

DOUGLAS COUNTY, NV
RPTT:\$1014.00 Rec:\$17.00
\$1,031.00 Pgs=4
TICOR TITLE - GARDNERVILLE
KAREN ELLISON, RECORDER

2016-877308

02/26/2016 08:34 AM

WHEN RECORDED MAIL TO:
Barbara Weaver Johnson, Trustee of the Barbara
Weaver Johnson Living Trust UAD 03/05/1999
PO BOX 3570
Las Cruces, NM 88003

MAIL TAX STATEMENTS TO:
Same as above

Escrow No. 01600539-RLT

The undersigned hereby affirms that this document
submitted for recording does not contain the social
security number of any person or persons.
(Pursuant to NRS 239b.030)

APN No.: 1320-33-816-049

R.P.T.T. \$ 1,014.00

SPACE ABOVE FOR RECORDER'S USE ONLY

GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That Janice Crawford, An Unmarried Woman

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, do/does hereby Grant,
Bargain, Sell and Convey to Barbara Weaver Johnson, Trustee of the Barbara Weaver Johnson Living Trust
UAD 03/05/1999

all that real property situated in the County of Douglas, State of Nevada, described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND BY REFERENCE MADE A PART HEREOF

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in
anywise appertaining.

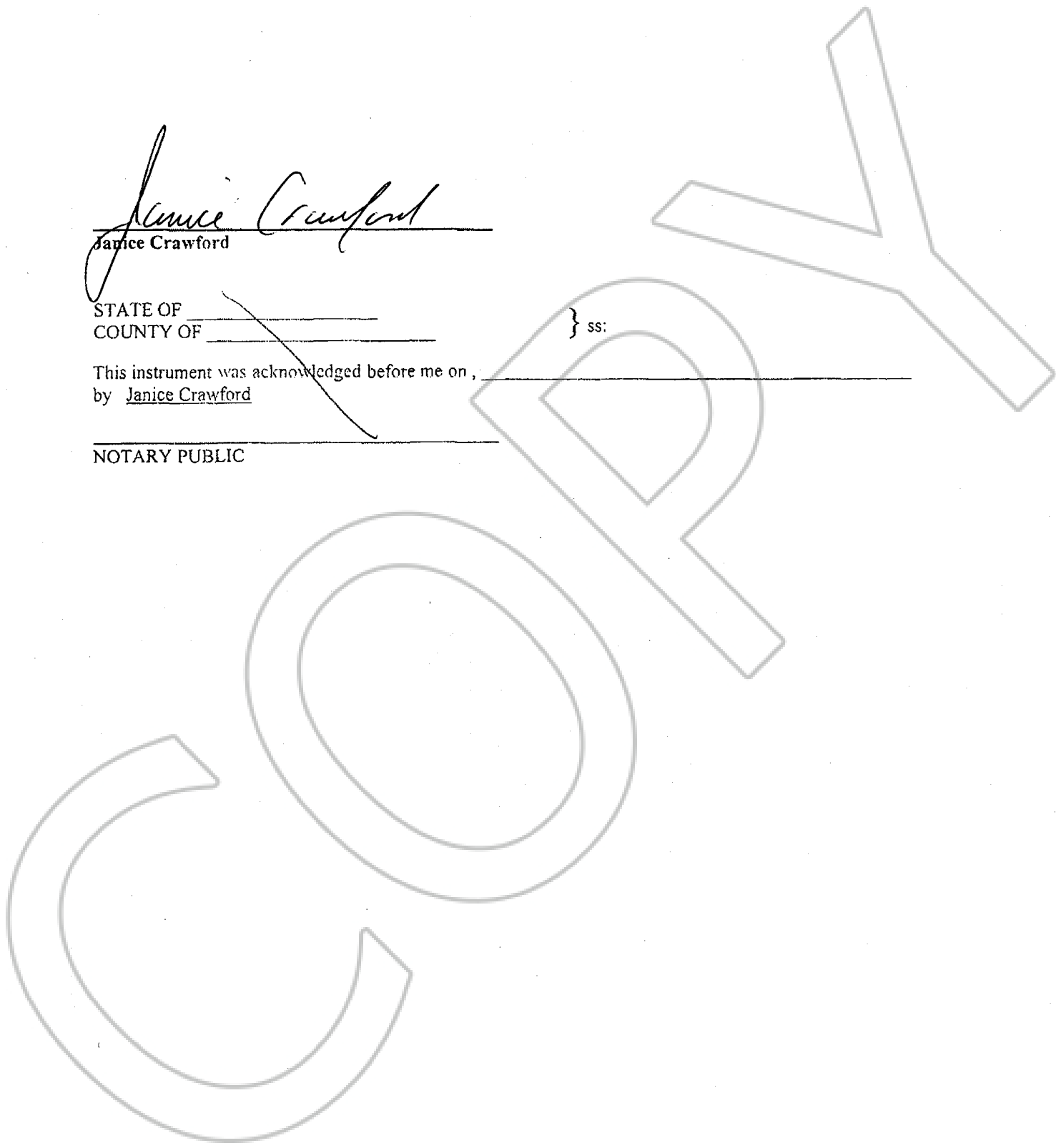
Janice Crawford
Janice Crawford

STATE OF _____
COUNTY OF _____

} ss:

This instrument was acknowledged before me on _____
by Janice Crawford

NOTARY PUBLIC



ACKNOWLEDGMENT

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
County of Contra Costa

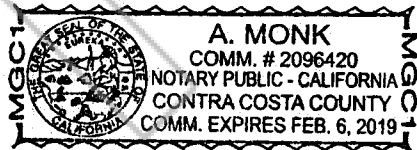
On 2/24/2016 before me, A. Monk, Notary Public
(insert name and title of the officer)

personally appeared Janice Crawford
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 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.

