1222 122 22 21/ 123	BETH SWANBERG
APN# 1320-33-311-028	(18 (18 (18 (18 (18 (18 (18 (18 (18 (18
Recording Requested by/Mail to:	00047815201608920660040041
Name: Beth & Robert Swarberg	KAREN ELLISON, RECORDER
Address: 1488 Hanslopes Way	\ \
City/State/Zip: Gardnerville, NV 89410	\ \
Mail Tax Statements to:	
Name: & Sanz as About	
Address:	
City/State/Zip:	
DEED	
Title of Document (required	0/
(Only use if applicable)	
The undersigned hereby affirms that the document su contains personal information as required by law:	
Affidavit of Death — NRS 440.380(1)(A) 8	
Judgment – NRS 17.150(4)	
Military Discharge – NRS 419.020(2)	
Signature	
Printed Name	
is document is being (re-)recorded to correct document #	, and is correcting

2016-892066

Pgs=4

E05

12/14/2016 11:07 AM

DOUGLAS COUNTY, NV

Rec:\$16.00 Total:\$16.00

NV Deed-Quitclaim 1

Affix I.R.S. §		
QUITCLAIM DEED		
In consideration of \$, receipt of which is acknowledged		
Robert J. Swanberg and Beth & Swanberg		
do hereby quitclaim to		
Robert J. Swanberg and Beth Swanberg and Betsy Denise Rezner		
County of Journal State of Nevada, described as:		
Parcel # 1320-33-311-028 Both Swarber		
1488 Hanslope Way Peth Swarberg		
Gardnerville, NV		
Robert-Swandery		
STATE OF NEVADA) ROBERT SWANBERG		
) ss		
COUNTY OF Douglas)		
On <u>Docember 14</u> , <u>2016</u> before me, the undersigned, a Notary Public in and for said County and State, personally appeared <u>BE7H SWANBERG</u>		
KOBERT SUBJEELL		
known to me to be the person \leq described in and who executed the foregoing instrument, who acknowledged to me that $\underline{\gamma}$ he $\underline{\gamma}$ executed the same freely and voluntarily and for the uses and purposes therein mentioned.		
WITNESS my hand and official seal.		
NOTARY PUBLIC		
Notary Public in and for Said County and State STATE OF NEVADA County of Douglas JODI O. STOVALL County of Douglas JODI O. STOVAL County of Douglas JODI O. STOVAL County of Douglas JODI O. STOVAL Count		
ESCROW NO.] My Appointment Expires August 5, 2020 My Appointment Expires August 5, 2020		
ORDER NO.]		
WHEN RECORDED MAIL TO:		

EXHIBIT "A"

 \odot

LEGAL DESCRIPTION

ESCROW NO.: 020308192

Lot 23, Block B, as set forth on Final Subdivision Map FSM-1006-2 for CHICHESTER ESTATES Phase 2, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on December 9, 1996, in Book 1296 at Page 1286, as Document No. 402540, and by Certificate of Amendment recorded July 17, 2001, Book 0701, Page 3929, as Document No. 518479.

Assessors Parcel No. 1320-33-311-028

()

REQUESTED BY
Stawart Title of Douglas County
IN OFFICIAL RECORDS OF
DOUGLAS CO. MEVADA

2003 APR 16 PM 3: 44

0573737 BK0403PG07791 WERNER CHRISTEN
RECORDER
PAID DEPUTY

STATE OF NEVADA			
DECLARATION OF VALUE	^		
 Assessor Parcel Number(s) a) 1320-33-311-028 			
	()		
b) c)	\ \		
d)	\ \		
u)	\ \		
2. Type of Property:	\ \		
a) Vacant Land b) Single Fam. Res.	~ \ \		
· / - · · · · · / -	FOR RECORDERS OPTIONAL USE ONLY BOOK PAGE		
e) Apt. Bldg f) Comm'l/Ind'l	BOOK PAGE DATE OF RECORDING:		
g) Agricultural h) Mobile Home	NOTES:		
i)			
3. Total Value/Sales Price of Property:	s 0		
Deed in Lieu of Foreclosure Only (value of property)			
Transfer Tax Value:	\$ <u>0</u>		
Real Property Transfer Tax Due:	\$ <u>O</u>		
\ \			
4. If Exemption Claimed:	ction# 5		
a. Transfer Tax Exemption per NRS 375.090, Se	ction #		
b. Explain Reason for Exemption: Adding Doughter to	146.		
- Abang boughts 18	THE		
5. Partial Interest: Percentage being transferred:	%		
5. Tartial interest. Tereoritage being transferred.			
The undersigned declares and acknowledges, under pe	nalty of perjury pursuant to NRS 375 060 and NRS		
375.110, that the information provided is correct to the			
supported by documentation if called upon to substanti			
parties agree that disallowance of any claimed exempti			
result in a penalty of 10% of the tax due plus interest a			
Pursuant to NRS 375.030, the Buyer and Seller shall be joint	ly and severally liable for any additional amount owed.		
Days			
Signature Beth Swarberg	Capacity Orantor		
Signature	Capacity		
GELLED (CDANITOD) INFORMATION	DIMED (OD ANTEE) DIEODMATION		
SELLER (GRANTOR) INFORMATION (REQUIRED)	BUYER (GRANTEE) INFORMATION		
, - ,	(REQUIRED)		
Print Name: Beth Swarberg P	rint Name: Robert Swarberg ddress: 1488 Harstope Way		
Address: 1488 Harstope Way A	ddress: 1498 Handons, 11124		
City: Godnervice very C	ity: Gardnervelle		
State: NV Zip: 49410 S	ddress: 1488 Hanstope Way ity: Gardnervelle tate: Nr Zip: 8940		
COMPANY/PERSON REQUESTING RECORDING			
(required if not the seller or buyer)			
	Escrow #		
Address:			
City: State:	Zip:		
(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)			