

A.P.N. 1320-33-715-003

RECORDING REQUESTED BY

National Closing Solutions
1436 Industrial Way, #6
Gardnerville, NV 89410

**WHEN RECORDED MAIL THIS DEED
AND, UNLESS OTHERWISE SHOWN
BELOW, MAIL TAX STATEMENTS TO:**

Joanne M. Spahr
PO Box 1222
Minden, NV 89423

DOUGLAS COUNTY, NV

2016-878193

RPTT:\$0.00 Rec:\$15.00

\$15.00 Pgs=2

03/16/2016 12:36 PM

STEWART TITLE LAS VEGAS WARM SPRINGS

KAREN ELLISON, RECORDER

E05

Please complete Affirmation Statement below:

- I the undersigned hereby affirm that this document submitted for recording does not contain the social security number of any person or persons (Per NRS 239B.030)
- I the undersigned hereby affirm that this document submitted for recording contains the social security number of a person or persons as required by law: _____ (State specific law)

Signature (Print name under signature)

Title

Order Number: P-135817

GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That **Joanne M. Spahr, spouse of the Grantee herein**

In consideration of \$10.00 the receipt of which is hereby acknowledged, do hereby Grant, Bargain, Sell and Convey to **Carl James Spahr, a married man as his sole and separate property**

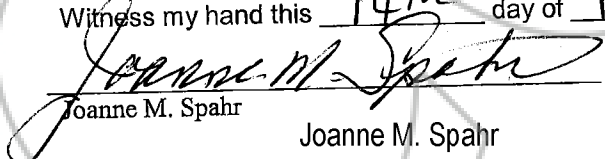
All that real property situated in the County of **Douglas** State of Nevada, bounded and described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF FOR FULL LEGAL DESCRIPTION

Address: ,

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

Witness my hand this 14th day of March 2016


Joanne M. Spahr

Joanne M. Spahr

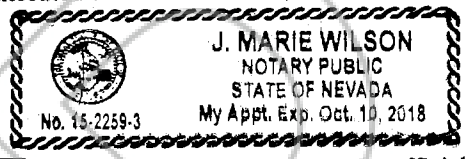
Dated: 14th day of March, 2016

State of Nevada)
County of Douglas)
On 14th, March, 2016, before me, J. Marie Wilson
Notary Public, Joanne M. Spahr

Personally known to me (or 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.

Witness my hand and official seal.

J. Marie Wilson
Notary Public in and for said County and State



(Space above for official notarial area.)



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1320-33-715-003
 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: \$ 0
 Deed in Lieu of Foreclosure Only (value of property) _____
 Transfer Tax Value: \$ 0
 Real Property Transfer Tax Due: \$ 0

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # 5
 b. Explain Reason for Exemption: Transfer from spouse

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 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 375.039, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Carl James Spahr Capacity buyer
 Signature Joanne M. Spahr Capacity seller

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: Joanne M. Spahr
 Address: PO Box 1222
 City: Minden
 State: NV Zip: 89423

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Carl James Spahr
 Address: PO Box 1222
 City: Minden
 State: NV Zip: 89423

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)
 Print Name: STEWART TITLE COMPANY Escrow # 01415-20494
 Address: 376 E WARM SPRINGS ROAD, SUITE 190
 City: LAS VEGAS State: NV Zip: 89190

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)