



KAREN ELLISON, RECORDER E07

APN# 1319-10-210-002

Recording Requested by/Mail to:

Name: PENELOPE PAPPAS

Address: P.O. Box 897

City/State/Zip: GENOA, NV 89411

Mail Tax Statements to:

Name: PENELOPE PAPPAS

Address: P.O. Box 897

City/State/Zip: GENOA, NV 89411

QUIT CLAIM DEED

Title of Document (required)

----- (Only use if applicable) -----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

- Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)
- Judgment – NRS 17.150(4)
- Military Discharge – NRS 419.020(2)

Penelope Pappas
Signature

Penelope Pappas
Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

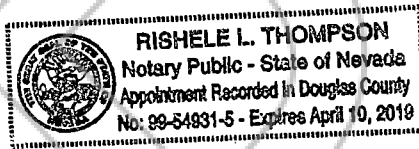
IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written.

James Gregory Pace
James Gregory Pace
Penelope Pappas
Penelope Pappas, Trustee

State of Nevada)
) ss.
County of Douglas)

This instrument was acknowledged before me on the 20 day of August, 2015, by James Gregory Pace and Penelope Pappas.

Rishele L. Thompson
Notary Public

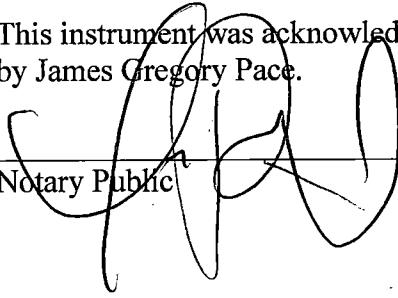


COOPER

State of Nevada)
) ss.
County of Douglas)

This instrument was acknowledged before me on the 21 day of August, 2015,
by James Gregory Pace.

Notary Public



COPY

EXHIBIT "A"

A PARCEL OF LAND LOCATED WITHIN A PORTION OF SECTION 10, TOWNSHIP 13 NORTH, RANGE 19 EAST, MOUNT DIABLO MERIDIAN, DOUGLAS COUNTY, NEVADA, DESCRIBED AS FOLLOWS:

A PORTION OF PARCELS 1 AND 2, AS SET FORTH ON PARCEL MAP FOR COIT ENTERPRISES, INC., FILED FOR RECORD NOVEMBER 23, 1992, IN BOOK 1192, PAGE 3832, DOCUMENT NO. 293701, OFFICIAL RECORDS OF DOUGLAS COUNTY, NEVADA, AND BEING FURTHER DESCRIBED AS FOLLOWS:

COMMENCING AT THE SOUTHWEST CORNER OF PARCEL 1, AS SHOWN ON THE PARCEL MAP FOR COIT ENTERPRISES, INC., AS RECORDED NOVEMBER 23, 1992 IN BOOK 1192 PAGE 3832, DOCUMENT NO. 293701, OFFICIAL RECORDS OF DOUGLAS COUNTY, NEVADA, THENCE SOUTH 71°41'40" EAST, 132.15 FEET TO THE POINT OF BEGINNING;

**THENCE NORTH 24°09'09" EAST, 330.22 FEET;
THENCE SOUTH 70°43'51" EAST, 166.20 FEET;
THENCE SOUTH 24°09'09" WEST, 327.41 FEET;
THENCE NORTH 71°41'40" WEST, 166.46 FEET TO THE POINT OF BEGINNING.**

REFERENCE IS MADE TO THAT CERTAIN RECORD OF SURVEY TO SUPPORT A BOUNDARY LINE ADJUSTMENT FOR COIT ENTERPRISES, INC., FILED FOR RECORD APRIL 1, 1993, BOOK 493, PAGE 115, DOCUMENT NO. 303571, OFFICIAL RECORDS OF DOUGLAS COUNTY, NEVADA.

NOTE: THE ABOVE METES AND BOUND DESCRIPTION APPEARED PREVIOUSLY IN THAT CERTAIN DOCUMENT RECORDED JULY 2, 2004, IN BOOK 0704, PAGE 01213, AS INSTRUMENT NO. 0617868.

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1319-10-210-002
 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>Trust Verified</u>	

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 # 7
 b. Explain Reason for Exemption: Transfer to Trust without 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 Penelope Pappas Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)
Penelope Pappas, trustee

BUYER (GRANTEE) INFORMATION
(REQUIRED)
Penelope Pappas, Trustee

Print Name: _____
 Address: P.O. Box 897
 City: Genoa
 State: NV Zip: 89411

Print Name: _____
 Address: P.O. Box 897
 City: Genoa
 State: NV Zip: 89411

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)