

THE UNDERSIGNED HEREBY AFFIRMS THAT
THIS DOCUMENT DOES NOT CONTAIN A
SOCIAL SECURITY NUMBER.



KAREN ELLISON, RECORDER

E05

APN: 1418-27-411-006

WHEN RECORDED MAIL TO:
SEND TAX DOCUMENTS TO:
Lisa M. Kaplan
P.O. Box 1939
Zephyr Cove, NV 89448

SPACE ABOVE FOR RECORDER'S USE ONLY

QUIT CLAIM DEED

I, DAVID B. KAPLAN, for no consideration, which is hereby acknowledged, do hereby remise, release and forever quit claim all right, title and interest to LISA M. KAPLAN, a married woman, as her sole and separate property, the following described real property situated in Douglas County, State of Nevada, bounded and described as:

Unit 6, as set forth on the Official Plat of CAVE ROCK VILLAS, being a subdivision of Lot 3, Cave Rock Estates, Unit No. 1, recorded August 16, 1977, in Book 877, Page 862, as Document No. 12016 of Official Records of Douglas County, State of Nevada, and as amended by Record of Survey of Cave Rock Villas, recorded October 9, 1979, in Book 1079, Page 634, as Document No. 37479 of Official Records of Douglas County, State of Nevada.

TOGETHER WITH an undivided 1/22nd interest in and to that portion designated as Common Area, as set forth on the Official Plat of CAVE ROCK VILLAS, being a subdivision of Lot 3, Cave Rock Estates, Unit No. 1, recorded August 16, 1977, in Book 877, Page 862, as Document No. 12016 of Official Records of Douglas County, State of Nevada, and as amended by Record of Survey of Cave Rock Villas, recorded October 9, 1979, in Book 1079, Page 634, as Document No. 37479 of Official Records of Douglas County, State of Nevada.

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

DATE: 3/29/16


Signature, DAVID B. KAPLAN

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 SAN DIEGO

On MARCH 29, 2016 before me, Vanessa X. Garcia, Notary Public
(insert name and title of the officer)

personally appeared DAVID B. KAPLAN
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)



STATE OF NEVADA
DECLARATION OF VALUE

- 1. Assessors Parcel Number(s)
 - a) 1418-27-411-006
 - 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	
DOCUMENT/INSTRUMENT #:	_____
BOOK _____	PAGE _____
DATE OF RECORDING:	_____
NOTES:	_____

3. Total Value/Sales Price of Property: \$ _____
 Deed in Lieu of Foreclosure Only (value of property) (_____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 0.00

- 4. If Exemption Claimed:
 - a. Transfer Tax Exemption per NRS 375.090, Section # 5
 - b. Explain Reason for Exemption: A transfer of real property if the owner is related to the person to whom it is conveyed within the first degree of lineal consanguinity or affinity. To wife
- 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 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature [Signature]
 Signature _____

Capacity Grantor _____
 Capacity _____

**SELLER (GRANTOR) INFORMATION
(REQUIRED)**

Print Name: David B. Kaplan
 Address: P.O. Box 1939
 City: Zephyr Cove
 State: NV Zip: 89448

**BUYER (GRANTEE) INFORMATION
(REQUIRED)**

Print Name: Lisa M. Kaplan
 Address: P.O. Box 1939
 City: Zephyr Cove
 State: NV Zip: 89448

COMPANY/PERSON REQUESTING RECORDING
 (required if not the seller or buyer)

Print Name: A+ Paralegals, Inc. Escrow # _____
 Address 411 W. Third Street, Suite 1
 City: Carson City State: NV Zip: 89703