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KAREN ELLISON, RECORDER

E05

A. P. No. 1319-19-212-086

R.P.T.T.: \$0.00

✓ When recorded mail to:Deborah Pierrel
P.O. Box 2446
Mammoth Lakes, CA 93546Mail tax statements to:

Same as above

**AFFIRMATION PURSUANT TO
NRS 111.312(1)(2) AND 239B.030(4)**

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

DEED


THIS INDENTURE WITNESSETH: That FREDERIC PIERREL, a married man, in consideration of the sum of Ten Dollars (\$10.00), the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell and convey to DEBORAH PIERREL, a married woman, as her sole and separate property, whose address is: P.O. Box 2446, Mammoth Lakes, CA 93546, all that real property situate in the County of Washoe, State of Nevada, described as follows:

Parcel B as set forth on the Parcel Map for Paulette Brunello of Lot 465 Second Amended Map of Summit Village filed for Record November 3, 1981 in Book 1181 Page 124, Document No. 61702, Official Records of Douglas County, State of Nevada.

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

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 real property.

DATED 10/25, 2014.


Frederic Pierrel

STATE OF

COUNTY OF

) ss

This instrument was acknowledged before me on
SEE ATTACHED by FREDERIC PIERREL.

NOTARIAL CERTIFICATE

Notary Public

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Mono


On November 25, 2014 before me, M. Forbis, Notary public
(Here insert name and title of the officer)

personally appeared Frederic Pierrel *****

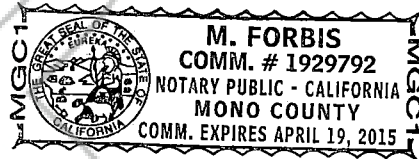
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), 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.


Signature of Notary Public

(Notary Seal)



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 _____

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

1. Assessor Parcel Number (s)

- (a) 1319-19-212-080
- (b) _____
- (c) _____
- (d) _____

2. Type of Property:

- a) Vacant Land
- b) Single Fam Res.
- c) Condo/Twnhse
- d) 4 Plex
- e) Apt. Bldg.
- f) Comm'/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: 5

b. Explain Reason for Exemption: Transfer From Spouse

5. Partial Interest: Percentage being transferred: 100 %

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: [Signature] Capacity: Grantor

Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Fredene Perrel

Address: PO Box 2534

City: Manhattan

State: CA Zip: 93544

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Deb Perrel

Address: PO Box 2534

City: Manhattan

State: CA Zip: 93544

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

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____