DOUGLAS COUNTY, NV RPTT:\$1131.00 Rec:\$16.00

2016-878891

\$1,147.00 Pgs=3

04/01/2016 10:23 AM

FIRST CENTENNIAL - RENO KAREN ELLISON, RECORDER

APN: 1220-16-411-012

Escrow No. 00217903 - 016 - 17 RPTT 1,131.00 When Recorded Return to: Dr. Ellis Pizzi 121 Warren Road San Mateo, CA 94401 Mail Tax Statements to: Grantee same as above

SPACE ABOVE FOR RECORDERS USE

## Grant, Bargain, Sale Deed

For valuable consideration, the receipt of which is hereby acknowledged, Lance L. Altenau, A married man, as his sole and separate property

do(es) hereby Grant, Bargain, Sell and Convey to Dr. Ellis Pizzi and Susan Pizzi, Trustees of the Pizzi Family Trust dated December 26, 2000 and retstated on January 12, 2016

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

See Exhibit A attached hereto and made a part hereof.

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

Witness my/our hand(s) this 31 day of MAPCH

Lance L. Altenau

STATE OF CA **COUNTY OF** 

> This instrument was acknowledged before me on MAD 2016.

by Lance L. Altenau\_

**NOTARY PUBLIC** 

SPACE BELOW FOR RECORDER

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.

Date  Date	State of California )	
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/arr 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.    Certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.    RRISTOFER AST Commission # 2144758 Notary Public - California San Diego County Wy Comm. Expires Mar 29, 2020     Signature	County of SWDECD )	\ \
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(les), 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.    Dertify 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.	On 3 31  2010 before me, 4	CHOTEFEL AUT NOTALIN
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.  WITNESS my hand and official seal.  Signature OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document:  Number of Pages: Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Corporate Officer — Title(s):  Partner — Limited General  Individual Attorney in Fact  I rrustee Guardian or Conservator  Other:	Date	the state of the s
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/arc 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.    Leartify 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.	personally appeared	ALTENAD
subscribed to the within instrument and acknowledged to me that he/she/they executed the same ir his/her/their authorized capacity(les), 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.    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.		Name(s) of Signer(s)
of the State of California that the foregoing paragraph is true and correct.  WITNESS my hand and official seal.  WITNESS my hand and official seal.  WITNESS my hand and official seal.  Signature of Notary Public  Place Notary Seal Above  OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document:	subscribed to the within instrument and acknowled his/her/their authorized capacity(ies), and that by his	edged to me that he/she/they executed the same in s/her/their signature(s) on the instrument the person(s),
Commission # 2144758 Notary Public - California San Diego County My Comm. Expires Mar 29, 2020  Place Notary Seal Above  OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document:  Number of Pages:  Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Corporate Officer — Title(s):  Partner — Limited General  Individual Attorney in Fact  Guardian or Conservator  Other:  Other:  WITNESS THY Itaria and official seal.  Signature  Signature  Optional  Signature Optional deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Document Date:  Corporate Officer — Title(s):  Corporate Officer — Title(s):  Partner — Limited General  Individual Attorney in Fact  Guardian or Conservator  Other:	· · · · · · · · · · · · · · · · · · ·	of the State of California that the foregoing paragraph
Notary Public - California San Diego County Seal Above  Place Notary Seal Above  OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document:  Number of Pages:  Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Corporate Officer — Title(s):  Partner — Limited — General  Individual — Attorney in Fact  Trustee — Guardian or Conservator  Other:  Other:	Commission # 2144758	WITNESS my hand and official seal.
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Title or Type of Document:		
Title or Type of Document:	Description of Attached Document	\ \ \ \ \
Number of Pages: Signer(s) Other Than Named Above:		Document Date:
Signer's Name:  Corporate Officer — Title(s):  Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other:  Signer's Name: Corporate Officer — Title(s): Partner — Limited General Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator		n Named Above:
□ Corporate Officer — Title(s):       □ Corporate Officer — Title(s):         □ Partner — □ Limited □ General       □ Partner — □ Limited □ General         □ Individual       □ Attorney in Fact         □ Trustee       □ Guardian or Conservator         □ Other:       □ Other:	Capacity(ies) Claimed by Signer(s)	
□ Partner - □ Limited □ General       □ Partner - □ Limited □ General         □ Individual □ Attorney in Fact       □ Individual □ Attorney in Fact         □ Trustee □ Guardian or Conservator       □ Trustee □ Guardian or Conservator         □ Other: □ Other: □	Signer's Name:	
☐ Individual       ☐ Attorney in Fact       ☐ Individual       ☐ Attorney in Fact         ☐ Trustee       ☐ Guardian or Conservator       ☐ Trustee       ☐ Guardian or Conservator         ☐ Other:       ☐ Other:       ☐ Other:		
☐ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservator ☐ Other: ☐		r — <i>p</i>
☐ Other: ☐ Other:	The state of the s	

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## Exhibit A

Lot 6, in Block B, as shown on the Final Map of MOUNTAIN SHADOW APARTMENTS, recorded in the Office of the Recorder of Douglas County, Nevada on February 5, 1992, in Book 292, Page 472, as Document No. 270423.



1. APN: 1220-16-411-012	
2. Type of Property: a) □ Vacant Land b) □ Single Fam. Res. c) □ Condo/Twnhse e) □ Apt. Bldg f) □ Comm'l/Ind'l g) □ Agricultural i) □ Other	
	FOR RECORDERS OPTIONAL LISE ONLY
	FOR RECORDERS OPTIONAL USE ONLY
	Document Instrument No.:
	Book: Page:
	Date of Recording: Notes:
	Notes.
STATE OF NEVADA	
DECLARATION OF VALUE	
DECLARATION OF VALUE	
3. Total Value/Sales Price of Property:	\$290,000.00
Deed in Lieu of Foreclosure Only (value of property)	
Transfer Tax Value: \$290.000.00 Real Property Transfer Tax Due: \$_1/3/.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 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 Lener 7 Miles	Capacity grantor
Signature	Capacity grantee
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(Required)	(Required)
Print Name: Lance L. Altenau	Print Name: Dr. Ellis Pizzi, et al, trustees*
Address: 6635 Senecio Place	Address: 121 Warren Road
City/State/Zip: San Diego, CA 92130	City/State/Zip: San Mateo, CA 94401
COMPANY REQUE	STING RECORDING
Co. Name: First Centennial Title Company of NV	Escrow # 00217903-016dr
Address: 704 West Nye Lane, Suite 101 Carson City, NV 89703	
(AS A BURLIC BECORD THIS	CODM MAY DE DECORDED

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED

<sup>\*</sup>of the Pizzi Family trust dated 12-26-00 & restated 1-12-16