Signature  (Seal)



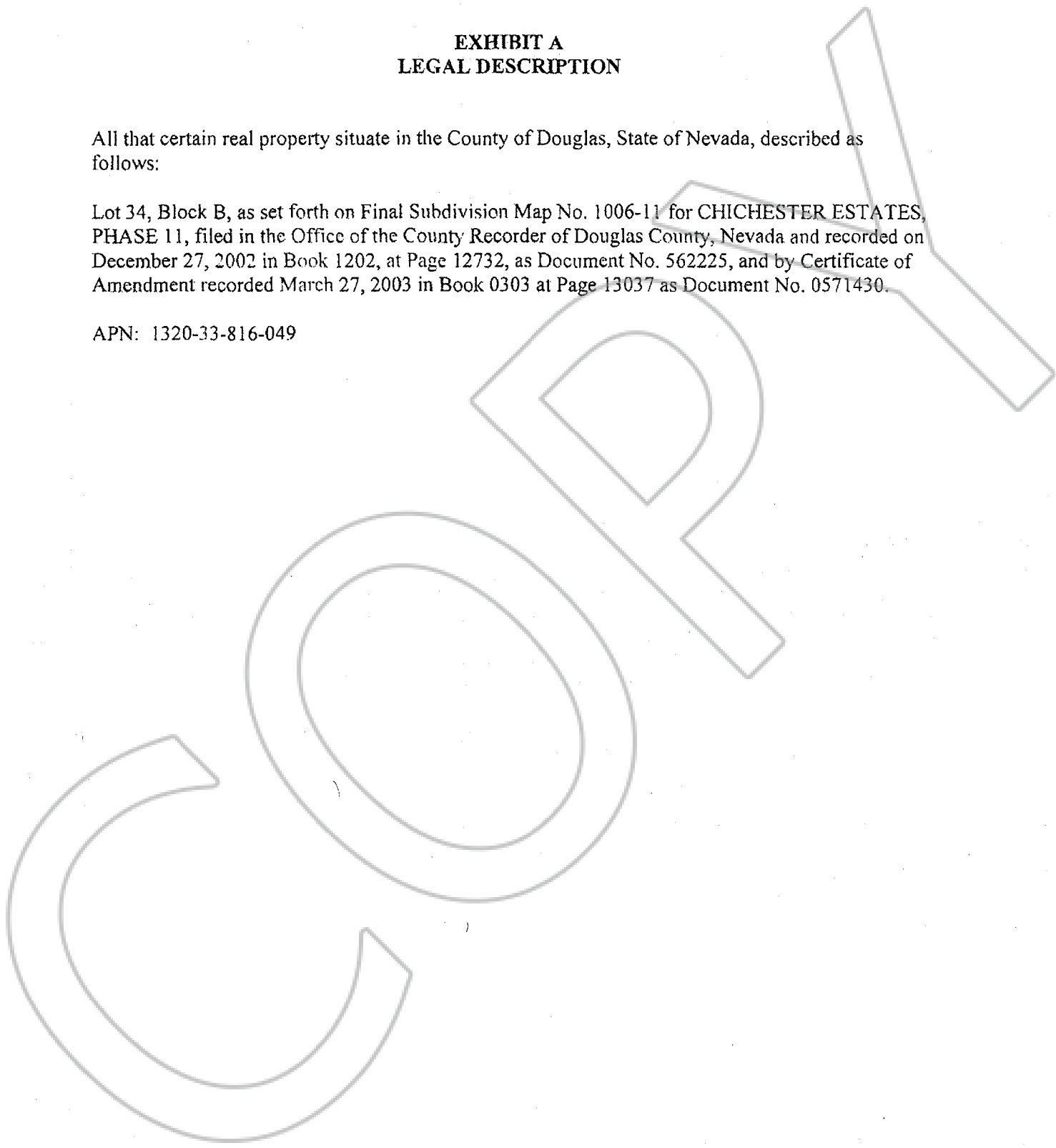
Escrow No. 01600539-RLT

**EXHIBIT A
LEGAL DESCRIPTION**

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

Lot 34, Block B, as set forth on Final Subdivision Map No. 1006-11 for CHICHESTER ESTATES, PHASE 11, filed in the Office of the County Recorder of Douglas County, Nevada and recorded on December 27, 2002 in Book 1202, at Page 12732, as Document No. 562225, and by Certificate of Amendment recorded March 27, 2003 in Book 0303 at Page 13037 as Document No. 0571430.

APN: 1320-33-816-049



STATE OF NEVADA-DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)

- a) 1320-33-816-049
- 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: _____

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$260,000.00
 \$ _____
 Transfer Tax Value \$260,000.00
 Real Property Transfer Tax Due: \$1,014.00

4. If Exemption Claimed

- a. Transfer Tax Exemption, per NRS 375.090, Section _____
- b. Explain Reason for Exemption: _____

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 *Janice Crawford* Capacity grantor
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)

BUYER (GRANTEE) INFORMATION (REQUIRED)

Print Name: Janice Crawford
 Address: 10 Summer Meadows Ct.
Alamo, CA 94507
 City, State, Zip

Print Name: Barbara Weaver Johnson, Trustee of the Barbara Weaver Johnson Living Trust UAD
03/05/1999
 Address: PO BOX 3570
Las Cruces, NM 88003
 City, State Zip

COMPANY/PERSON REQUESTING RECORDING (Required if not the Seller or Buyer)

Print Name: Ticor Title of Nevada, Inc. Escrow #: 01600539-RLT
 Address: 1483 Highway 395, Suite B
 City, State, Zip: Gardnerville, NV 89410