DOUGLAS COUNTY, NV

Rec:\$14.00 Total:\$14.00 2016-887268 09/08/2016 09:27 AM

00,

Pgs=2

Total:\$14.00 SUE L. SANCHEZ

00042405201608872680020023

KAREN ELLISON, RECORDER

E05

APN: 1319-19-310-011

RECORDING REQUESTED BY:

Sue L. Sanchez P.O. Box 3024 Stateline, NV 89449

AFTER RECORDATION, RETURN BY MAIL TO:

Sue L. Sanchez and Salvador Sanchez P.O. Box 3024 Stateline, NV 89449

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUIT CLAIM DEED

THIS QUITCLAIM DEED, executed this ______ day of ______, 2016, by first party, Grantor, SUE L. SANCHEZ, a married woman as her sole and separate property, whose post office address is P.O. Box 3024, Stateline, NV 89449, to second party, Grantees, SUE L. SANCHEZ and SALVADOR SANCHEZ, wife and husband as joint tenants with right of survivorship, whose post office address is P.O. Box 3024, Stateline, NV 89449.

WITNESSETH, that the said first party, for good consideration and for the sum of Ten Dollars (\$10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Douglas, State of Nevada to wit:

Lot 12, in Block 1, of KINGSBURY ESTATES UNIT NO. 1, according to the map thereof, filed in the office of the County Recorder of Douglas County, State of Nevada, on September 26, 1960, in Book 1 of Maps, as Document No. 16645.

Subject to Restrictions, Conditions, Covenants, Rights, Rights of Way, and Easements now of record, if any. TOGETHER with all and singular the tenements, hereditaments and appurtenances now of record, if any.

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written.

Sue L. Sanchez

STATE OF NEVADA

COUNTY OF DOUGLAS

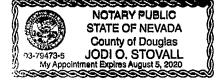
This instrument was acknowledged before me on the 8^{tt}

) ss.

day of Sept

. 2016, by Sue L. Sanchez

Notary Public



| | OF NEVADA | |
|------------|--|---|
| | ARATION OF VALUE | |
| | Assessor Parcel Number(s) | ^ |
| | a) 1319-19-310-011 | |
| | b) | () |
| | c) | \ \ |
| | d) | \ \ |
| 2 | T CD / | \ \ |
| | Type of Property: | \ \ |
| | a) Vacant Land b) Single Fam. Res. | |
| | c) Condo/Twnhse d) 2-4 Plex | FOR RECORDERS OPTIONAL USE ONLY |
| | e) Apt. Bldg f) Comm'l/Ind'l | BOOKPAGE |
| | g) Agricultural h) Mobile Home | DATE OF RECORDING: |
| | ** | NOTES: |
| | i) | |
| | T . 1771 (G 1 D 1 OD | |
| | Total Value/Sales Price of Property: | \$ |
| | Deed in Lieu of Foreclosure Only (value of property) Transfer Tax Value: | \$ |
| | Real Property Transfer Tax Due: | 9 |
| | Real Hoperty Hallster Tax Duc. | \ |
| 4. | If Exemption Claimed: | |
| 4. | a. Transfer Tax Exemption per NRS 375.090, Sec | etion # 5 |
| | b. Explain Reason for Exemption: Transfer with | out consideration from wife to wife and husband |
| | b. Explain Reason for Exemption. | |
| | | |
| 5. | Partial Interest: Percentage being transferred: | % |
| ٥. | Tartial interest. Tereentage being transferred. | ^ |
| The | undergianed declares and saknowledges under ner | nalty of perjury, pursuant to NRS 375.060 and NRS |
| | .110, that the information provided is correct to the | |
| | | ate the information provided herein. Furthermore, the |
| supp | ice caree that disalle wence of any eleimed exempti | ion, or other determination of additional tax due, may |
| | Here agree that disarrowance of any claimed exemplified in a penalty of 10% of the tax due plus interest at | |
| resu | in in a penanty of 10% of the tax due plus interest at | t 176 per mondi. |
| Durenan | at to NRS 375 030, the Ruyer and Seller shall be jointl | ly and severally liable for any additional amount owed. |
| Luisuan | to 1113 575.050, the buyy and Sener shan be joined | |
| Signatu | ire Sul I June 9 | Capacity Grantor |
| Digitalia | - Or Charles | |
| Signatu | ire | Capacity |
| / Bratta | | |
| / | SELLER (GRANTOR) INFORMATION | BUYER (GRANTEE) INFORMATION |
| | (REQUIRED) | (REQUIRED) |
| | ^ | |
| Print Na | | rint Name: Sue L. Sanchez and Salvador Sanchez |
| | s: P.O. Box 3024 A | ddress: P.O. Box 3024 |
| City: | Stateline C. | ity: Stateline |
| State: N | IV Zip: 89449 St | tate: NV Zip: 89449 |
| \ <u>\</u> | | |
| | ANY/PERSON REQUESTING RECORDING | |
| 700 | equired if not the seller or buyer) | |
| Print Na | | Escrow # |
| Address | | · |
| City: | State: | Zip: |
| | (AS A PUBLIC RECORD THIS FORM MA | AY BE RECORDED/MICROFILMED) |