DOUGLAS COUNTY, NV

2024-1004525 Rec:\$40.00

Total:\$40.00

02/06/2024 12:50 PM

CHARLES & CAROL REINHART

Pas=6



Charles B. Reinhart & Carol M. Reinhart 75931 Zambezi Court Palm Desert, CA 92211

Mail Tax to same as above

Charles B. Reinhart & Carol M. Reinhart 75931 Zambezi Court Palm Desert, CA 92211



SHAWNYNE GARREN, RECORDER

APN: 1318-26-101-006 PTN

SPACE ABOVE THIS LINE FOR RECORDER'S USE

My Comm. Expires Sep 24, 2026

AFFIDAVIT - DEATH OF JOINT TENANT

Charles B. Reinhart and Carol M. Reinhart, of legal age, being first duly sworn, deposes and says:

Frank P. Miley and Lucille S. Miley are the decedents mentioned in the attached certified copy of Certificate of Deaths, and are the same persons who is named as one of the parties in that certain deed dated March 18, 1999, conveyed to Frank P. Miley and Lucille S. Miley, husband and wife and Charles B. Reinhart and Carol M. Reinhart, husband and wife all as joint tenants with right of survivorship, recorded on June 7, 1999, as Instrument No. 0469748, Official Records of Douglas County, Nevada, describing the following real property:

See Exhibit "A" attached hereto and made a part hereof Charles B. Reinhart Carol M. Reinhart

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 by Angely _ Christina February 1, 2024 , before me, personally appeared personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal. CHRISTINA LOPEZ Signature: [seal] Notary Public - California (This area for notary stamp) Los Angeles County Commission # 2418123

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 Lis Angeles)ss
County of (Angle)
On <u>Flwary 1, 224</u> , before me, <u>Christina</u> where, a Notary Public, personally appeared personally known to me (or proved to me on the basis of satisfactory evidence) to be
the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.
Signature: [seal] CHRISTINA LOPEZ Notary Public - California Los Angeles County Commission # 2418123
My Comm. Expires Sep 24, 2026

EXHIBIT "A" Legal Description

An Undivided One-Three Thousand Two Hundred And Thirteenth (1/3213) Interest As A Tenant-In-Common In The Following Described Real Property (The Real Property):

A Portion Of The North One-Half Of The Northwest One-Quarter Of Section 26, Township 13 North, Range 18 East, M.D.B. & M., Described As Follows:

Parcel Three, As Shown On That Amended Parcel Map For John E. Michelsen And Walter Cox Recorded February 3, 1981, In Book 281 Of Official Records At Page 172, Douglas County, Nevada, As Document No. 53178, Said Map Being An Amended Map Of Parcels 3 And 4 As Shown On That Certain Map For John E. Michelsen And Walter Cox, Recorded February 10, 1978 In Book 278 Of Official Records At Page 591, Douglas County, Nevada, As Document No. 17578.

Excepting From The Real Property The Exclusive Right To Use And Occupy All The Dwelling Units As Defined In The "Declaration Of Timeshare Use" As Amended.

Also Excepting From The Real Property And Reserving To Grantor, Its Successors And Assigns, All Those Certain Easements Referred To In Paragraphs 2.5, 2.6, And 2.7 Of Said Declaration Of Timeshare Use And Amendments Thereto Together With The Right To Grant Said Easements To Others.

Together With The Exclusive Right To Use And Occupy A "Unit" As Defined In The Declaration Of Timeshare Use Recorded February 16, 1983, In Book 283, At Page 1341, As Document No. 76233 Of Official Records Of The County Of Douglas, State Of Nevada, And Amendment To Declaration Of Timeshare Use Recorded April 20, 1983, In Book 483, At Page 1021, Official Records Of Douglas County, Nevada, As Document No. 78917.

Second Amendment To Declaration Of Timeshare Use Recorded July 20, 1983, In Book 783, Of Official Records At Page 1688, Douglas County, Nevada, As Document No. 84425.

Third Amendment To Declaration Of Timeshare Use Recorded October 14, 1983, In Book 1083, Of Official Records At Page 2572, Douglas County, Nevada, As Document No. 89535.

