

15

APN: 1420-28-811-021  
R.P.T.T.: \$0.00  
Exempt: (NRS 375.090, Section 7)

**This Document Prepared By:**

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KAREN ELLISON, RECORDER

**After Recording, Mail To:**

✓ Barbara Louise Ford, as Trustee  
1353 Kim Place  
Minden, NV 89423

**Send Subsequent Tax Bills To:**

Barbara Louise Ford, as Trustee  
1353 Kim Place  
Minden, NV 89423

## QUITCLAIM DEED

THIS INDENTURE WITNESSETH THAT,

BARBARA L. FORD, an unmarried woman,

FOR GOOD AND VALUABLE CONSIDERATION, the receipt of which is hereby acknowledged, does hereby CONVEY AND QUITCLAIM to:

BARBARA LOUISE FORD, as Trustee of THE BARBARA L. FORD LIVING TRUST,  
U/A dated September 11, 2014, the GRANTEE,

Whose mailing address is 1353 Kim Place, Minden, NV 89423;

All of the following described real estate situated in the County of Douglas, State of Nevada:

Lot 21 of SARATOGA HEIGHTS UNIT NO. 1, according to the map thereof, filed in the office of the Douglas County Recorder, State of Nevada, on May 15, 1961, as Document No. 17827.

MORE commonly known as: 1353 Kim Place, Minden, NV.

SUBJECT TO: the Restrictions, Conditions, Covenants, Rights, Rights of Way, and Easements that are now of record, if any.

[THIS SPACE INTENTIONALLY LEFT BLANK]

TOGETHER with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

The then-acting Trustee has the power and authority to encumber or otherwise to manage and dispose of the hereinabove described real property; including, but not limited to, the power to convey.

The undersigned hereby affirm that this document submitted for recording does not contain a social security number.

Dated this 11th day of September, 2014.

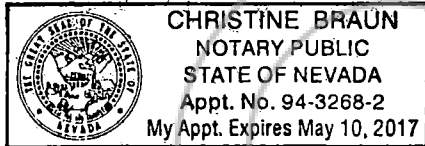
*Barbara L. Ford*

**BARBARA L. FORD**

State of Nevada

County of Washoe

This instrument was acknowledged before me on this 11th day of September, 2014, by BARBARA LOUISE FORD.



*Christine Braun*

(Signature of notarial officer)

**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s):

- a. 1420-28-811-021
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

2. Type of Property:

- a.  Vacant Land
- b.  Single Fam. Res.
- c.  Condo/Townhouse
- d.  2-4 Plex
- e.  Apt. Bldg
- f.  Comm'l/Ind'l
- g.  Agricultural
- h.  Mobile Home
- Other: \_\_\_\_\_

FOR RECORDER'S OPTIONAL USE ONLY	
Book: _____	Page: _____
Date of Recording: _____	
Notes: <i>au-trust OK</i>	

- 3. a. Total Value /Sales Price of Property: \$ 0.00
- b. Deed in Lieu of Foreclosure Only (value of property) ( 0.00 )
- c. Transfer Tax Value: \$ 0.00
- d. Real Property Transfer Tax Due: \$ 0.00

4. **If Exemption Claimed:**

- a. Transfer Tax Exemption per NRS 375.090, Section 7
- b. Explain Reason for Exemption: Transfer to a revocable, inter-vivos trust for the benefit of the Grantor, without consideration.

5 Partial Interest: Percentage being transferred: \_\_\_\_\_ %

The undersigned declare and acknowledge, under penalty of perjury, pursuant to NRS. 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature: \_\_\_\_\_ Capacity: Grantor

Signature: \_\_\_\_\_ Capacity: Grantee

**SELLER (GRANTOR) INFORMATION**  
**(REQUIRED)**

Print Name: Barbara L. Ford  
Address: 1353 Kim Place  
City: Minden  
State: NV Zip: 89423

**BUYER (GRANTEE) INFORMATION**  
**(REQUIRED)**

Print Name: Barbara Louise Ford, trustee  
Address: 1353 Kim Place  
City: Minden  
State: NV Zip: 89423

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**

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