

APN: 1320-33-311-021

R.P.T.T.: \$ 7

Nicholas Bruno Von Flue (Trustee)

P.O. Box 151

Adin, CA 96006

Phone: 530-299-3272



00010592201508591880040042

KAREN ELLISON, RECORDER

E07

Send Subsequent Tax Bills To:

Arlita R. Piazza

1481 Grendon Way\

Gardnerville, NV 89410-5854

Phone: 775-790-767

QUITCLAIM DEED

THIS INDENTURE WITNESSETH THAT, NICHOLAS BRUNO VON FLUE, GRANTOR AND TRUSTEE OF THE ALBERT JOSEPH VON FLUE TRUST, FOR GOOD AND VALUABLE CONSIDERATION, the receipt of which is hereby acknowledged,

Does hereby QUITCLAIM to: ARLITA R. PIAZZA, whose mailing address is 1481 Grendon Way, Gardnerville, NV 89410-5854, the following described real estate situated in the County of Douglas, State of Nevada:

LOT 21 BLOCK A, AS SET FORTH ON FINAL SUBDIVISION MAP FSM-1006-2 FOR CHICHESTER ESTATES PHASE 2, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON DECEMBER 9, 1996, IN BOOK 1296 AT PAGE 1286, AS DOCUMENT NO. 402540, AND BY CERTIFICATE OF AMENDMENT RECORDED JULY 17, 2001, BOOK 0701 PAGE 3929, AS DOCUMENT NO. 518479

MORE commonly known as: THE REAL PROPERTY AND RESIDENCE OF ALBERT JOSEPH VON FLUE

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

Dated this 24 day of March, 2015. The undersigned hereby affirm that this document submitted for recording does not contain a social security number.

Nicholas Bruno Von Flue

Grantor and Trustee of the

Albert Joseph Von Flue Trust

STATE OF CALIFORNIA)
:
COUNTY OF MODOC)

On March ____, 2015, before me _____ a Notary Public, personally appeared Nicholas Bruno Von Flue, who proved on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument5 (QUITCLAIM DEED) and acknowledged to me that he executed the same in his authorized capacity and that by his signature on the instrument the person , or the entity on which the person 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 _____

(Seal)

**SEE ATTACHED
CERTIFICATES**

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

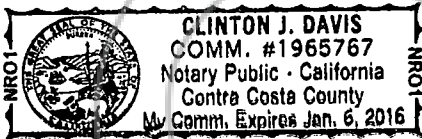
State of California)
County of MODOC)

On MAR 24, 2015 before me, CLINTON J. DAVIS NOTARY PUBLIC
Date Here Insert Name and Title of the Officer
personally appeared NICHOLAS BRUND VON FLUE
Name(s) of Signer(s)

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 [Handwritten Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: QUIT CLAIM DEED Document Date: 3/24/15
Number of Pages: 3 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s):
 a. 1320-33-311-021
 b. _____
 c. _____
 d. _____

FOR RECORDER'S OPTIONAL USE ONLY
 Book: _____ Page: _____
 Date of Recording: _____
 Notes: *PK - informed Trustors*

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: _____

3. a. Total Value /Sales Price of Property: \$ 250,000.00 *NA AP*
 b. Deed in Lieu of Foreclosure Only (value of property) \$ _____
 c. Transfer Tax Value: \$ _____
 d. Real Property Transfer Tax Due: \$ _____

4. **If Exemption Claimed:**
 a. Transfer Tax Exemption per NRS 375.090, Section 7
 b. Explain Reason for Exemption: *Transfer out of trust w/o consideration AP.*
 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: *Nicholas Bruno Von Flue* Capacity: Grantor

Signature: *Arlita R. Piazza* Capacity: Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)
 Print Name: Nicholas Bruno Von Flue
 Address: P.O. Box 151
 City: Adin
 State: CA Zip: 96006
 89410-5854

BUYER (GRANTEE) INFORMATION
(REQUIRED)
 Print Name: Arlita R. Piazza
 Address: 1481 Grendon Way
 City: Gardnerville
 State: NV Zip: _____

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)
(AS A PUBLIC RECORD, THIS FORM MAY BE RECORDED/MICROFILMED)