

APN#: 1320-29-110-040
RPTT: \$1,267.50

DOUGLAS COUNTY, NV
RPTT:\$1267.50 Rec:\$17.00
\$1,284.50 Pgs=4
ETRCO, LLC
KAREN ELLISON, RECORDER

2016-885234

07/29/2016 02:31 PM

Recording Requested By:
Western Title Company
Escrow No.: 081064-WLD
When Recorded Mail To:
Robert Sorben and Susan Sorben
1783 Lantana
Minden, NV 89423

Mail Tax Statements to: (deeds only)
Same as Above

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons.
(Per NRS 239B.030)

Signature _____
[Handwritten Signature]
Wendy Dunbar Escrow Officer

Grant, Bargain, and Sale Deed

This page added to provide additional information required by NRS 111.312
(additional recording fee applies)

GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH: That

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

Warren P. Bithell; Warren P. Bithell IV, who acquired title as a married man as his sole and separate property

do(es) hereby GRANT(s) BARGAIN SELL and CONVEY to

Robert Sorben and Susan Sorben, husband and wife **as joint tenants with right of survivorship** and to the heirs and assigns of such Grantee forever, all the following real property situated in the City of Minden, County of Douglas State of Nevada bounded and described as follows:

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

Lot 442, In Block D, as shown on the Official Plat of WINHAVEN, UNIT NO. 8, filed in the office of the County Recorder of Douglas County, State of Nevada, on September 11, 1997, in Book 997 of Official Records, at Page 2125, as Document No. 241412.

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

Dated: 07/20/2016

W.P.B. [Signature]
Warren P. Bithell IV

W.P.B. [Signature]
Warren P. Bithell

STATE OF _____

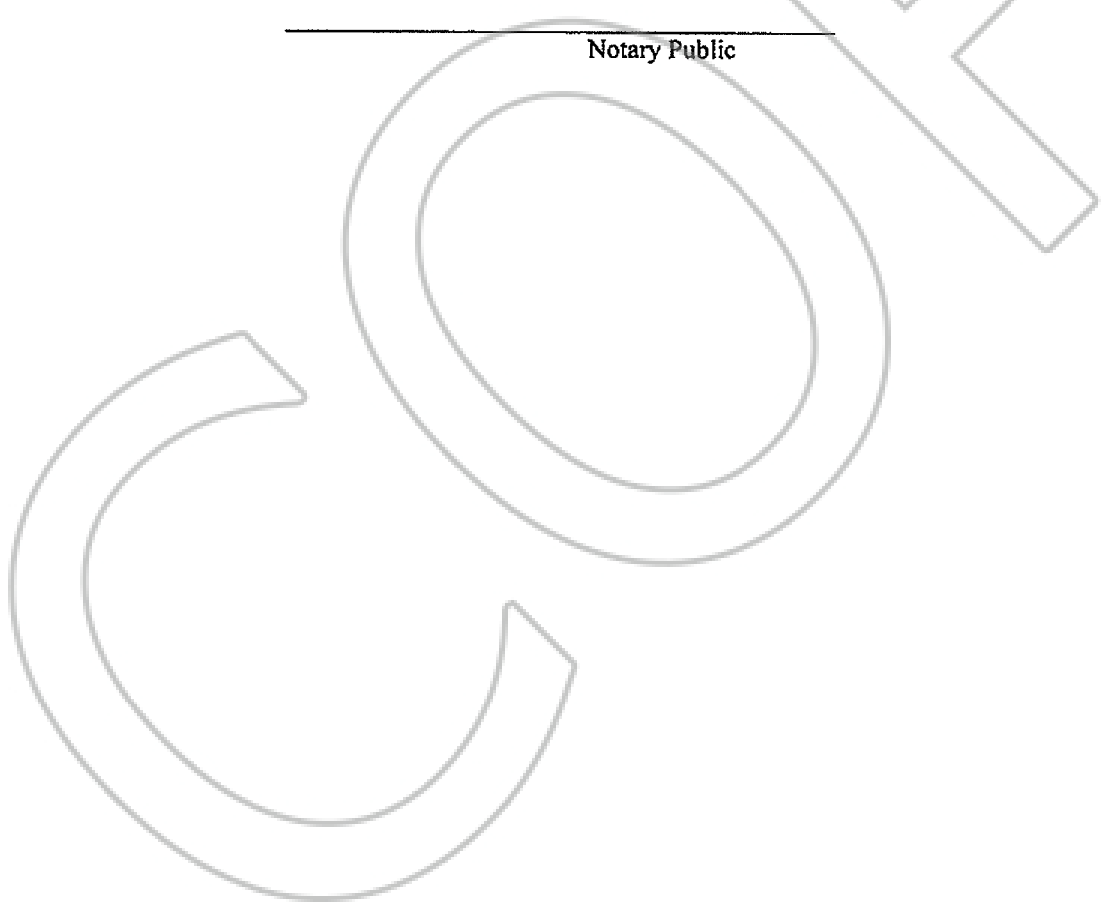
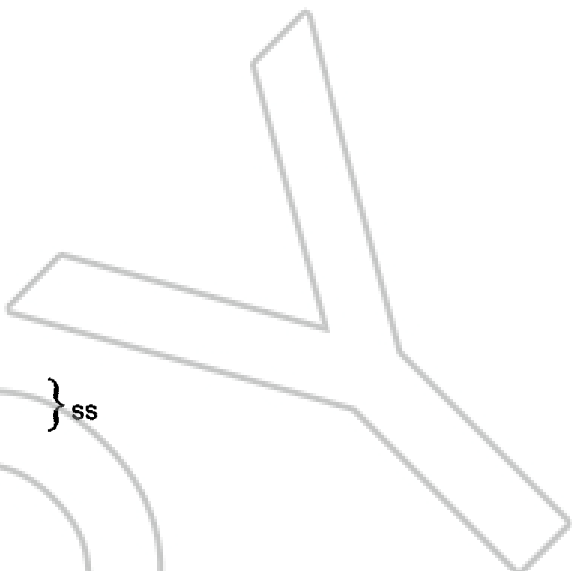
COUNTY OF _____

