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ASSESSOR'S PARCEL NO. 1320-33-817-033



WHEN RECORDED MAIL TO:
ANDERSON YAZDI
HWANG MINTON + HORN LLP
Marion L. Brown, Esq.
350 Primrose Road
Burlingame, CA 94010

KAREN ELLISON, RECORDER

E07

MAIL TAX NOTICES TO:
Jan K. Huggans, Trustee
P.O. Box 597
Bridgeport, CA 93517

QUITCLAIM DEED

JAN K. HUGGANS, Trustee of the HUGGANS FAMILY TRUST AGREEMENT dated February 1, 2002, whose address is P.O. Box 597, Bridgeport, CA 93517,

hereby REMISES, RELEASES, AND FOREVER QUITCLAIMS to:

JAN K. HUGGANS, Trustee of the SURVIVOR'S TRUST under the HUGGANS FAMILY TRUST AGREEMENT dated February 1, 2002, whose address is P.O. Box 597, Bridgeport, CA 93517,

all of her right, title and interest in that certain real property located in the County of Douglas, State of Nevada, more particularly described as follows:

LOT 33 IN BLOCK E, AS SHOWN ON THE FINAL MAP #1006-12 OF CHICHESTER ESTATE, PHASE 12, RECORDED JANUARY 8, 2004, IN BOOK 0104, OF OFFICIAL RECORDS, T PAGE 2012, DOCUMENT NO. 601490, DOUGLAS COUNTY, NEVADA.

Property street address: 1360 Brooke Way, Gardnerville, Nevada

TOGETHER with all right, title, and interest in and to all tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

Dated this 17 day of January, 2017

Jan K Huggans, Trustee
JAN K. HUGGANS, Trustee of the Huggans Family
Trust Agreement dated February 1, 2002

Affirmation Statement

I, the undersigned, hereby affirm that this document as submitted for recording does not contain the social security number of any person.

Jan K. Huggans, Trustee
JAN K. HUGGANS, Trustee of the Huggans Family
Trust Agreement dated February 1, 2002

ACKNOWLEDGMENT OF NOTARY PUBLIC

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.

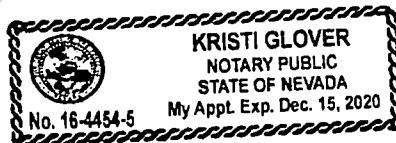
Nevada
STATE OF CALIFORNIA }
Douglas } ss.
COUNTY OF MONTE }
SANTO

On January 17 2017, before me, Kristi Glover, a Notary Public, personally appeared JAN K. HUGGANS, 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 *Kristi Glover*



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1320-33-817-033
 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 OR BC</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: Transfer without consideration to or from a trust

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 Jan K Huggans Capacity Trustee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Jan K. Huggans, Trustee
 Address: P.O. Box 597
 City: Bridgeport
 State: CA Zip: 93517

Print Name: Jan K. Huggans, Trustee
 Address: P.O. Box 597
 City: Bridgeport
 State: CA Zip: 93517

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: Anderson Yardi et al Escrow # N/A
 Address: 350 Primrose Road
 City: Burlingame State: CA Zip: 94010

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