Fourth Amendment To Declaration Of Timeshare Use Recorded August 31, 1987, In Book 887, Of Official Records At Page 3987, Douglas County, Nevada, As Document No. 161309.

Fifth Amendment To Declaration Of Timeshare Use Recorded November 30, 1987, In Book 1187, Of Official Records At Page 3946, Douglas County, Nevada, As Document No. 149336.

Sixth Amendment To Declaration Of Timeshare Use Recorded March 25, 1996, In Book 396, Of Official Records At Page 3827, Douglas County, Nevada, As Document No. 383937 ("Declaration"), During A "Use Period" Within The "High Season" Within The "Owner's Use Year", As Defined In The Declaration, Together With A Non-Exclusive Right To Use The Common Areas As Defined In The Declaration. The Effect Of That Certain Document Entitled "Second Amendment To The By-Laws Of Kingsbury Crossing Owner's Association", "Third Amendment To the By-Laws Of Kingsbury Crossing Owner's Association", Recorded March 25, 1996 In Book 396, Page 3822 Of Official Records.

Subject To All Covenants, Conditions, Restrictions, Limitations, Easements, Right-OfWay Record.



County of Ventura

VENTURA, CALIFORNIA

	3052022180042	CERTIFICATE STATE OF CA LISE BLACK INK ONLY /N CERSURE VS-11 (RE'	OF DEATH	3202256003	3202256003747					
	STATE FILE NUMBER 1 NAME OF DECEDENT- FIRST (Given)	5 WIDDLE	3 LAST (Family)	LOCAL REGISTRATION	NUMBER					
DATA	LUCILLE AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)	SANDRA	4. DATE OF BIRTH mm/dd/cdyy 5, AGE Yrs	IF UNDER ONE YEAR F. Marths Days Ho	ADER 24 HOURS 6 SEX					
SONAL	9 BIRTH STATE FORBIGN COUNTRY 10, SOCIAL SECURITY	Y NUMBER 11 EVER IN U.S. ARMED I	12/10/1929 92 **GRCES7 12 MARITAL STATUS/SRDP* at Time of							
DECEDENT'S PERSONAL	CA 5179	9 YES X NO	WIDOWED ■ WIDOWED	08/03/2022	0050					
CEDEN	13 FOUCATION - "Hyser Leval Degree 14/15, WAS DESPIDENT HISPANI BACHELOR YES		X G CACCACIAIA							
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GE	20. DECEDENT'S RESIDENCE (Street and number, or ocation) 885 CALLE LA ROCHA	•								
USUAL		COUNTY PROVINCE ENTURA	23. ZIP CODE 24. YEARS IN 1	CA	OUNTRY					
INFOR-	26 INFORMANT'S NAME, RELATIONSHIP CAROL REINHART, DAUGHTER	27. NFC P.O.	HMANT'S MALING ADDRESS (Street and humbs: BOX 2414, PALOS VERD	ES PENINSULA, C	ČÁ 90274					
	28 NAME OF SURVIVING SPOUSE/SRDP"-FIRST	29 MIDOLE	30 LAST IBIRTH NAME;							
SPOUSE/SRDP AND PARENT INFORMATION	31 NAME OF FATHER/PARENT-FIRST	32 MIDOLE	13. AST		34. BIRTH STATE					
SPOUSE/SRDP ARENT INFORM	CHARLES 35. NAME OF MOTHER/PARENT-FIRST	36. MIDDLE	REED 17, LAST (BIRTH NAME)	/ 	PA 38. BIRTH STATE					
	OPAL 39 DISPOSITION DATE Immedial copy 40, PLACE OF FINAL DISP		WA							
DIRECTOR/ EGISTRAR		TINE RD, VENTURA, CA	A 93003		43. LICENSE NUMBER					
