

AND WHEN RECORDED MAIL TO:
THE JEAN L. METCALFE & JAN T. BARKER
REVOCABLE LIVING TRUST DATED AUGUST 22, 2005

1765 EVERGREEN CT.
MINDEN, NEVADA 89423

Order No.:
Escrow No.:

APN: 1330-29-118-016

DOUGLAS COUNTY, NV 2016-878382
Rec:\$16.00
Total:\$16.00 03/21/2016 12:56 PM
JAN T BARKER Pgs=4



KAREN ELLISON, RECORDER E07

GRANT DEED

THE UNDERSIGNED GRANTOR(S) DECLARE(S):

DOCUMENTARY TRANSFER TAX IS: _____

- Computed on the full value of the property conveyed, or
- Computed on full value less value of liens or encumbrances remaining at the time of sale,
- Realty not sold
- Unincorporated area City of MINDEN, and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

JAN T. BARKER, TRUSTEE OF THE BARKER TRUST DATED AUGUST 27, 1986

Hereby GRANT(S) to: JEAN L. METCALFE AND JAN T. BARKER, TRUSTEES OF
THE JEAN L. METCALFE & JAN T. BARKER REVOCABLE LIVING TRUST,
DATED AUGUST 22, 2005

The following described real property in the city of MINDEN, State of NEVADA:
As shown in Exhibit "A" attached hereto and made a part hereof, and commonly known as:

* REFER TO ATTACHMENT

Dated: 3-21-2016

JAN T. BARKER
Signature of Grantor

JAN T. BARKER
Print Name

Dated: _____

Signature of Grantor

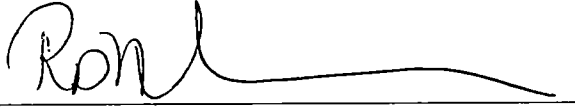
Print Name

Mail Tax Statements To: Same As Above

STATE OF NEVADA
COUNTY OF DOUGLAS

} SS:

This instrument was acknowledged before me on March 21, 2016 , by Jan T. Barker.



NOTARY PUBLIC

This Notary Acknowledgement is attached to that certain Grant Deed dated 3-21-16.



COOPER

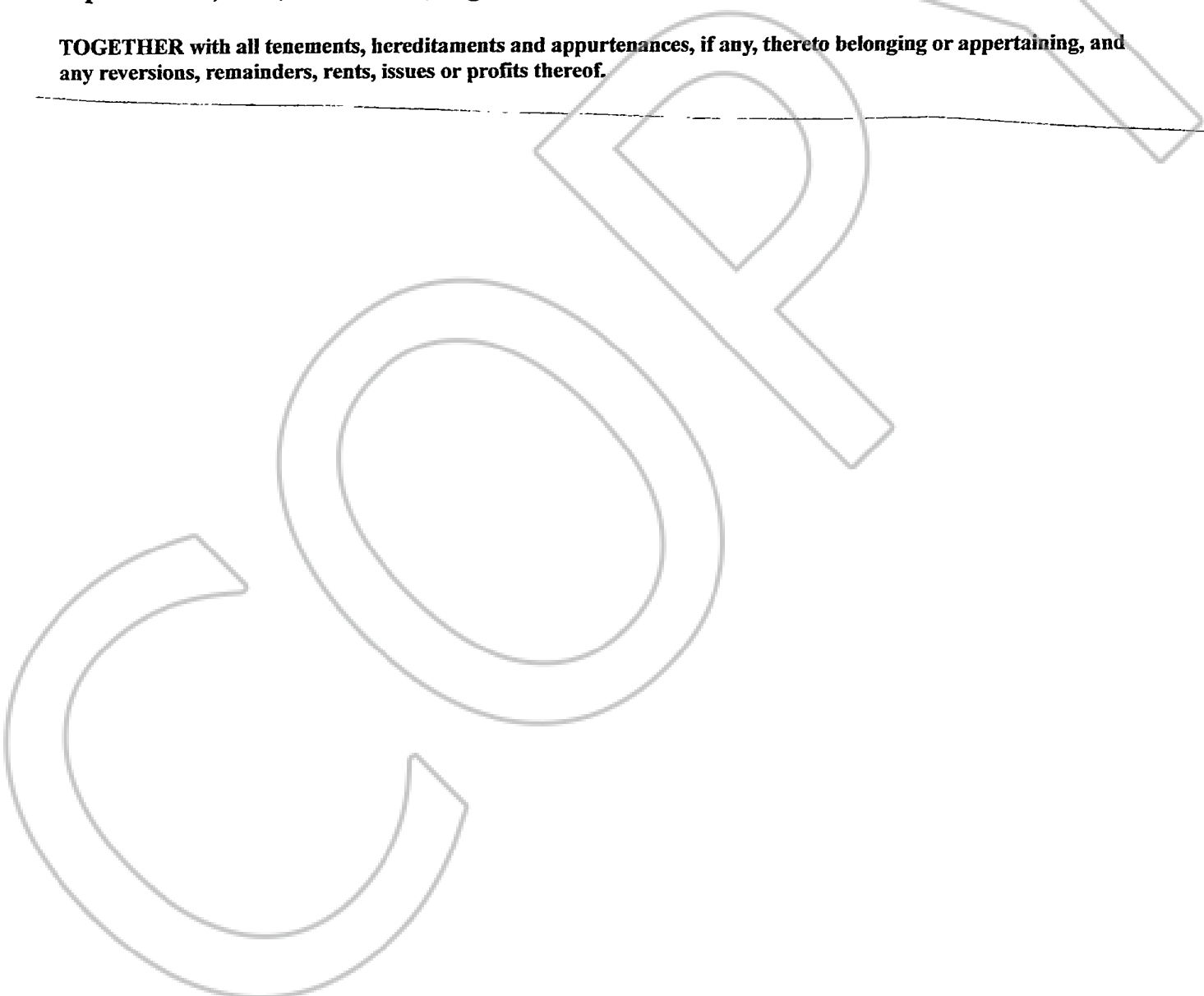
PARCEL 1:

Unit 157, as shown on the Official Plat of WINHAVEN, UNIT NO. 4, PHASE B, filed our record in the office of the County Recorder of Douglas County, State of Nevada, on August 19, 1993, in Book 893, Page 3899, Document No. 315527.

PARCEL 2:

A Non-Exclusive easement for use, enjoyment, ingress and egress over the common area as set forth in the Declaration of Covenants, Conditions and Restrictions, recorded September 28, 1990, in Book 990, Page 4348, as Document No. 235644, Official Records.

TOGETHER with all tenements, hereditaments and appurtenances, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1320-29-118-016
 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 Cont OK - KLE</u>	

3. Total Value/Sales Price of Property: \$ 0
 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: "WITHOUT CONSIDERATION"
INTO & OUT OF TRUST

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 Jant. Barker Capacity TRUSTEE

Signature Jean L. Metcalfe Capacity Trustee

SELLER (GRANTOR) INFORMATION
 (REQUIRED)
JANT. BARKER, TRUSTEE OF THE
 Print Name: BARKER TRUST DATED
 Address: AUGUST 27, 1986
 City: 1765 EVERGREEN CT.
 State: MINDEN NV Zip: 89423

BUYER (GRANTEE) INFORMATION
 (REQUIRED)
THE JEAN L. METCALFE & JANT. BARKER REVOCABLE
 Print Name: LIVING TRUST DATED AUGUST 27, 2005
 Address: 1765 EVERGREEN CT.
 City: MINDEN
 State: NV Zip: 89423

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)