

A.P.N.

1420-18-213-006

RPTT

Transfer Tax Exemption, per NRS 375.090, Section 2 7

Doc Number: 0832503

10/23/2013 03:46 PM

OFFICIAL RECORDS

Requested By TAMMY JAMES

DOUGLAS COUNTY RECORDERS Karen Ellison - Recorder

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Fee: \$ 15.00 Bk: 1013 Pg: 4566

When Recorded Mail to:

Tammy James

812 Overview Court

Carson City, NV 89705

GRANT, BARGAIN AND SALE DEED

tebruary THIS DEED, made on . 2013 by and between

Tammy D. James, an unmarried woman, hereinafter referred to as Grantor and

Tammy D. James, Trustee of THE TAMMY JAMES FAMILY REVOCABLE LIVING TRUST, hereinafter referred to as Grantee.

The Grantor, for a valuable consideration, receipt of which is hereby acknowledged,

Does hereby GRANT, BARGAIN AND SELL to

Grantee and Grantees' heirs, successors and assigns forever the real property situated in the County of Douglas, State of Nevada, described as follows:

Lot 177, IN BLOCK C, of Silverado Heights No. 2, according to the map thereof, filed in the office of the County Recorder of Douglas County, Nevada as DOCUMENT NO. 33717, OFFICIAL RECORDS

Also known as: 3353 Placer Court, Carson City, NV 89705

TOGETHER with all tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

To have and to hold the interest of the premises, together with the appurtenances, unto the said Grantees, and to Grantees' heirs, successors and assigns forever.

In Witness Whereof, the Grantors have executed this conveyance the day and year first above written.

Notary Acknowledgement Attached



BK : 10 13 PG : 4567 10/23/20 13

All-purpose Acknowledgment

STATE OF Nevada, country of Douglas
0n 02 20 10 2
in and for said State, personally appeared
Tanny D. James
o personally known to me -OR- peroved to me on the basis of satisfactory evidence/ to be the person(s) whose name(N(s)) are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(se), and 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 helplif of which the person(s).
instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.
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WITNESS my hand and official seal.
alla Allilson
Name (type or printed)
My commission expires: (Seal)
23/01/2014
ELLA L WILSON NOTARY PUBLIC STATE OF MENÀDA My Commission Expires: 08-01-16 Certificate No: 12-8418-5