



KAREN ELLISON, RECORDER

E07

A.P.N.: 1318-23-314-010
R.P.T.T.: EXEMPT #7

RECORDING REQUESTED BY:
ROBERT J. TAYLOR AND GAIL TAYLOR TRUSTEES
P.O. BOX 18284
SOUTH LAKE TAHOE, CA 96151

WHEN RECORDED MAIL DOCUMENT
SAME AS ABOVE

TAX BILL TO:
SAME AS ABOVE

GRANT, BARGAIN and SALE DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,
ROBERT J. TAYLOR AND GAIL R. TAYLOR HUSBAND AND WIFE.

do(es) hereby GRANT, BARGAIN and SELL to ROBERT J. TAYLOR AND GAIL
TAYLOR (and their successors in interest) as TRUSTEES OF THE "ROBERT AND
GAIL TAYLOR REVOCABLE TRUST U/A dtd MARCH 3RD 2015

the real property situate in the County of DOUGLAS , State of Nevada, described as
follows;

UNIT 2, AS FORTH ON THAT CERTAIN MAP ENTITLED CONDOMINIUM MAP
LAKE VILLAGE PROFESSIONAL BUILDING, RECORDED JUNE 1, 1979 IN
BOOK 679 OF OFFICIAL RECORDS AT PAGE 83, AS DOCUMENT NUMBER
33068, DOUGLAS COUNTY NEVADA.

TOGETHER WITH AN UNDIVIDED INTEREST IN THE COMMON AREA AS SET
FORTH AND DEFINED BY THAT DOCUMENT RECORDED APRIL 30, 1980 IN
BOOK 480 AT PAGE 1788 DOUGLAS COUNTY NEVADA.

TOGETHER with all tenements, hereditaments and appurtenances, including easements
and water rights, if any, thereto belonging or appertaining, and any reversions,
remainders, rents, issues or profits thereof.

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Grant, Bargain and Sale Deed
Page Two

Dated: 3/24/15

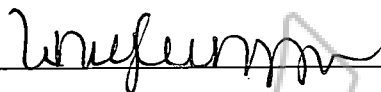
Robert J Taylor
Robert J Taylor

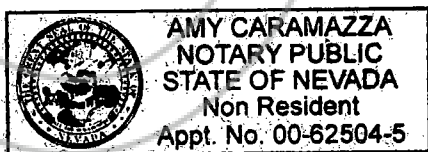
Gail R Taylor
Gail R. Taylor

State of Nevada
)ss
County of Douglas

On 3.24.15, before me, Amy Caramazza, a
Notary Public, personally appeared Robert J Taylor and Gail R Taylor personally known to me (or 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 entity upon behalf of
which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature  (seal)



MY APPT. EXPIRES MARCH 30, 2016

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1318-23-314-010
 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: <u>SD-Trust</u>	

3. Total Value/Sales Price of Property: \$ \$0.00
 Deed in Lieu of Foreclosure Only (value of property) _____
 Transfer Tax Value: \$ \$0.00
 Real Property Transfer Tax Due: \$ \$0.00

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # 7
 b. Explain Reason for Exemption: Transfer to grantor's trust for no consideration.

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 Gail Taylor Capacity GRANTOR
 Signature Gail Taylor Capacity GRANTEE

SELLER (GRANTOR) INFORMATION (REQUIRED)
 ROBERT J. TAYLOR & GAIL R. TAYLOR
 Print Name: _____
 Address: P.O. Box 18284
 City: South Lake Tahoe
 State: CA Zip: 96151

BUYER (GRANTEE) INFORMATION (REQUIRED)
 ROBERT J. & GAIL TAYLOR TRUSTEES
 Print Name: _____
 Address: P.O. Box 18284
 City: South Lake Tahoe
 State: CA Zip: 96151

COMPANY/PERSON REQUESTING RECORDING
 (required if not the seller or buyer)
 Print Name: STEVE'S DEEDS Escrow # TAYLOR
 Address: BOX 11506
 City: ZEPHYR COVE State: NEVADA Zip: 89448

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