A.P.N.:

1418-34-110-029

File No:

141-2485532 (NMP)

R.P.T.T.:

\$0.00

DOUGLAS COUNTY, NV RPTT:\$0.00 Rec:\$17.00

2015-862718

\$17.00

Pgs=4

05/27/2015 10:41 AM

FIRST AMERICANTITLE STATELINE

KAREN ELLISON, RECORDER

F05

When Recorded Mail To: Mail Tax Statements To:

Wade Alokozai

3813 Lake Ontario Drive Fremont, CA 94555

GRANT, BARGAIN and SALE DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Anoscha Alokozai, a married woman and spouse of grantee

do(es) hereby GRANT, BARGAIN and SELL to

Wade Alokozai, a married man as his sole and separate property

the real property situate in the County of Douglas, State of Nevada, described as follows:

ALL THAT PORTION OF LOTS 5, 6, AND 7, IN BLOCK D, OF LINCOLN PARK, AS SET FORTH ON THE OFFICIAL MAP FILED FOR RECORD SEPTEMBER 7, 1921, DOCUMENT NO. 305, OFFICIAL RECORDS OF DOUGLAS COUNTY, STATE OF NEVADA, AND A PORTION OF THE NORTHWEST 1/4 OF SECTION 34, TOWNSHIP 14 NORTH, RANGE 18 EAST, M.D.B. & M., MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT THE SOUTHERLY CORNER OF SAID LOT 7; THENCE NORTH 67°13'20" WEST 60.00 FEET; THENCE NORTH 43°35'04" EAST 106 98 FEET TO THE NORTHWESTERLY CORNER OF SAID LOT 5; THENCE SOUTH 67°13'20" EAST 51.00 FEET: THENCE SOUTH 67°13'20" EAST 39.93 FEET TO A POINT ON THE WESTERLY RIGHT OF WAY LINE OF U.S. HIGHWAY 50; THENCE ALONG SAID WESTERLY RIGHT OF WAY LINE, SOUTH 29°21'00" WEST 50.33 FEET; THENCE NORTH 67°13'20" WEST 43.17 FEET; THENCE SOUTH 44°34'45"WEST 53.86 FEET TO THE POINT OF BEGINNING.

NOTE: THE ABOVE METES AND BOUNDS DESCRIPTION APPEARED PREVIOUSLY IN THAT CERTAIN DOCUMENT RECORDED DECEMBER 14, 2010, IN BOOK 1210, PAGE 3466, AS INSTRUMENT NO. 775446.

Subject to

All general and special taxes for the current fiscal year. 1.

2. Covenants, Conditions, Restrictions, Reservations, Rights, Rights of Way and Easements now of record.

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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Anoscha Alekozai	

STATE OF California

COUNTY OF

This instrument was acknowledged before me on Anoscha Alokozai.

Notary Public

(My commission expires:

This Notary Acknowledgement is attached to that certain Grant, Bargain Sale Deed dated May 19, 2015 under Escrow No. 141-2485532.

: SS.

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 the i document. State of California County of _ - Alameda -__ before me, _- April Marie Sastini, Notary Public -On __- May 20, 2015 -Here Insert Name and Title of tile Officer personally appeared - Anoscha Alokozai -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 the she/they executed the same in this/her/their authorized capacity(les), and that by her/their signature(s) on the instrument the person(s); or the entity upon behalf of which the person acted, executed the instrument. I certify under PENALTY OF PERJL RY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official sea APRIL MARIE SASTINI Commission # 2001011 Notary Public - California Alameda County Signature of Not ary Public Ny Comm. Expires Dec 14, 2016 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: - Grant, Bargain and Sale Deed - Document Date: - 1 [ay 20, 2015 -Number of Pages: _-3 -_ Signer(s) Other Than Named Above: _-N/A -____ Capacity(ies) Claimed by Signer(s) Signer's Name: Signer's Name: ☐ Corporate Officer — Title(s): □ Corporate Officer — Title(s): __ ☐ Partner — ☐ Limited ☐ General ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact □ Individual ☐ Attorney in Fact □ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservator Other: ☐ Other: Signer Is Representing: Signer Is Representing:

STATE OF NEVADA DECLARATION OF VALUE

1.	Assessor Parcel Number(s)	\ \	
a)_	1418-34-110-029	\ \	
b)_		\ \	
c) ⁻	1	~ \ \ \	
d)_			
2.	Type of Property		
a)	Vacant Land b) 🔏 Single Fam. Res.	FOR RECORDERS OPTIONAL USE	
c)	Condo/Twnhse d) 2-4 Plex	Book Page:	
e)	Apt. Bldg. f) Comm'l/Ind'l	Date of Recording:	
g)	Agricultural h) Mobile Home	Notes:	
j)	Other		
• •		- \- \- \- \- \- \- \- \- \- \- \- \- \-	
3.	a) Total Value/Sales Price of Property:	\$	
	b) Deed in Lieu of Foreclosure Only (value of	(_\$)	
	c) Transfer Tax Value:	<u>s -6-/:</u>	
	d) Real Property Transfer Tax Due	8-0-	
4.	If Exemption Claimed:	/	
	a. Transfer Tax Exemption, per 375.090, Section	n: 05	
	b. Explain reason for exemption:		
	Interspectal Grant D	eed.	
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			
	information and belief, and can be supported by doc information provided herein. Furthermore, the		
clai	med exemption, or other determination of addit	onal tax due, may result in a penalty of	
109	% of the tax due plus interest at 1% per month.	Pursuant to NRS 375.030, the Buyer and	
Sel	ler shall be jointly and severally liable for any add		
Sig	nature marchan Jerring	Capacity: ESCrow Hount	
Sig	nature:	Capacity:	
	SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION	
	(REQUIRED)	(REQUIRED)	
Prir	nt Name: Anoscha Alokozav	Print Name: Wade Aloxozal	
	dress: 3813 Lake Maton o Dr	Address: 3813 Lake Contario	
City		city: Fremont	
Sta		State:(A Zip: 94555	
	MPANY/PERSON REQUESTING RECORDING		
First American Title Insurance			
Prir	nt Name: Company	File Number: 141-2485532 NMP/at	
	dress P.O. Box 645		
City	y: Zephyr Cove	State: NV Zip: 89448	
Name of Street, or other Designation of the Street, or other Desig	(AS A PUBLIC RECORD THIS FORM MAY	BE RECORDED/MICROFILMED)	