

APN: 122-194-13

The undersigned hereby affirms
that there is no
Social Security number
contained in this document.



00040093201608852060030033

KAREN ELLISON, RECORDER

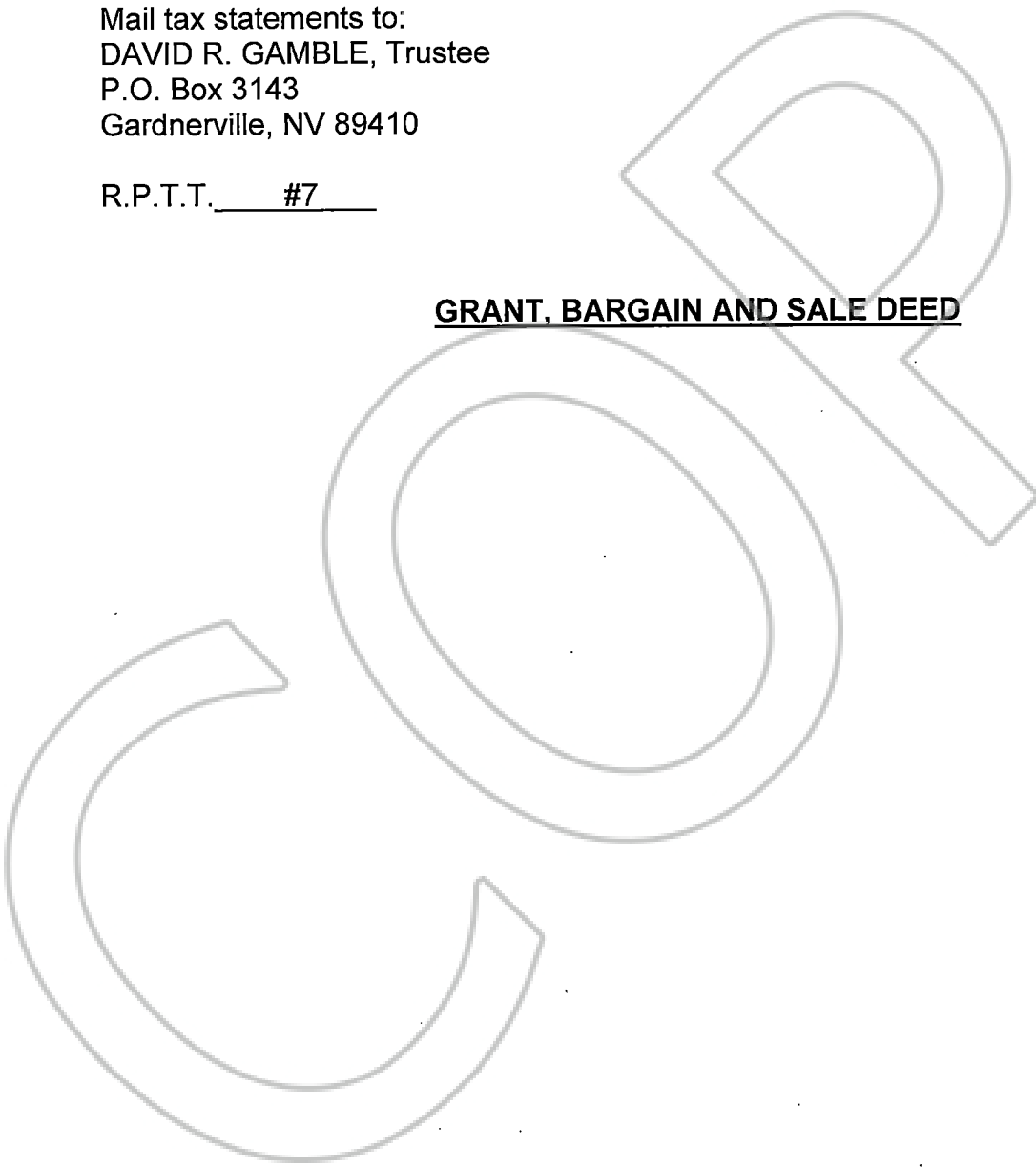
E07

WHEN RECORDED MAIL TO:
GEORGE M. KEELE, ESQ.
1692 County Road, #A
Minden, NV 89423

Mail tax statements to:
DAVID R. GAMBLE, Trustee
P.O. Box 3143
Gardnerville, NV 89410

R.P.T.T. #7

GRANT, BARGAIN AND SALE DEED



GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH: That DAVID R. GAMBLE, a widower, in consideration of \$10.00 plus, the receipt of which is hereby acknowledged, hereinafter referred to as GRANTOR, **as to an undivided one-third (1/3) interest**, does hereby Grant, Bargain, Sell and Convey to DAVID R. GAMBLE, Trustee of THE DAVID R. GAMBLE TRUST dated July 29, 2016, and to the successor trustees, heirs, and assigns of such GRANTEE forever, all of **Grantor's undivided one-third (1/3) interest in and to** that real property situated in the County of Washoe, State of Nevada, commonly known as 207 Allen Way, Incline Village, Nevada, and more particularly described as follows:

Lot 13 in Block D of LAKEVIEW SUBDIVISION, according to the map thereof, filed in the office of the County Recorder of Washoe County, State of Nevada, on February 27, 1961.

Per NRS 111.312, this legal description was previously recorded at Document No. 4558539 on February 8, 2016.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and any reversions, remainders, rents, issues or profits thereof.

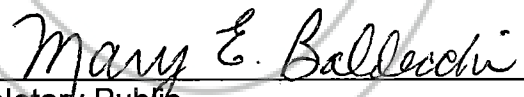
Witness my hand this 29 day of July, 2016.



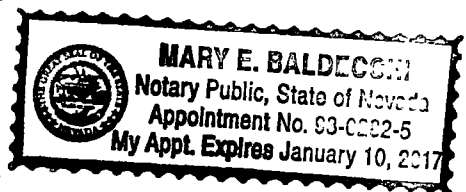
DAVID R. GAMBLE

STATE OF NEVADA)
 : ss.
COUNTY OF DOUGLAS)

This instrument was acknowledged before me on the 29th day of July, 2016, by DAVID R. GAMBLE.



Notary Public



STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- (a) 122-194-13
- (b) _____
- (c) _____
- (d) _____

2. Type of Property:

- | | |
|-----------------|---------------------|
| a) Vacant Land | b)X Single Fam Res. |
| c) Condo/Twnhse | d) 2-4 Plex |
| e) Apt. Bldg. | f) Comm'l/Ind'i |
| g) Agricultural | h) Mobile Home |
| l) Other | |

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: Trust OK - KLE

3. Total Value/Sales Price of Property:

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: This is a transfer without consideration to a trust by the Grantor of the trust. A certificate of trust is being presented at the time of recording.

5. Partial Interest: Percentage being transferred: 33.33 %

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] Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: David R. Gamble

Address: P.O. Box 3143

City: Gardnerville

State: NV Zip: 89410

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: David R. Gamble, as Trustee of

The David R. Gamble Trust

Address: P.O. Box 3143

City: Gardnerville

State: NV Zip: 89410

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____