This instrument was acknowledged before me on

By Warren P. Bithell IV; Warren P. Bithell.

SEE ATTACHED
ACKNOWLEDGMENT

Notary Public



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

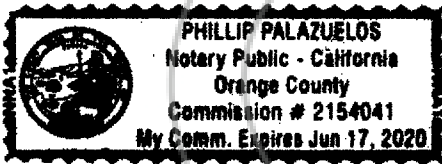
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Orange)
On July 27, 2016 before me, Phillip Palazuelos, notary public
Date Here Insert Name and Title of the Officer
personally appeared Warren P. Bithell IV
Name(s) of Signer(s)

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 [Handwritten Signature]
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: Grant, Bargain, & Sale Deed Document Date: 07/20/2016
Number of Pages: 2 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: _____
Signer is Representing: _____

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 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer is Representing: _____

STATE OF NEVADA DECLARATION OF VALUE

1. Assessors Parcel Number(s)
a) 1320-29-110-040

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: \$325,000.00
Deed in Lieu of Foreclosure Only (value of property) (_____)
Transfer Tax Value: \$325,000.00
Real Property Transfer Tax Due: \$1,267.50

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section _____
b. Explain Reason for Exemption: _____

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 W.P. Bithell IV Capacity Grantor
Signature _____ Capacity _____

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

Print Name: Warren P. Bithell IV
Address: 407 White Cap Lane
City: Newport Coast
State: CA Zip: 92657

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

Print Name: Robert Sorben and Susan Sorben
Address: 1783 Lantana
City: Minden
State: NV Zip: 89423

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: eTRCo, LLC. On behalf of Western Title Company
Address: Douglas Office
1362 Highway 395, Ste. 109
City/State/Zip: Gardnerville, NV 89410

Esc. #: 081064-WLD

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)