

15-

DOUGLAS COUNTY, NV 2014-852561

Rec:\$15.00

Total:\$15.00

PHILLIP J LEAL

11/10/2014 02:18 PM

Pgs=3



KAREN ELLISON, RECORDER

E07

Recording requested by:  
THOMAS B. REED, JR.  
Attorney at Law

And when recorded mail to:

Phillip J. Leal and Debra Justin Leal, Trustees  
1008 Siveranch Drive  
Gardensville, NV 89410

Douglas County  
APN: 1220-09-410-025

[Space Above This Line for Recorder's Use]

No Documentary Transfer Tax Due  
--Transfer to Revocable Trust.  
--R&T \$11930

**INDIVIDUAL GRANT DEED**

The undersigned declare under penalty of perjury that no documentary transfer tax applies to this conveyance as no consideration has been given.

FOR NO CONSIDERATION, Phillip J. Leal and Debra Justin Leal hereby **GRANT** to Phillip J. Leal and Debra Justin Leal, Trustees of the PHILL AND DEBBIE TRUST u/a/d 3/21/11, all of their interest in and to the real property situate in the County of Douglas, State of Nevada, described as follows:

LOT 25, AS SHOWN ON THE FINAL MAP OF SILVERANCH UNIT 1-A, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON JANUARY 3, 1994, IN BOOK 194, PAGE 256, AS DOCUMENT NO. 326668.

APN: 1220-09-410-025

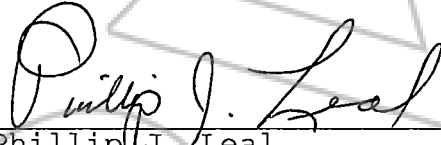
**Mail tax statements to:**

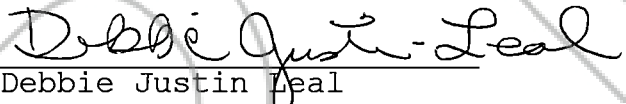
Phillip J. Leal and Debra Justin Leal, Trustees  
1008 Siveranch Drive  
Gardensville, NV 89410

**SUBJECT TO:** Covenants, conditions, restrictions, reservations, rights, rights of way and easements of record.

This conveyance is to a revocable trust created by the Grantors and does not constitute a change of ownership and is not subject to reassessment.

Dated: September 30<sup>th</sup>, 2014

  
Phillip J. Leal

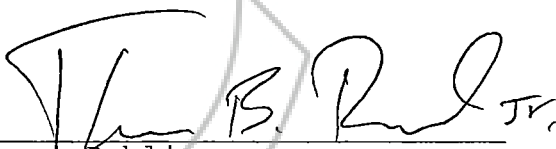
  
Debbie Justin Leal

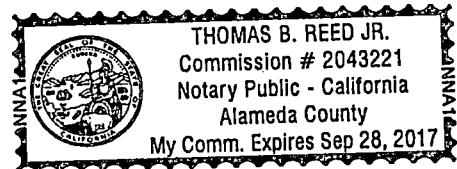
State of California )  
County of Alameda )

On September 30, 2014, before me, **Thomas B. Reed, Jr.**, Notary Public, personally appeared **Phillip J. Leal and Debbie Justin Leal**, 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(is), 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.

  
Notary Public



(Seal)

# STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: \_\_\_\_\_

Book: \_\_\_\_\_ Page: \_\_\_\_\_

Date of Recording: \_\_\_\_\_

Notes: \_\_\_\_\_

cu-trust OK

**1. Assessor Parcel Number (s)**

- (a) 1220-09-40-025
- (b) \_\_\_\_\_
- (c) \_\_\_\_\_
- (d) \_\_\_\_\_

**2. Type of Property:**

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

**3. Total Value/Sales Price of Property:**

Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_

Transfer Tax Value: \$ \_\_\_\_\_

Real Property Transfer Tax Due: \$ \_\_\_\_\_

**4. If Exemption Claimed:**

a. Transfer Tax Exemption, per NRS 375.090, Section: 7

b. Explain Reason for Exemption: transferring into trust without consideration

cu-trust OK

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

The undersigned declares and acknowledges, 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 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 Debbie M. Justin-Leal Capacity grantee

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**

(REQUIRED)

Print Name: Debbie M. Justin-Leal

Address: 1893 Bella Coola Dr.

City: South Lake Tahoe

State: CA Zip: 96150

**BUYER (GRANTEE) INFORMATION**

(REQUIRED)

Print Name: Debbie M. Justin-Leal

Address: 1893 Bella Coola Dr.

City: South Lake Tahoe

State: CA Zip: 96150

**COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)**

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_