



KAREN ELLISON, RECORDER E07

RECORDING REQUESTED BY AND
WHEN RECORDED MAIL TO:
MAIL TAX STATEMENT TO:

CHRISTOPHER D. WEBBER
1269 WRANGLER CIRCLE
MINDEN, NV. 89423

APN: 1420-33-312-033

SPACE ABOVE THIS LINE FOR RECORDER'S USE

MAIL TAX STATEMENTS TO:
Christopher D. Webber
PO BOX 1906
Minden, NV. 89423

~~SAME AS ABOVE~~

DOCUMENTARY TRANSFER TAX \$NONE/NO
CONSIDERATION ϕ
...Computed on the consideration or value of property
conveyed, OR
...Computed on the consideration or value less liens
or encumbrances remaining at time of sale
THIS CONVEYANCE TRANSFERS GRANTOR(S)
INTEREST INTO OR OUT OF HIS/HER/THEIR
INTERVIVOS TRUST NRS 375.090, SECTION 07
Signature of Declarant or Agent determining tax -
Firm Name: United Estate Planning Inc.
THE UNDERSIGNED GRANTOR(S) HEREBY
DECLARE

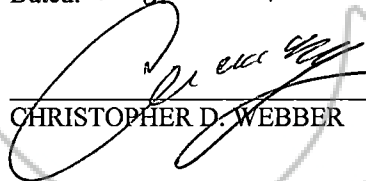
GRANT DEED

FOR A VALUABLE CONSIDERATION Receipt of which is hereby acknowledged CHRISTOPHER D. WEBBER does hereby grants to CHRISTOPHER D. WEBBER, AS TRUSTEE OF THE CHRISTOPHER D. WEBBER REVOCABLE TRUST DATED, the real property in the County of Douglas, State of Nevada, described as follows:

LOT 216 AS SET FORTH ON THE FINAL MAP OF WILDHORSE UNIT NO. 6, A PLANNED UNIT DEVELOPMENT, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVEDA, ON MARCH 15, 1994, IN BOOK 394, PAGE 2741, AS DOCUMENT NO. 332336.

COMMONLY KNOWN AS: 1269 WRANGLER CIRCLE, MINDEN, NV. 89423

Dated: *August 25, 2015*


CHRISTOPHER D. WEBBER

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 that document


STATE OF ~~CALIFORNIA~~ Nevada)
) SS
COUNTY OF DOUGLAS)

ON August 25, 2015, BEFORE ME Jodi O Stovall, A NOTARY PUBLIC PERSONALLY APPEARED CHRISTOPHER D. WEBBER 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 THE ENTITY UPON BEHALF OF WHICH THE PERSON(S) ACTED, EXECUTED THE INSTRUMENT.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING PARAGRAPH IS TRUE AND CORRECT.

WITNESS MY HAND AND OFFICIAL SEAL,

Jodi O Stovall
NOTARY PUBLIC

 JODI O. STOVALL
Notary Public - State of Nevada
Appointment Recorded in Douglas County
No: 03-79473-5 - Expires August 3, 2016

868657

STATE OF NEVADA DECLARATION OF VALUE

- 1. Assessor Parcel Number (s)**
 a) 1420-33-312-033
 b) _____
 c) _____
 d) _____

- 2. Type of Property:**
- | | | | |
|-----------------------------|--------------|--|-----------------|
| a) <input type="checkbox"/> | Vacant Land | b) <input checked="" type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex |
| e) <input type="checkbox"/> | Apt. Bldg. | f) <input type="checkbox"/> | Comm'/Ind'l |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

FOR RECORDERS OPTIONAL USE ONLY	
Notes:	<u>Trust OK - J</u>

- 3. Total Value/Sales Price of Property:** \$ 0.00
 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: 7
 b. Explain Reason for Exemption: Transfer without consideration to or from a trust.

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 information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the 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 _____ Capacity Grantor
 Signature _____ Capacity Grantee

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)
 Print Name: Christopher D. Webber
 Address: 1269 Wrangler Circle
 City: Minden
 State: Nv Zip: 89423

(REQUIRED)
 Print Name: The Christopher D. Webber R.T. Dtd 5/23/15
 Address: 1269 Wrangler Circle
 City: Minden
 State: Nv Zip: 89423

Christopher D. Webber, as Trustee of The Christopher D. Webber Revocable Trust
COMPANY/PERSON REQUESTING RECORDING Dated 5-22-15

(REQUIRED IF NOT THE SELLER OR BUYER)
 Print Name: United Estate Planning, Inc. Escrow # _____
 Address: 500 N. State College Blvd., Suite 1100
 City: Orange State: Ca Zip: 92868