

APN# 1220-17-501-013

Recording Requested by/Mail to:

Name: Gary Allen

Address: P.O. Box 6419

City/State/Zip: Gardnerville, NV 89460

Mail Tax Statements to:

Name: Gary Allen

Address: P.O. Box 6419

City/State/Zip: Gardnerville, NV 89460



KAREN ELLISON, RECORDER E07

Quitclaim Deed

Title of Document (required)

----- (Only use if applicable) -----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)

Signature

Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

\$1.00 Additional Recording Fee for Use of This Page

APN: 1220-17-501-013

When Recorded, Please Return To:

Gary and Diana Allen
P.O. Box 6419
Gardnerville, NV 89460

Mail Future Tax Statements To:

Same

QUITCLAIM DEED

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, **GLORIA LORRAINE ALLEN, Trustee of THE OLIVER EUGENE ALLEN AND GLORIA LORRAINE ALLEN FAMILY TRUST dated December 14, 1999** does hereby remise, release and forever quitclaim and transfer all interest in 951 Rubio Way, Gardnerville, NV, APN 1220-17-501-013, to **GARY LEE ALLEN** and **DIANE KAY ALLEN**, husband and wife as joint tenants, with right of survivorship, the real property situated in Douglas County, State of Nevada, more precisely described as:

All that certain lot, piece or parcel of land situate in the County of Douglas, State of Nevada, described as follows:

A parcel of land located in the Northeast $\frac{1}{4}$ of the Northeast $\frac{1}{4}$ of Section 17, Township 12 North, Range 20 East, M.D.B. & M., Douglas County, Nevada, more particularly described as follows:

Commencing at the Northeast corner of Section 17, Township 12 North, Range 20 East, M.D.B.&M., proceed South $38^{\circ}42'55''$ West, 1323.12 feet to the TRUE POINT OF BEGINNING, which is the Northeast corner of the parcel; thence South $0^{\circ}01'14''$ West, 295.49 feet to the Southeast corner of the parcel; thence South $89^{\circ}23'34''$ West, 435.91 feet along the Northerly boundary line of the William Bartels property, to the Southwest corner of the parcel; thence North $0^{\circ}17'20''$ West, 303.63 feet, along the Easterly boundary of the 50 foot road right-of-way to the Northwest corner of the parcel; thence South $89^{\circ}32'21''$ East, 437.53 feet to the True Point of Beginning.

Together with a non-exclusive easement, which is particularly described as follows:

A strip of land fifty (50) feet in width in Southeast corner of which is a point located as follows:

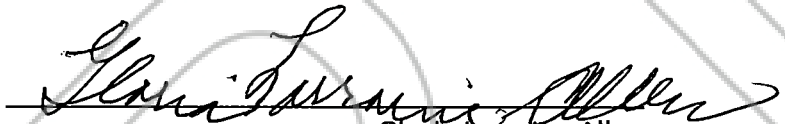
Commencing at the Northeast corner of Section 17, Township 12 North, Range 20 East, M.D.B.&M.; thence South $38^{\circ}42'55''$ West, 1323.12 feet; thence South $0^{\circ}1'14''$ West, 295.49 feet to the Southwest Corner of a three acre parcel

belonging to Stephen Talbot and thence South 89°23'34" West 435.91 feet along the South line of the said Talbot Parcel to the Point at the Southwest corner of the said Talbot Parcel, which point is also at the said Southeast corner of the said right-of-way, and the East boundary of which fifty-foot strip bears North 0°17'0" West to Centerville Lane.

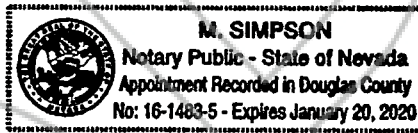
A.P.N. 1220-17-501-013

Together with all and singular the tenements, hereditaments and appurtenances, if any, thereunto belonging or in anywise appertaining, and any reversions, remainders, rents, issues or profits thereof.

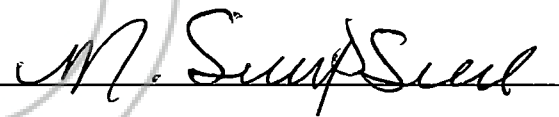
Witness my hand and seal this 20th day of April 2016.


Gloria Lorraine Allen

STATE OF NEVADA)
 : SS
COUNTY OF DOUGLAS)



On April 20th, 2016, before me, the undersigned, a Notary Public in and for said County and State, personally appeared GLORIA LORRAINE ALLEN, personally known to me (or provide to me upon satisfactory evidence) to be the person whose name is subscribed to the within instrument, and who acknowledged to me that she executed same.

LEGAL DESCRIPTION *Previously Recorded* 

DOCUMENT # 482594

BOOK 1299

12/15/99

PAGE 7612

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1220-17-501-013
 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 _____ |
| DATE OF RECORDING: _____ | |
| NOTES: <u>Trust Cert OK.</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 # 57
 b. Explain Reason for Exemption: mother/child transfer - from mom's trust to child w/o 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 [Signature] Capacity GRANTEE
 Signature [Signature] Capacity GRANTEE

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Allen Family Trust
 Address: 951 Rubio Way
 City: Gardnerville
 State: NV Zip: 89410

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Gary and Diana Allen
 Address: P.O. Box 6419
 City: Gardnerville
 State: NV Zip: 89460

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: N/A Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)