

APN# 1319-15-000-023



SHAWNYNE GARREN, RECORDER

Recording Requested by/Mail to:

Name: Patti Jo Peters

Address: 22140 Chipper Ln

City/State/Zip: Palo Cedro, Ca 96073

Mail Tax Statements to:

Name: Patti Jo Peters

Address: P.O. Box 31

City/State/Zip: Palo Cedro  
California 96073

Affidavit of Death  
Title of Document (required)

Please complete the Affirmation Statement below:

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

- Affidavit of Death – NRS 440.380 (1)(A) & NRS 40.525 (5)
- Military Discharge – NRS 419.020 (2)
- Other NRS \_\_\_\_\_ (state specific law)

-OR-

I the undersigned hereby affirm the attached document, including any exhibits, hereby submitted for recording does NOT contain the personal information of any person(s). (Per NRS 239B.030)

Patti Jo Peters  
Signature

Patti Jo Peters  
Printed Name

This document is being (re-)recorded to correct document # \_\_\_\_\_, and is correcting

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Affidavit of Death**

STATE OF Nevada  
COUNTY OF Douglas

I, Patti Jo Peters, residing at 22140 Chipper Ln, Palo Cedro,  
California, being of legal age, depose and say that:

That Roy F. Peters, 22140 Chipper Ln,  
Palo Cedro, CA died on February 3<sup>rd</sup> as  
evidence by a certified copy of that Certificate of Death, attached hereto; 2024

That I am the successor to the estate of the descendant and to the descendants interest in funds held by various institutions and no other person has a superior right to the interest of the decedents in the described property; exhibit A

That no proceeding is being or has been conducted in Shasta County for administration of the descendant's estate.

**Oath of Affirmation:**

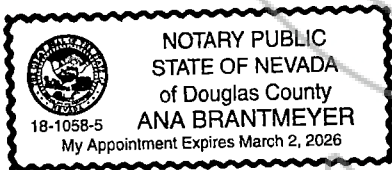
I certify under penalty of perjury under Nevada law that I know the contents of this Affidavit signed by me and that the statements are true and correct.

Signed and sworn to before me on July 19<sup>th</sup>, 2024  
Patti Jo Peters by Patti Jo Peters  
Patti Jo Peters

STATE OF Nevada, COUNTY OF Douglas, ss:

[Signature]  
Notary Public

Notary Public  
Title (and Rank)



My commission expires March 2, 2026

## EXHIBIT "A"

An undivided fee simple ownership interest in and to the following described Time Share Interest that has been created at David Walley's Hot Springs Resort and Spa located in Douglas County, Nevada and more fully described within that certain Fifth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for David Walley's Resort that has been filed of record on August 27, 2001 with the Recorder in and for Douglas County, Nevada in Book 0801 Page 6980, as amended:

**Unit Type: 2bd Phase: 5 Inventory Control No: 36025092030  
Alternate Year Time Share: Annual First Year Use: 2015**

If acquiring a Time Share Interest in Phase I, BUYER will receive fee title to a 1/1071th undivided interest (if annually occurring) or a 1/2142th undivided interest (if biennially occurring) in said Phase. If acquiring a Time Share Interest in Phase II, BUYER will receive fee title to a 1/1989th undivided interest (if annually occurring) or a 1/3978th undivided interest (if biennially occurring) in said Phase. If acquiring a Time Share Interest in Phase III, BUYER will receive fee title to a 1/1224th undivided interest (if annually occurring) or a 1/2448th undivided interest (if biennially occurring) in said Phase. If acquiring a Time Share Interest in the Dillon Phase, BUYER will receive fee title to a 1/1224th undivided interest (if annually occurring) or a 1/2448th undivided interest (if biennially occurring) in said Phase.

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SHASTA

2650 BRESLAUER WAY
REDDING, CALIFORNIA 96001

3052024031613

CERTIFICATE OF DEATH

3202445000222

Form containing fields for decedent's personal data, usual residence, informant, spouse, funeral director, place of death, cause of death, physician's certification, and coroner's use only.

JAMES C. MU, M.D.
REGISTRAR OF VITAL STATISTICS
SHASTA COUNTY HHS&A/PUBLIC HEALTH

CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF SHASTA

000324310

This is to certify that the above is a true and correct copy of facts recorded regarding the above named individual as registered in this office.

DATE ISSUED FEB / 15 / 2024

KAREN C. RAMSTROM
REGISTRAR OF VITAL STATISTICS
SHASTA COUNTY HHS&A/PUBLIC HEALTH

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



CASHASTADT