LAL DIREC	BURIAL	▶ LUIS ALFR	EDO SANCHEZ	5 *	EMB8311					
FUNE	44. NAME OF FLIVERAL ESTABLISHMENT GRIFFIN FAMILY FUNERAL CHAPE	ELS FD1939	46 SIGNATURE OF LOCAL REGISTRAR ▶ ROBERT M LEVIN MD	F 3	4/ DATE mm/dd/ccyy 08/04/2022					
	101 PLACE OF CEATH RESIDENCE		102 IF HUSPITAL SPECIFY ONE 19 DOA!	03. IF OTHER THAN HOSPITAL, SI	PECIFY ONE X Dension is Dension					
PLACE OF DEATH	104. COUNTY 105. FACILITY ADDRESS VENTURA 885 CALLE L	106. CITY CAMARIL	106. CITY CAMARILLO							
	107. CAUSE OF DEATH ENVENTS ON THE MISSION OF SERVICE O	y tambét i ar ventro plan francaban with safishi swita	on, caused death DO NOT office form hall events such that the key U.O. NOT office VIATE	h Tiste atterval Between this Brist.	108. DIATH REPORTED TO CONCNER?					
	(Final disease or condition resulting ————————————————————————————————————	MOS	109, HADPSY PERFORMED?							
_≠	Sequentially, list conditions if any.	YRS	- 4.8 X V2							
PF DEAT	leading to cause on Line A Enter UNDERLYING CAUSE (disense or		\ \	ICT)	11C. AUTOPSY PERFORMED? YES X 100					
CAUSE OF DEATH	n;ury that D: ntutad the events pesulting in death; LAST			(DT)	*** LSFD IN DETERMINING CAUSE?					
	112 OTHER SIGNERCANT CONDITIONS CONTRIBUTING TO DEATH HYPERTENSION	H BÚT NỚT RESULTING IN THE UNDERLYIN	G CAUSE GIVEN IN 107	<u>;</u>	<u> </u>					
	113 SVAS CPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 1129 dl yes us: type of operation and date 1									
NON	114 I CERTIFY THAT TO THE BEST OF MY KNOW, EDGE DEATH COULDINGED AT THE HOUR, DATE AND PLACE STATED FROM THE CALISES STATED		- V-	مهد	R 117 DATE min/ud/ccyy					
PHYSICIAN'S CENTIFICATION	Deceder: Attended Since Deceder: Last Serr Alive (A) minulationary (B) minulationary	LANYARD KIRBY DIA	AL, MD (E. MAILING ADDRESS, ZIP CODE LANYA	G48637 RD KIRBY DIAL, M	08/04/2022 AD					
- F #	01/26/2011 08/03/2022 119 (GERTIPLY THAT IN MY SPINICE) DATE OCCUPRED AT THE HOUR DATE	1996 EASTMAN AVE S	SUITE 101, VENTURA, CA	\ 93003 121, INJURY DATE ~*	Lautory 122 HOUR (24 Hours)					
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ISE ONI										
CORONER'S USE ONLY	124 DESCRIBE NOW INJURY OCCURRED (Figerts which resulted in mory)									
CORO	25 LOCATION OF INJURY (Street and in-injury of location), and city, and city.									
	126. SIGNATURE OF COHONER/ DEPUTY COHONER	127. DATE m	mydd/ccyy 128. PYPE NAME, TITLE OF CO	DRONER DEPUTY CORONER						
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CERTIFIED COPY OF VITAL RECORDS STATE OF CALIFORNIA, COUNTY OF VENTURA

This is a true and exact reproduction of the document officially registered and placed on file in the Vital Records Section, Ventura County Public Health Department, if it bears the date of issue in red ink.

