DOUGLAS COUNTY, NV

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2024-1009985 07/12/2024 11:51 AM

U.S. DEEDS

SHAWNYNE GARREN, RECORDER

ASSESSOR'S PARCEL NO. PTN OF 42-180-09

WHEN RECORDED MAIL TO:

JENNIFER M. CUNNEEN 1100 LINCOLN AVENUE SUITE 240 SAN JOSE, CALIFORNIA 95125

MAIL TAX NOTICES TO:

JENNIFER M. CUNNEEN 1100 LINCOLN AVENUE SUITE 240 SAN JOSE, CALIFORNIA 95125

Affidavit of Death of Joint Tenant

The undersigned, being first duly sworn, deposes and says:

- 1. Affiant is the surviving spouse of SHELDON ARONOWITZ, who is named in that particular Certificate of Death attached hereto and made a part hereof.
- 2. Affiant knows the said SHELDON ARONOWITZ, deceased, to be one and the same person as who is named as joint grantee in that particular Deed recorded as Document No. 366526, on July 21, 1995, in the office of the Recorder of Douglas County, Nevada.

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 Santa Clara

Subscribed and sworn to (or affirmed) before me on this 11th day of June, 2024, by Yvonne Jones Avonowitz, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Witness my band and official seal.

Signature of Notary Public

[Affix Notary Seal]



Legal Description

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/20th interest in and to Lot 31 as shown on Tahoe Village Unit No. 3-13th Amended Map, recorded December 31, 1991, as Document No. 268097, rerecorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 081 through 100 (inclusive) as shown on Tahoe Village Unit No. 3, Fifth Amended Map, recorded October 29, 1981, as Document No. 61612, as corrected by Certificate of Amendment recorded November 23, 1981, as Document No. 62661; and (B) Unit No. 089 as shown and defined on said last mentioned map as corrected by said Certificate of Amendment; together with those easuments 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 II recorded February 14, 1984, as Document No. 096759, as amended by document recorded October 15, 1990, as Document No. 236690, 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 Lots 31, 32 or 33 only, for one week each year in the Swing "Season" as defined in and in accordance with said Declarations.

