

DOC # 814834  
12/19/2012 01:06PM Deputy: SG  
**OFFICIAL RECORD**  
Requested By:  
Western Title Company  
Douglas County - NV  
Karen Ellison - Recorder  
Page: 1 of 4 Fee: \$17.00  
BK-1212 PG-5269 RPTT: EX#005



APN#: 1220-24-501-036

**Recording Requested By:**  
Western Title Company, Inc.  
**Escrow No.:** 054861-MHK

**When Recorded Mail To:**  
Karen Loizides  
291 Nieto Ave  
Long Beach CA 90803

**Mail Tax Statements to: (deeds only)**  
Same As Above

(space above for Recorder's use only)

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons.  
(Per NRS 239B.030)

Signature *M Kelsh*  
M Kelsh Escrow Officer

**Grant Bargain Sale Deed**

This page added to provide additional information required by NRS 111.312  
(additional recording fee applies)



## GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH: That Demetrious Loizides, a married man, in consideration of \$10.00, the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell and Convey to Karen M. Loizides, a married woman as her sole and separate property all that real property situated in the City of Gardnerville, County of Douglas, State of Nevada described as follows:

All that certain real property situate in the County of Douglas, State of Nevada, described as follows:

Parcel C as set forth on the Parcel Map for HELEN S. SHULER, being a division of Lot 21 of Ruhenstroth Ranchos Subdivison, according to the map thereof, filed in the office of the County Recorder of Douglas County, State of Nevada on September 19, 1977, Book 977, Page 1065, as Document No. 13096, Official Records, Douglas County, State of Nevada.

Together with a non-exclusive access easement on, over, and across Helen Lane as set forth on said Parcel Map.

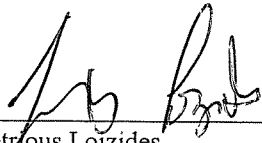
TOGETHER with all and singular the tenements, hereditaments and appurtenances, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

Grantor and Grantee are husband and wife. It is the intention of Grantor that Grantee shall henceforth have and hold said real property as her sole and separate property. By this conveyance, Grantor releases any community interest that he might now have or be presumed to hereafter acquire in the above described property.