DATE ISSUED

0 9 / 1 9 / 2022

Robertu Teurn war HEALTH OFFICER VENTURA COUNTY, CALIFORNIA

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

Y ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

AVENTUROL



County of Ventura VENTURA, CALIFORNIA

3052016187011			CERTIFICATE OF DEATH ISE BLACK INK ONLY NO BRISINES, WHITEOUTS OR ALTERATIONS VS. 14(21) VS. 15(21) VS. 16(21) VS. 16(2					3	3201656003824				
STATE FILE NUMBER 1 NAME OF DECEDENT- FIRST (GIVEN)			LSE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS VS-1 IN(REV.306) 2 MIDDLE 3. LAST (Family)				LOCAL REGISTRATION NUMBER						
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L KGE	20. DECEDENT'S RESIDENCE (Street and its 885 CALLE LA ROCHA									The state of the s	-		
USUAL	21 CITY CAMARILLO	l l	COUNTY/PROVING	DÉ .		23. ZIP 0	0	24 YEARS IN COUN	C.				V.
INFU;1-	26 INFORMANT'S NAME RELATIONSHIP LUCILLE MILEY, WIFE				SB5 C	ALLE	LA ROCE	IA. CAMARII	LLO,	CA 9301	n, state and ze	o)	7
	28, NAME OF SURVIVING SPOUSE/SRDP- LUCILLE	FIRST	29 MIDDLE SANDR	RA	<i>j</i>	7	30 LAST (BIR	TH NAME)	٦				
SPOUSE/SRDP AND ARENT INFORMATION	31 NAME OF FATHER/PARENT-FIRST CHARLES		32 MIDDLE ARTHUR				33. LAST			34 BIRTH STA			STATE
SPOUSE/ PARENT IN	35 NAME OF MOTHER/PARENT-FIRST		36 MIDDLE	-		1	MILEY 37 LAST (BIRTH NAME)					8 BIRTH	STATE
	AMY 39. DISPOSITION DATE INTO/du/coyy 40	PLACE OF FINAL D	ELIZAB SPOSITIÓN (VY L		MEMOR	RIAL P	RIDEN	DUR	+			N	
FUNERAL DIRECTOR/ LOCAL REGISTRAR	10/01/2016 5 41 TYPE OF DISPOSITION(S)	400 VALEN	TINE ROAD	D, VEN	VTURA,	CA 93	003				43. LICE	NSE NUV	4BER
PAL DIREC	BU ▶ LU			▶ LUIS	S SANCHEZ SE NUMBER 46 SIGNATURE OF LOCAL REGISTRAN				EMB8311			· .	
LO PU	44 NAME OF FUNERAL ESTABLISHMENT GRIFFIN FAMILY FUNI	ERAL CHAP	PELS	FD193		ROB	ERT M LE	EVIN, MD			09/2	26/20	
A E	OMMUNITY MEMUR			·	1		HOSPITAL, SPEC		OTHER T	HAN HOSPITAL		lowe ecsdorer	Otrer
PLACE OF DEATH		147 N BREI		MHERE FOL	JND (Street and	number or	location)	1	The same of	VENTU	RA		
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ŧ	Sequeritally, list conditions, if any								· · · · · ·			X∞	
OF DEATH	OR LITE A. Enter UNDERLYING CAUSE (disease or	ARY ARTER	TERY DISEASE					- :	YEARS YES X				
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113 WAS OPERATION PERFORMED FOR ANY CONDITION IN TIEM 107 OR 1127 (I yes, list type of operation and date) 113 WAS OPERATION PERFORMED FOR ANY CONDITION IN TIEM 107 OR 1127 (I yes, list type of operation and date)										PESKANTI	N LAST YEAR?		
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- B	119. I CERTIFY THAT IN MY OPINION DEATH OCC	URRED AT THE HOUR, D	100 N BR	ENIS	CAUSES STATED.	801, VE	120. INJUE	CA 93003		1. INJURY DATE		122 HOL	JA (24 Hours)
	MANNÉR OF DEATH Natural 23. PLACE OF INJURY (e.g., home, constr	Accdert Home		Pending		Could not be determined	YES	∐ NG ∐ u	NK				
ÚSE ON													
CORONER'S USE DNLY	124 DESCRIBE HOW INJURY OCCURRED (EVerts, which resulted in injury) 125 LOCATION OF ENJURY (Street and number or location, and city, and also												
SOR		//	city, and ap)										
Name and Address of the Owner, where	128 SIGNATURE OF CORONER / DEPUTY CORONER 127 DATE mm/did/coyy 128. TYPE NAME TITLE OF CORONER / DEPUTY CORONER												
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DATE ISSUED

09-/27/2016

HEALTH OFFICER VENTURA COUNTY, CALIFORNIA

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