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)



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 1319-30-645-003
Escrow No.:	20233959
Recording Requested By:	
Vacation Ownership Title Agency, Inc.	
Mail Tax Statement To:	
Ridge Tahoe P.O.A.	
P.O. Box 5790	
Stateline, NV 89449	
When Recorded Mail To:	
SANDRA D. DYE	
3152 Willow Haven Ct.	
Thousand Oaks, CA 91362	

AFFIDAVIT

By Surviving Spouse Succeeding to Title to Community Property
 With Right of Survivorship (Sections 111.064 and 111.365, Nevada Revised Statutes
 A CERTIFIED COPY OF DEATH CERTIFICATE MUST BE ATTACHED TO THE AFFIDAVIT

SANDRA D. DYE, of legal age, being first duly sworn, deposes and says:

That JEFFREY LEE DYE, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as JEFFREY L. DYE named as one of the parties in that certain Grant Deed dated August 30th, 2014 executed by ROBERT P. MILEY and DELOMA J. MILEY to JEFFREY L. DYE and SANDRA D. DYE, husband and wife as Community Property (with Survivorship), recorded as Document No.849681, on September 22, 2014 in Book 914 at Page 3722, of Official Records of Douglas, Nevada, covering the following described property situated in Douglas County, State of Nevada:

The Ridge Tahoe, Cascade Building, Every Year Use, Old Account No. 42-279-15-01, HICV Account No. M6757226, Stateline, NV 89449. See Exhibit 'A' attached hereto and by this reference made a part hereof.

That she was married to JEFFREY L. DYE at the time of death of decedent. That no transfers of interest by either have occurred in regard to the herein described community property estate. That JEFFREY L. DYE did not execute a Will in conflict with Right of Survivorship set forth in the above mentioned deed. That JEFFREY L. DYE died on February 2, 2019 at Los Angeles County, California as set forth in the attached Certificate of Death.

Dated: 4/3/2023



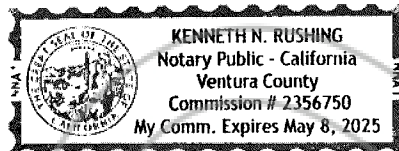
SANDRA D. DYE

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 VENTURA

Subscribed and sworn to (or affirmed) before me on this 3rd
day of APRIL, 2023, by Sandra Dye

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



(Seal)

Signature [Handwritten Signature]

