A.P.N.:

1319-03-414-041

File No:

141-2506136 (NMP)

R.P.T.T.:

\$1,638.00

DOUGLAS COUNTY, NV

2016-885722

RPTT:\$1638.00 Rec:\$15.00 \$1,653.00 Pgs=2

08/09/2016 03:30 PM

FIRST AMERICANTITLE STATELINE

KAREN ELLISON, RECORDER

When Recorded Mail To: Mail Tax Statements To: The Revocable Living Trust of Steven Edward Mayeda P.O. Box 3593
Reondo Beach, CA 90277

GRANT, BARGAIN and SALE DEED

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

Frederick M. Bianucci and Susan L. Bianucci, Trustees of the Bianucci Family Trust Dated 11-16-98

do(es) hereby GRANT, BARGAIN and SELL to

Steven Edward Mayeda, Trustee of The Revocable Living Trust of Steven Edward Mayeda

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

LOT 59, IN BLOCK C, AS SET FORTH ON THE FINAL MAP FOR, HIGH MEADOWS UNIT NO. 2, GENOA LAKES PHASE 4, A PLANNED UNIT DEVELOPMENT, RECORDED JUNE 24, 2002 IN BOOK 0602 OF OFFICIAL RECORDS AT PAGE 7600, DOUGLAS COUNTY, NEVADA AS DOCUMENT NO. 545421.

Subject to

- 1. All general and special taxes for the current fiscal year.
- 2. Covenants, Conditions, Restrictions, Reservations, Rights, Rights of Way and Easements now of record.

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

Date: 06/17/2016

	\ \
The Bianucci Family Trust	\ \
Rederica M. Brannecce	\ \
Frederick M. Bianucci, Trustèe	\ \
Susan I Bunucci	1
Susan L. Bianucci, Trustee	
STATE OF NEVADA)	
: SS.	
COUNTY OF DOUGLAS)	
0 18 2011	
This instrument was acknowledged before me on 18 200 18 200 18	by
Frederick M. Brancei and Susua 1. Brance	u
NICOLE PETERSON	
Notary Public Notary Public STATE OF NEWADA	
(My commission expires: 3/19/18) My Commission Expires: 3-19-2018 Certificate No: 97-4131-5	
This Notary Acknowledgement is attached to that certain Grant, Bargain Sale Deed	dated June
17, 2016 under Escrow No. 141-2506136.	datea sa ile

STATE OF NEVADA DECLARATION OF VALUE

1.	Assessor Parcel Number	r(s)	:	. بي.		
	1319-03-414-041	:				Α
b)_			•	* •: #		/1
c)_ d)						
^	T (D		•			\ \
2. a)	Type of Property Vacant Land b) V Single Fam. F	es FO	R RECORDER	S OPTIO	NAI USE
•		· <u></u>				TAL GOL
c)	Condo/Twnhse d		Boo		Page:	· · · · · · · · · · · · · · · · · · ·
e)		f) Comm'l/Ind'l	i	e of Recording	-	
g)) Mobile Home	Note	9S:		
i)	Other				Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which i	
3.	a) Total Value/Sales Price	ce of Property:		\$420,000.0)0	
	b) Deed in Lieu of Forecl	losure Only (value of		(\$)
	c) Transfer Tax Value:	/		\$420,000.0	00	
	d) Real Property Transfe	er Tax Due		\$1,638.00	1	
4.	If Exemption Claimed:		<)		
•	a. Transfer Tax Exempti	ion, per 375.090, Se	ction:	/		•
	b. Explain reason for ex-	emption:		90/L	/	
_	D. C. I. L D			%	<u></u>	····
5 .	Partial Interest: Percenta The undersigned declare		794		n/ nureus	nt to NRS
375	.060 and NRS 375.110,					
info	rmation and belief, and c	an be supported by	document	ation if called t	upon to su	bstantiate
the	information provided her	rein. Furthermore,	the partie	s agree that o	disallowan	ce of any
claii	med exemption, or other 6 of the tax due plus inter	determination of ac	iditional ta	nt to NRS 375	esuit in a 030 the f	penalty of Buver and
Sell	er shall be jointly and seve	rest at 176 per mona	idditional a	mount owed	.000, (10 1	sayor and
	nature:	Mark	Capac	/ / _	artee	
_	nature:		Capac	·		7
5.	SELLER (GRANTOR) IN	NFORMATION		ER (GRANTE	E) INFOR	MATION
and the same of th	(REQUIRED			(REQU	IRED)	
	一) / /		/ /	All controls and a second seco	evocable L	~
Dain	t Name: The Biopussi E	omily Trust	Print	∦ Trust d Name: Mayed	of Steven E	dward
PIII	t Name: The Bianucci Fa	armiy Trust	- Filling	varile. Iviayeu	<u> </u>	
Add	ress: 35 Aura	Vista	Addre	ss: Y O	· 100)	13543
City	: Millbrae	<u> </u>	City:	tedon	odo t	seach
Stat		Zip: <u>94030</u>	State:	_(++	Zip: _	40277
CO	MPANY/PERSON REQUI		G (reguire	ed if not selle	r or buyer	1
<u> </u>	First American T	itle Insurance	File M		ICAGE NINAT	D/NIMID
	t Name: <u>Company</u> ress P.O. Box 645		rile Nu	mber: <u>141-250</u>	DIJO NIVIE	//NIVIP
764	: Zephyr Cove	/	State:	NV	Zip: 8944	18
-	/40 + PUBLIC DECC	DD TING FORM			OCII MED	