

APN: 1120-06-000-008

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



00040094201608852070030030

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

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, 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 that real property situated in the County of Douglas, State of Nevada, more particularly described as follows:

All that certain piece or parcel of land lying in a portion of the Southeast 1/4 of the Southeast 1/4 of Section 6, Township 11 North, Range 20 East, M.D.B. & M., in Douglas County, Nevada, and more particularly described by metes and bounds as follows, to wit;

BEGINNING at a point on the Nevada-California State Line at the Southeast corner of the parcel, said point being described as bearing North 0°02' East, a distance of 1011.12 feet from the section corner common to Section 5, 6, 7 and 8 of said Township and Range; thence North 48°36'30" West, along the state line a distance of 467.60 feet to the 1/16th section line and the Northwest corner of the parcel; thence North 89°37' East along the subdivision line a distance of 350.97 feet to the Northeast corner of the parcel and the East boundary line of said Section 6; thence 0°02' West, along the East line of said Section 6, a distance of 311.52 feet to the point of beginning.

Together with all water rights, surface or ground, permitted, certificated, adjudicated, or vested, as well as all seeps, springs, and other rights to water, of any nature whatsoever, appurtenant to or historically used on the property.

Per NRS 111.312, this legal description was previously recorded at Document No. 2016-876419 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.

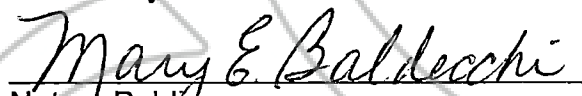
Witness my hand this 29 day of July, 2016.



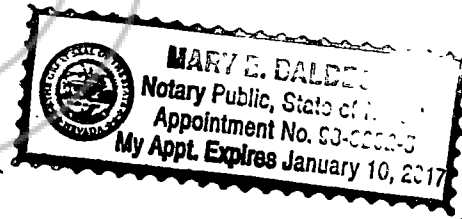
DAVID R. GAMBLE

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) 1120-06-000-008
(b) _____
(c) _____
(d) _____

2. Type of Property:

a) X	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
l)	Other		

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: Trust Cert 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 David R. Gamble 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: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)