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC HEALTH

3052019026020

CERTIFICATE OF DEATH

3201919005681

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS VS-1 (REV. 2008)			LOCAL REGISTRATION NUMBER			
1. NAME OF DECEDENT—FIRST (Given) JEFFREY		2. MIDDLE LEE		3. LAST (Family) DYE				
AKA, ALSO KNOWN AS—Include full AKA (FIRST, MIDDLE, LAST)		4. DATE OF BIRTH mm/dd/yyyy 10/25/1968		5. AGE Yrs. 50	6. UNDER ONE YEAR Months Days	7. UNDER 24 HOURS Hours Minutes	8. SEX M	
9. BIRTH STATE/FOREIGN COUNTRY CA		10. SOCIAL SECURITY NUMBER 8855	11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	12. MARITAL STATUS/SROP* (at Time of Death) MARRIED		7. DATE OF DEATH mm/dd/yyyy 02/02/2019	8. HOUR (24 Hours) 0757	
13. EDUCATION—Highest Level/Degree (see worksheet on back) BACHELOR		14/15. WAS DECEDENT HISPANIC/LATINO/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE—Up to 3 races may be listed (see worksheet on back) CAUCASIAN				
17. USUAL OCCUPATION—Type of work for most of life. DO NOT USE RETIRED COMPUTER FORENSICS			18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, meat construction, employment agency, etc.) BANKING AND FINANCIAL			19. YEARS IN OCCUPATION 25		
20. DECEDENT'S RESIDENCE (Street and number, or location) 3152 WILLOW HAVEN CT								
21. CITY THOUSAND OAKS		22. COUNTY/PROVINCE VENTURA		23. ZIP CODE 91362	24. YEARS IN COUNTY 50	25. STATE/FOREIGN COUNTRY CA		
26. INFORMANT'S NAME, RELATIONSHIP SANDRA DYE, SPOUSE				27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 3152 WILLOW HAVEN CT, THOUSAND OAKS, CA 91362				
28. NAME OF SURVIVING SPOUSE/SROP—FIRST SANDRA		29. MIDDLE DEE		30. LAST (BIRTH NAME) SANDLER				
31. NAME OF FATHER/PARENT—FIRST DUANE		32. MIDDLE LEE		33. LAST DYE		34. BIRTH STATE NE		
35. NAME OF MOTHER/PARENT—FIRST LINDA		36. MIDDLE FRANCES		37. LAST (BIRTH NAME) ROBERTS		38. BIRTH STATE KS		
39. DISPOSITION DATE mm/dd/yyyy 02/14/2019		40. PLACE OF FINAL DISPOSITION ETERNAL VALLEY MEMORIAL PARK						
41. TYPE OF DISPOSITION(S) BU		42. SIGNATURE OF EMBALMER NOT EMBALMED				43. LICENSE NUMBER		
44. NAME OF FUNERAL ESTABLISHMENT ETERNAL VALLEY MEMORIAL PARK MORTUARY		45. LICENSE NUMBER FD1163	46. SIGNATURE OF LOCAL REGISTRAR MUNTU DAVIS, M.D.			47. DATE mm/dd/yyyy 02/11/2019		
101. PLACE OF DEATH FREEWAY								
102. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> P <input type="checkbox"/> ER/OP <input type="checkbox"/> DCA		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> hospice <input type="checkbox"/> Nursing Home/UTC <input type="checkbox"/> Decedent's Home <input checked="" type="checkbox"/> Other						
104. COUNTY LOS ANGELES		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) NORTHBOUND 5 FREEWAY NEAR VISTA DEL LAGO ROAD				106. CITY GORMAN		
107. CAUSE OF DEATH Enter the chain of events—diseases, injuries, or complications—that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or death under anesthesia without showing the etiology. DO NOT ABBREVIATE.								
IMMEDIATE CAUSE (Final disease or condition resulting in death) (A) MULTIPLE BLUNT TRAUMATIC INJURIES		108. DEATH REPORTED TO CORONER? (A) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO RAPID 2019-00907						
Sequentially, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST (B)		109. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
(C)		110. AUTOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						
(D)		111. USED IN DETERMINING CAUSE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107. NONE								
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.) NO								
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since (A) mm/dd/yyyy Decedent Last Seen Alive (B) mm/dd/yyyy		115. SIGNATURE AND TITLE OF CERTIFIER [Signature]			116. LICENSE NUMBER	117. DATE mm/dd/yyyy		
118. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.		119. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE						
MANNER OF DEATH <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Hanging <input type="checkbox"/> Could not be determined		120. INJURED AT WORK? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/yyyy 02/02/2019	122. HOUR (24 Hours) 0750			
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.) FREEWAY								
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury) SEARCH AND RESCUE MEMBER RENDERING AID ON FREEWAY WHEN ANOTHER VEHICLE STRUCK HIM								
125. LOCATION OF INJURY (Street and number, or location, and city, and zip) NORTHBOUND 5 FREEWAY NEAR VISTA DEL LAGO ROAD, GORMAN, CA 93243								
126. SIGNATURE OF CORONER / DEPUTY CORONER EVONNE D REED		127. DATE mm/dd/yyyy 02/05/2019	128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER EVONNE D REED, DEPUTY CORONER					
STATE REGISTRAR		A	B	C	D	E	FAX AUTH.#	CENSUS TRACT

CERTIFIED COPY OF VITAL RECORD STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

This is a true certified copy of the record filed in the County of Los Angeles Department of Public Health if it bears the Registrar's signature in purple ink.



001948944

DATE ISSUED

Health Officer and Registrar

[Signature] M.D.

FEB 12 2019

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



CALOSANG01

EXHIBIT "A"

(42)

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/48th interest in and to Lot 42 as shown on Tahoe Village Unit No. 3 - 14th Amended Map, recorded April 1, 1994, as Document No. 333985, Official Records of Douglas County, State of Nevada, excepting therefrom Units 255 through 302 (inclusive) as shown on said map; and (B) Unit No. 279 as shown and defined on said map; 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 Phase Seven recorded April 26, 1995, as Document No. 360927, as amended by Amended and Restated Declaration of Annexation of The Ridge Tahoe Phase Seven, recorded May 4, 1995, as Document No. 361461, and as further amended by the Second Amendment to Declaration of Annexation of The Ridge Tahoe Phase Seven recorded on October 17, 1995 as Document No. 372905, and as described in the First Amended Recitation of Easements Affecting the Ridge Tahoe recorded June 9, 1995, as Document No. 363815, and subject to said Declarations; with the exclusive right to use said interest, in Lot 42 only, for one week each year in accordance with said Declarations.

Together with a 13-foot wide easement located within a portion of Section 30, Township 13 North, Range 19 East, MDB&M, Douglas County, Nevada, being more particularly described as follows:

BEGINNING at the Northwest corner of this easement said point bears S. 43°19'06" E., 472.67 feet from Control Point "C" as shown on the Tahoe Village Unit No. 3 - 13th Amended Map, Document No. 269053 of the Douglas County Recorder's Office;

thence S. 52°20'29" E., 24.92 feet to a point on the Northerly line of Lot 36 as shown on said 13th Amended Map;

thence S. 14°00'00" W. along said Northerly line, 14.19 feet;

thence N. 52°20'29" W., 30.59 feet;

thence N. 37°33'12" E., 13.00 feet to the POINT OF BEGINNING.

A Portion of APN: 1319-30-645-003