DOUGLAS COUNTY, NV

RPTT:\$0.00 Rec:\$15.00

2015-862928

\$15.00

Pgs=2

05/29/2015 11:29 AM

FIRST AMERICAN TITLE MINDEN

KAREN ELLISON, RECORDER

E05

A.P.N.:

1220-21-610-057

File No:

143-2484579 (SC)

R.P.T.T.:

\$-0- #5

When Recorded Mail To: Mail Tax Statements To: Byron M. Williams and Nancy Williams 719 Bluerock Road Gardnerville, NV 89460

GRANT, BARGAIN and SALE DEED

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

Byron M. Williams, a married man

do(es) hereby GRANT, BARGAIN and SELL to

Byron M. Williams and Nancy Williams, husband and wife as joint tenants

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

LOT 424, AS SHOWN ON THE OFFICIAL MAP OF GARDNERVILLE RANCHOS UNIT NO. 6, FILED FOR RECORD ON MAY 29, 1973, IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA AS DOCUMENT NO. 66512.

Subject to

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

Date: 05/28/2015

By on M. Williams

| STATE OF | NEVADA | |) |
|-----------|---------|--|-----|
| | | | :ss |
| COUNTY OF | DOUGLAS | |) |

This instrument was acknowledged before me on this: 28th day of May, 2015

By: Byron M. Wlilliams

Notary Public (My commission expires: $\frac{5/12/2019}{}$)



STATE OF NEVADA DECLARATION OF VALUE

| 1. | Assessor Parcel Number(s) | | | | |
|--|--|--|--|--|--|
| '. a) | 1220-21-610-057 | \ \ | | | |
| a)_ b) | 1220-21-010-031 | \ \ | | | |
| c) | | \ \ | | | |
| d)_ | | \ \ | | | |
| 2. | Type of Property | _ \ \ | | | |
| 2. a) | Vacant Land b) x Single Fam. Res | FOR RECORDERS OPTIONAL USE | | | |
| | Condo/Twnhse d) 2-4 Plex | Book Page: | | | |
| c) | | | | | |
| e) | Apt. Bldg. f) Comm'l/Ind'l | Date of Recording: | | | |
| g) | Agricultural h) Mobile Home | Notes: | | | |
| i) | Other | | | | |
| 3. | a) Total Value/Sales Price of Property: | \$0.00 | | | |
| | b) Deed in Lieu of Foreclosure Only (value of | (\$-()- | | | |
| | | | | | |
| | c) Transfer Tax Value: | \$0.00 | | | |
| | d) Real Property Transfer Tax Due | \$-0- | | | |
| 4. | If Exemption Claimed: | \ | | | |
| | a. Transfer Tax Exemption, per 375.090, Section | on: #5 | | | |
| | b. Explain reason for exemption: Adding Spous | | | | |
| | | | | | |
| 5. | Partial Interest: Percentage being transferred: | 100 % | | | |
| 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 | | | |
| the | rmation and belief, and can be supported by do information provided herein. Furthermore, the | parties agree that disallowance of any | | | |
| clai | med exemption, or other determination of addit | ional tax due, may result in a penalty of | | | |
| 10% | 6 of the tax due plus interest at 1% per month. | Pursuant to NRS 375.030, the Buyer and | | | |
| Sell | er shall be jointly and severally liable for any add | litional amount owed + | | | |
| Sig | nature: Myth Intil | Capacity: | | | |
| Sig | nature: | Capacity: | | | |
| | SELLER (GRANTOR) INFORMATION | BUYER (GRANTEE) INFORMATION | | | |
| | (REQUIRED) | (REQUIRED) | | | |
| | A MARIE | Byron M. Williams and | | | |
| | nt Name: Byron M. Williams | Print Name: Nancy Williams Address: 719 Bluerock Road | | | |
| | dress: 719 Bluerock Road | | | | |
| City | | City: Gardnerville | | | |
| Sta | | State: NV Zip: 89460 | | | |
| COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer) | | | | | |
| And the Owner, where | First American Title Insurance | File Number: 142, 2494570 SC/rg | | | |
| | nt Name: Company dress 1663 US Highway 395, Suite 101 | File Number: 143-2484579 SC/rg | | | |
| 796 | y: Minden | State: NV Zip: 89423 | | | |
| J.() | (AS A PUBLIC RECORD THIS FORM MAY | | | | |
| | , | • | | | |