

APN: 1221-14-000-005

The undersigned hereby affirms  
that there is no  
Social Security number  
contained in this document.



00030032201608764210030034

KAREN ELLISON, RECORDER

E05

WHEN RECORDED MAIL TO:  
George M. Keele, Esq.  
1692 County Road, Ste. A  
Minden, NV 89423

Mail tax statements to:  
David and Allison Gamble  
P.O. Box 3143  
Gardnerville, NV 89410

R.P.T.T. 5

**GRANT, BARGAIN AND SALE DEED**

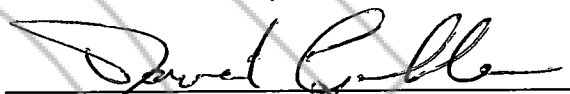
**GRANT, BARGAIN AND SALE DEED**

THIS INDENTURE WITNESSETH: That DAVID R. GAMBLE, a widower, hereinafter referred to as GRANTOR, in consideration of \$10.00 plus, the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell, and Convey to DAVID R. GAMBLE and ALLISON YOUNG GAMBLE, husband and wife as joint tenants, hereinafter referred to as Grantees, and to the heirs, successors, and assigns of such GRANTEES forever, all that real property situated in the County of Douglas, State of Nevada, commonly known as 951 Qadosh, Gardnerville, Nevada, and more particularly described as follows:

PARCEL A AS SET FORTH ON THAT CERTAIN PARCEL MAP LDA 02-031, FOR CITY OF REFUGE, FILED FOR RECORD IN THE OFFICE OF THE DOUGLAS COUNTY RECORDER ON FEBRUARY 19, 2003, FILE NO. 567496.


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

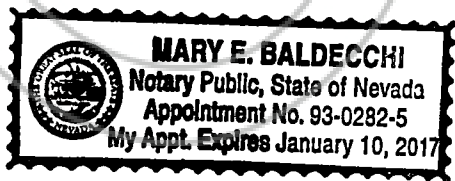
Witness my hand this 5<sup>th</sup> day of February, 2016.

  
\_\_\_\_\_  
DAVID R. GAMBLE

STATE OF NEVADA        )  
                                  : ss.  
COUNTY OF DOUGLAS    )

This instrument was acknowledged before me on the 5<sup>th</sup> day of Feb., 2016, by DAVID R. GAMBLE.

  
\_\_\_\_\_  
Notary Public



# STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)  
 (a) 1221-14-000-005  
 (b) \_\_\_\_\_  
 (c) \_\_\_\_\_  
 (d) \_\_\_\_\_

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Document/Instrument#: \_\_\_\_\_

Book: \_\_\_\_\_ Page: \_\_\_\_\_

Date of Recording: \_\_\_\_\_

Notes: \_\_\_\_\_

2. Type of Property:
- |                 |                     |
|-----------------|---------------------|
| a) Vacant Land  | b)X 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        |                     |

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: 5  
 b. Explain Reason for Exemption: Beeding to add wife.

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 David R. Gamble Capacity Grantor  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**

(REQUIRED)

Print Name: David R. Gamble  
 Address: P.O. Box 3143  
 City: Gardnerville  
 State: NV Zip: 89410

**BUYER (GRANTEE) INFORMATION**

(REQUIRED)

Print Name: David R. Gamble and Allison Young Gamble  
 Address: P.O. Box 3143  
 City: Gardnerville  
 State: NV Zip: 89410

**COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)**

Print Name: George M. Keele Escrow # \_\_\_\_\_  
 Address: 1697 County Rd, #A  
 City: Minden State: NV Zip: 89423