Recording Requested By

North American Title Company, Inc. File No. 54715-1332799-15

AND WHEN RECORDED MAIL TO:

Name:

Thomas Tornga and Nancy T. Tornga

City & State

Street Address 1927 Glenbrook Road

Glenbrook, NV 89413

DOUGLAS COUNTY, NV

2015-859256

RPTT:\$0.00 Rec:\$15.00 \$15.00

Pgs=2

03/26/2015 10:44 AM

NORTH AMERICAN TITLE - RENO

KAREN ELLISON, RECORDER

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A.P. No. 1418-10-810-008 <b>GRANT DEED</b>			
The Undersigned Grantor(s) Declare(s): DOCUMENTARY TRANSFER TAX \$ ; CITY TRANSFER TAX \$NONE;  [ ] computed on the consideration or full value of property conveyed, OR  [ ] computed on the consideration or full value less value of liens and/or encumbrances remaining at time of sale,  [ ] unincorporated area; [ ] City of Glenbrook, and  This conveyance transfers Grantor's interest into or out of his/her revocable trust and is EXEMPT from the imposition of the Documentary Transfer Tax pursuant to § 11930 of the Revenue and Taxation Code.			
FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Thomas Tornga and Nancy T. Tornga, husband and wife as joint tenants			
hereby GRANT(s) to Thomas H. Tornga and Nancy T. Tornga, Trustees of the Tornga 1998 Trust			
the following described property in the City of Glenbrook, County of Douglas, State of Nevada:			
LOT 43, AS SHOWN ON THE MAP OF GLENBOOK UNIT NO. 1, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, ON JUNE 1, 1977, AS DOCUMENT NO. 09693.			
Thomas Tornga  Nancy T. Tornga			

Mail Tax Statements to: Same as Above

A notary public or other officer completing this certificate verifies only the identity of the ndividual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.
STATE OF California )SS
COUNTY OF DEPA ), before me, Brenda Well, Notary
The state of the s
Public, personally appeared Thomas Tornga, 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 ne/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.
certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is rue and correct.
VITNESS my hand and official seal.  BRENDA GREEN  COMM. #1971175  Notary Public - California
Signature My Comm. Expires Mar. 30, 2016
This area for official notarial seal

## STATE OF NEVADA DECLARATION OF VALUE

1, Assessor Parcel Number(s)	\ \
a) (-1 () 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\ \
c)	\ \
d)	
a) Vacant Land b) Single Fam. Res	FOR RECORDERS OPTIONAL USE ONLY
o) Condo/Twnhse d) 2-4 Plex .	Document/Instrument#
e) Apt. Bldg. f) Comm'l/(nd'l	Book Page: gb ok saw trust
g) Agricultural h) Mobile Home	Date of Recording:
i) Other	Notes;
3. Total Value/Sales Price of Property:	\$
Deed in Lieu of Foreclosure Only (value of property) (	\$
✓ Transfer Tax Value:	\$ wood (classification)
* Real Property Transfer Tax Due	\$ management
4. If Exemption Claimed:	
a. Transfer Tax Exemption, per 376,090, Section:	Anni damiti
b. Explain reason far exemption and fill Ving	trust-w/o consideration
5. Partial Interest: Percentage being transferred;	%.
— La	erjury, pursuant to NRS 375,060 and NRS 375,110,
that the information provided is correct to the best of their	ided herein. Furthermore, the disallowance of any
Interest at 1% per month. Pursuant to NRS 375.030, the Buyer a additional amount owes.	nd Seller stail be julidy and severally liberations
11961110 (19) (10) (17)	adorioxa
Signature: 11,000,000	Saprotty U
Signature,	Capacity:
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
TANNA O LVA NCU TOXA O	Print Name: TWOMUST WOUND TOMA WST
A AM AMAL ON	MAYNAN "
Address: VA Address:	Address: Plan Plan
City: APTICACOL	City:
State: Zlp: X/U/)	State: Zip: 5/01
COMPANY/PERSON REQUESTING RECORDING (required (f.	not seller or buyer)
Print Name: NOFTN and NOATTHK	Je Number: / 1000 d C 1
Address TOS TCO Va (+U)	UN 04 94595
City:	State: MAC Ztp: 81524111
TO A A SHIPLION DECORD THIS FORM MAY I	HE RECURDEDINIONO ILMEDA.