

17

DOUGLAS COUNTY, NV 2016-891350
Rec:\$17.00
Total:\$17.00 11/29/2016 04:46 PM
EXPRESS NETWORK Pgs=5

RECORDING REQUESTED BY:

RETURN TO:

DARYL W. ZAKARIAN
27832 Pinecrest Place
Castaic, CA 91384



00047012201608913500050057

KAREN ELLISON, RECORDER

E07

DOCUMENT TITLE

GRANT, BARGAIN and SALE DEED

THIS PAGE ADDED TO PROVIDE ADEQUATE SPACE FOR RECORDING INFORMATION
(Govt. Code 27361.6)
Additional Recording Fee Applies
Printed on recycled paper.

RECORDING REQUESTED BY:
Daryal Zakarian & Gretchen Zakarian
AA.P. NO.: 1121-35-002-044
R.P.T.T. \$0*

**MAIL TAX STATEMENTS TO
AND WHEN RECORDED MAIL TO:**
Daryal Zakarian & Gretchen Zakarian
27832 Pinecrest Place
Castaic, CA 91384

MAIL TAX STATEMENT TO:
Same as Above

GRANT, BARGAIN and SALE DEED

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

DARYL W. ZAKARIAN and GRETCHEN ZAKARIAN, husband and wife as joint tenants with right of survivorship do hereby GRANT, BARGAIN AND SELL and CONVEY to:

THE DARYL W. ZAKARIAN AND GRETCHEN ZAKARIAN 2016 TRUST
AGREEMENT dated 03/11/2016

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

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

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

[*This is a transfer to a revocable grantor trust]

Dated: 9-12-2016

[Signature]
DARYL W. ZAKARIAN

Dated: 9/12/2016

[Signature]
GRETCHEN ZAKARIAN

STATE OF NEVADA
COUNTY OF DOUGLAS

This instrument was acknowledged before me on _____, by _____

(see attached California Acknowledgment)
Notary Public

EXHIBIT "A"

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

The North 1/2 of the South 1/2 of the Southwest 1/4 of Section 35, Township 11 North, Range 21 East, M.D.B. & M.

Reference is made to Land Division Map, recorded October 8, 1976, in Book 1076, Page 331, as Document No. 3830, Official Records of Douglas County, Nevada.

Reference is also made to Record of Survey, recorded August 10, 1978, in Book 878, Page 786, as Document No. 23906, Official Records of Douglas County, Nevada.

**Assessor's Parcel Number(s):
1121-35-002-044**



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

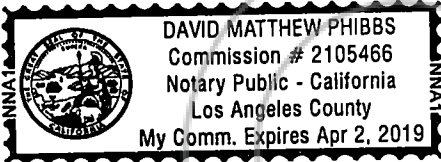
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Los Angeles)
On 09/12/2016 before me, David Matthew Phibbs, Notary Public
Date Here Insert Name and Title of the Officer
personally appeared Daryl W. Zakarian and Gretchen Zakarian
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: 09/12/2016
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: _____

Signer's Name: _____
 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. Assessor Parcel Number(s)
 a) 1121-35-002-044
 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
 BOOK _____ PAGE 117
 DATE OF RECORDING: Trust OK
 NOTES: w/o consideration per Brittanina w/legal support

3. Total Value/Sales Price of Property: \$ _____
 Deed in Lieu of Foreclosure Only (value of property) (_____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ \$0.00

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # 7
 b. Explain Reason for Exemption: This is a transfer to a Revocable Grantor Trust

5. Partial Interest: Percentage being transferred: 100.0 %

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 [Signature] Capacity Transferor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: DARYL W. ZAKARIAN
 Address: 27832 Pinecrest Place
 City: Castaic
 State: CA Zip: 91384

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: DARYL W. ZAKARIAN
 Address: 27832 Pinecrest Place
 City: Castaic
 State: CA Zip: 91384

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