Dated: 12/10/2012



Grant, Bargain and Sale Deed – Page 2

  
\_\_\_\_\_  
Demetrious Loizides

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

This instrument was acknowledged before me on

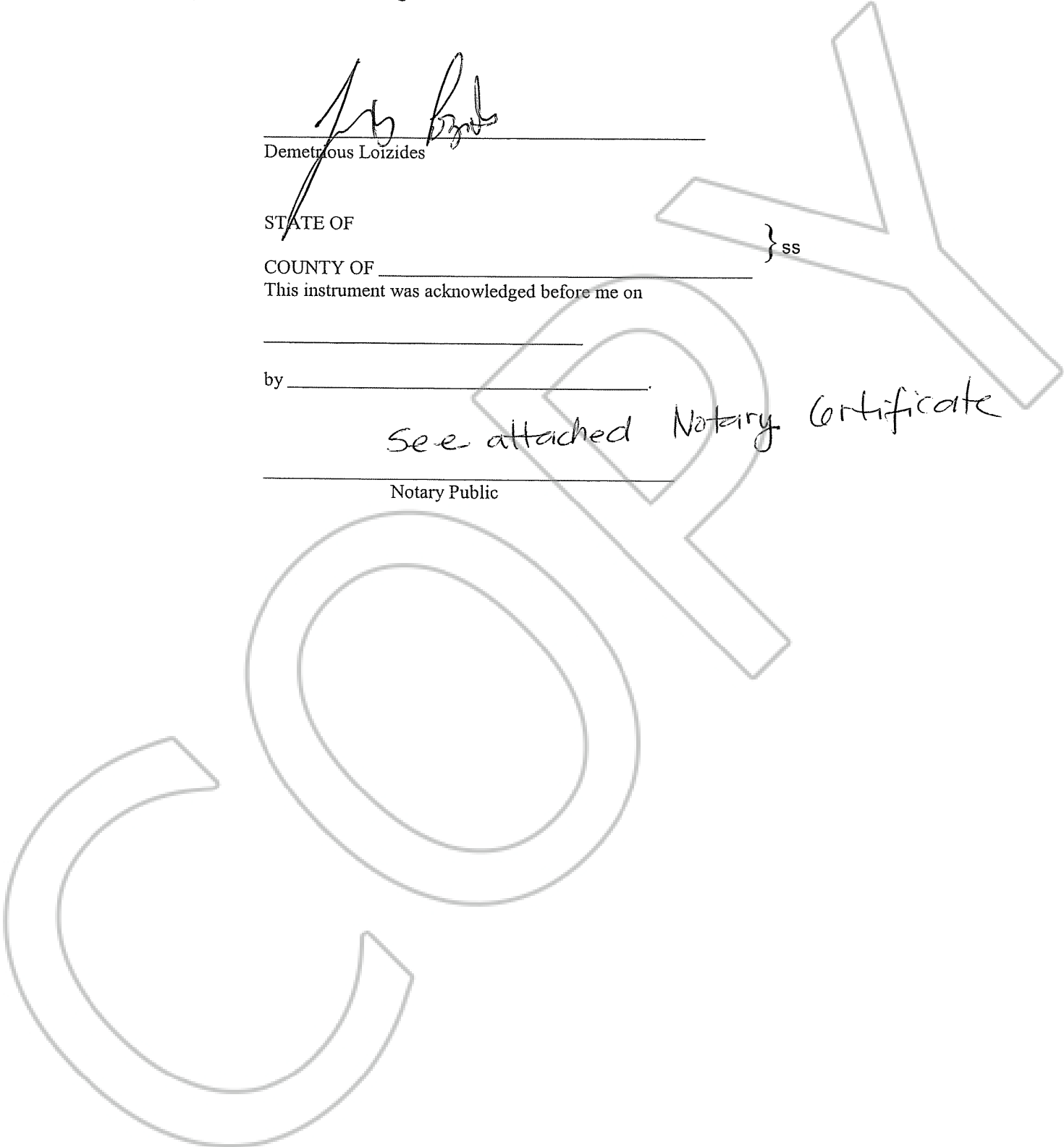
\_\_\_\_\_

by \_\_\_\_\_

} ss

*See attached Notary Certificate*

\_\_\_\_\_  
Notary Public





Attached to Grant Bargain Sale Deed

### CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Los Angeles

On December 13, 2012 before me, Zulma H. Cortez, Notary Public  
(Here insert name and title of the officer)

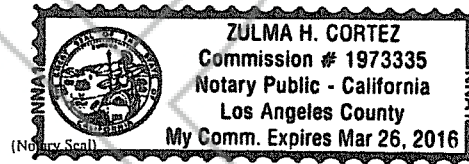
personally appeared Demetrios S. Loizides

who 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 the entity upon behalf of which the person ~~(s)~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Zulma H. Cortez  
Signature of Notary Public



#### ADDITIONAL OPTIONAL INFORMATION

##### INSTRUCTIONS FOR COMPLETING THIS FORM

*Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.*

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he~~/~~she~~/~~they~~, ~~is~~ /~~are~~ ) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
  - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
  - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

##### DESCRIPTION OF THE ATTACHED DOCUMENT

\_\_\_\_\_  
(Title or description of attached document)

\_\_\_\_\_  
(Title or description of attached document continued)

Number of Pages \_\_\_\_\_ Document Date \_\_\_\_\_

\_\_\_\_\_  
(Additional information)

##### CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
- Corporate Officer

\_\_\_\_\_  
(Title)

- Partner(s)
- Attorney-in-Fact
- Trustee(s)
- Other \_\_\_\_\_