A portion of APN: 42-180-09

COUNTY of SANTA CLARA

PUBLIC HEALTH DEPARTMENT **VITAL RECORDS AND REGISTRATION**

3052023223216			CERTIFICATE OF DEATH			3202343009044		
STATE FILE NUMBER			USE BLACK INK ONLY AN EASINES, INHTROUTS OR ALTERATIONS VS-11 (REV 3:05) 2. MIDDLE 3. LAST (Family)				LOCAL REGISTRATION	I NUMBER
DECEDENT'S PERSONAL DATA	1, NAME OF DECEDENT-FIRST (Given) SHELDON		2. MIDOLE		3. LAST (Family) ARONOWITZ			\ \
	AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST) SHELDON IRA ARONOWITZ				0F BIRTH mm/dd/c	80	forths Days H	ONDER 24 HOURS 6. SEX Minutes M
	9, BIRTH STATE/FOREIGN COUNTRY	YES	<u> </u>	MARRIE)	7. DATE OF DEATH mm/s 10/07/2023	1717	
DENT	13. EDUCATION - Highest Lew/Copred 14/15, WAS DECEDENT HISRANICALATINO(A/SPANISH? (If yets see incharbeet on back) (see envishment on back) VES							
DEC	17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED 18. KIND OF BUSINESS OR INDUSTRY (e.g., procey blom, read construction, e MANAGER TECHNOLOGY					on, employment agency, etc	c.) 19. YEARS IN OCCUPATION 47	
USUAL RESIDENCE	20. DECEDENT'S RESIDENCE (Street and number, or location) 3577 BARLEY COURT							
	SAN JOSE SAN		INTY/PROVINCE ITA CLARA	95	95127 47		25. STATE/FOREIGN COUNTRY CA	
INFOR-	26. RIFORMANT'S NAME, RELATIONS YVONNE JONES, W			3577 BAR	LEY COUR	T, SAN JOSE	E, CA 95127	state and zip)
SPOUSE/SRDP AND PARENT INFORMATION	28. NAME OF SURVIVING SPOUSE/SRDP"-FIRST YVONNE		29. MIDOLE		30. LAST (BIRTH NAME) JONES		\	
	31. NAME OF FATHER/PARENT-FIRST BENJAMIN		32, MIDDLE		ARONOWITZ			34. BIRTH STATE NY
	35. NAME OF MOTHER/PARENT-FIRST BELLE		36. MADDLE 37. LAST (GIRTH NAME) ZENVER		- //		38. BIATH STATE	
FUNERAL DIRECTOR/ LOCAL REGISTRAR	39 DISPOSITION CATE THINNINGCOPY 40 PLACE OF FINAL DISPOSITION HOME OF PEACE CEMETERY 10/17/2023 300 CURTNER AVENUE, SAN JOSE, CA 95125							
	41, TYPE OF DISPOSITION(S) 42, SIGNATURE OF EMBALMER						/	43. LICENSE NUMBER
							- FA	47. DATE mm/dd/ccyty
	KADISHA P. CODT, MD						50	10/13/2023
PLACE OF DEATH	RIVER PARK HOMES - ASSISTED LIVING P GR/OP DOA Hospice Nursing Decedents Cher Home TC Home Home TC Home TC							
	104. COUNTY 105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and InJulies; or location) SANTA CLARA 3427 GILA DRIVE						SAN JOS	SAN JOSE
CAUSE OF DEATH	107. CAUSE OF DEATH Enter the chain of events — thesaces, triples or complications — that deedby caused death, DO NOT enter terminal events such as cardiac areast, respiratory areast, or ventricular tribilitation without showing the eliology, DO NOT ABBFEVIATE. IMMEDIATE CAUSE IX CARDIO PULMONARY ARREST						Time Interval Between Onset and Death	108. DEATH REPORTED TO CORONER YES X NO
	(Final disease or condition resulting						SEC	109. BIOPSY PERFORMED?
	Sequentaly, led conditions, d any.						HRS	YES X NO
	heating to cause on Line & Enter UNDERNING CAUSE (INSERTS OF						WKS	110. AUTOPSY PERFORMED? YES X NO
	Party (In the August 1997) COMPLICATIONS OF CLINICALLY DIAGNOSED ALZHEIMER'S DISEASE reacting in open Last							111, USED IN DETERMINING CAUSE?
	112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE DIVEN IN 107 NONE							
	113, WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.)						1139.	113A, DECEDENT PREGNANT IN LAST YEAR?
PHYSICIAN'S CERTIFICATION	114. I CERTIFY THAT TO THE BEST OF MY KN AT THE HOUR, DATE, AND PLACE STATED FR	OWI FINE CALLER CALLER CALLER	5. SIGNATURE AND TITLE	OF CERTIFIER		V/S	116. LICENSE NUME	BER 117. DATE mm/dd/coyy
			ESTELITA LIM	IBO CARAN	DANG, MD	DE SOTEL LITA	A35825	10/11/2023
	10/04/2023 10/07/2023 1460 N CAMINO ALTO STE 109, VALLEJO, CA 94589							
	119,1 CERTIFY THAT IN MY OPINION DEATH MANNER OF DEATH Natural	OCCURRED AT THE HOUR, DATE, A Accident Homicide	NO PLACE STATED FROM THE C Suicide Pending Investig	SAUSES STATED. Could reason determine	othe ves	ED AT WORK?	121. INJURY DATE	mm/dd/ocyy 122, HOUR (24 Houn
ONLY								
R'S USE	124, DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)							
CORONER'S USE	125. LOCATION OF MULRY (Street and number, or location, and cny, and zip)							
ដ	126. SIGNATURE OF CORONER / DEP	UTY CORONER	128. TYPE NA	ME, TITLE OF CORONE	R / DEPUTY CORONER			
	TE A B	Te Te	E				FAX AUTH.#	CENSUS TRAC
REGIS	44 40					H 100 HI 100 HI 101	TAXAUIT.	CENSUS IMAC
		AFT.						

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA COUNTY OF SANTA CLARA

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.



