

WHEN RECORDED MAIL TO:
Linda L. Schaan
1360 Northampton
Gardnerville, Nevada 89410



APN #: 25-613-08
1220-04210-018

QUITCLAIM DEED

THIS INDENTURE, made and entered into this 12~~th~~ day of October, 2016, by and between The Schaan Family 1995 Trust, hereinafter referred to as Grantor, of Gardnerville, Nevada, and Linda L. Schann, of Gardnerville, Nevada, hereinafter referred to as Grantee(s), whose address is 1360 North Hampton, Gardnerville, Nevada, 89410.

WITNESSETH:

That Grantor, for a valuable consideration which is hereby acknowledged, does by these presents remise, release, convey, and quitclaim without warranty unto Grantee, as her sole and separate property, and to her heirs and assigns, forever, all that certain lot, piece or parcel of land, situated in Gardnerville, County of Douglas, State of Nevada, to-wit: commonly known as 1360 Northampton, Gardnerville, Nevada 89410 more particularly described as follows, to-wit:

Lot 36, in Block D, as set forth on the map of SUNSET PARK SUBDIVISION, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on June 5, 1987 in Book 687, Page 763, as Document No. 155926 and by Certificate of Amendment recorded December 23, 1987, in Book 1287, Page 3314, Document No. 169385 of Official Records of Douglas County, Nevada.

TOGETHER WITH the tenements, hereditaments and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD the said premises, together with the appurtenances, unto
Grantee, as her sole and separate property, and to her heirs and assigns, forever.

IN WITNESS WHEREOF, Grantor has executed this Conveyance the day and year first
above-written.

Linda L. Schaan

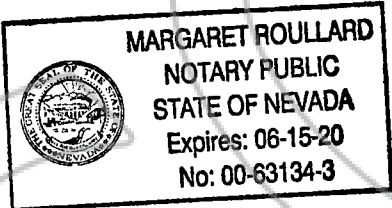
LINDA L. SCHAAN
Trustee of the Schaan Family 1995 Trust

STATE OF NEVADA)
) ss.
COUNTY OF Carson)

On the 12th day of October, 2016, before me, the undersigned Notary Public, in and for said State,
personally appeared Linda L. Schaan proven to me to be the
persons whose name is subscribed to the within Quitclaim Deed, and acknowledged to me that she executed
the same.

Margaret Roullard

NOTARY PUBLIC



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessors Parcel Number(s)
 a) 1220-04210-018
 b) _____
 c) _____
 d) _____

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: <u>Trust of BL</u>	

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: Coming out of trust without consideration

5. Partial Interest: Percentage being transferred: _____ %

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 Linda Schaan Capacity owner
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: Linda Schaan
 Address: 1360 Northampton
 City: Gardnerville
 State: NV Zip: 89410

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Linda Schaan
 Address: 1360 Northampton
 City: Gardnerville
 State: NV Zip: 89410

COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer)
 Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____