

APN: 1220-04-516-024

RECORDING REQUESTED BY:

✓ Patricia A. Grant
P.O. Box 2564
Oak Harbor, WA 98277



KAREN ELLISON, RECORDER

E10

AFTER RECORDATION, RETURN BY MAIL TO:

Patricia A. Grant
P.O. Box 2546
Oak Harbor, WA 98277

DEED UPON DEATH

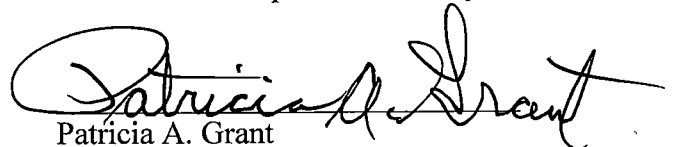
THIS INDENTURE WITNESSETH: That on this 13 day of March, 2015, PATRICIA A. GRANT, a single person, does hereby convey to her son, SCOTT A. GRANT, a married man as his separate property, effective upon the death of the Grantor, the following described real property in the County of Douglas, State of Nevada:

Unit no. 41 of EL DORADO VILLAGE UNIT NO. 1, as shown on the Official map recorded in the office of the County Recorder on December 14, 1973, as Document No. 70678.

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

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR. THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO SUBSECTION 1 OF NRS 111.109 REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE GRANTOR'S ENTIRE INTEREST IN THE SAME REAL PROPERTY.

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written.

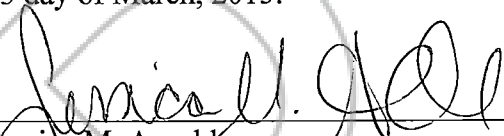

Patricia A. Grant

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

On this day personally appeared before me Patricia A. Grant, to me known to be the person described in and who is authorized to execute the within and foregoing instrument, and acknowledged that she signed the same as her free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this 13 day of March, 2015.





Jessica M. Arnold
Notary Public in and for the State of Washington.
Residing at Sedro-Woolley.
My appointment expires June 19, 2017.

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1220-04-516-024
 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 _____

FOR RECORDERS OPTIONAL USE ONLY	
BOOK _____	PAGE _____
DATE OF RECORDING: _____	
NOTES: _____	

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 # 10
 b. Explain Reason for Exemption: A conveyance of real property by deed which becomes effective upon the death of the grantor pursuant to NRS 111.655 to 111.699, inclusive

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 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 Patricia A. Grant Capacity _____ Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Patricia A. Grant
 Print Name: _____
 Address: P.O. Box 2564
 City: Santa Barbara
 State: California Zip: 93105

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Scott A. Grant
 Print Name: _____
 Address: 213 Calle Manzanita
 City: Santa Barbara
 State: California Zip: 93105

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)