

151

Assessor's Parcel Number: 1320-33-310-026)

RECORDING REQUESTED)
AND RETURN TO:)
Alice Palmer)
1280 Campbell Ct.)
Gardnerville, NV 89410)

MAIL TAX STATEMENTS TO:)
Alice Palmer)
1280 Campbell Ct.)
Gardnerville, NV 89410)



(SPACE ABOVE THIS LINE FOR RECORDER'S USE)

DEED UPON DEATH


I, **ALICE ELAINE PALMER**, an unmarried woman (hereinafter referred to as "Grantor") do hereby convey to my granddaughter, **RHONDA L. PAGE**, (hereinafter referred to as "Grantee"), as her sole and separate property, effective upon the death of the grantor, all right, title and interest in the real property more particularly described as:

LOT 19, BLOCK O, AS SET FORTH ON FINAL SUBDIVISION MAP FSM-1006 OF CHICHESTER ESTATES PHASE 1, FILED FOR RECORD IN THE OFFICE OF THE DOUGLAS COUNTY RECORDER, STATE OF NEVADA, ON SEPTEMBER 12, 1995 AS FILE NO. 370215.

TOGETHER WITH all improvements, tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and any reversion, remainders, rents, issues or profits thereof.

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTORS. THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTORS WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTORS IN THE SAME REAL PROPERTY.

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.



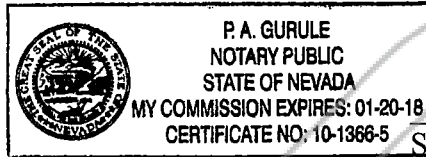
Alice Palmer

2-28-17
Date

State of Nevada }

County of Douglas }

Subscribed and sworn to on this 28 day of February, in the year 2017, before me, P. A. Gurule, personally appeared Alice Palmer, personally known to me (or proved to me on the basis of satisfactory evidence), to be the person whose names are subscribed to this instrument, and acknowledged that he and she executed it.



P. A. Gurule
SIGNATURE OF NOTARY OFFICER

COOPER

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 1320-33-310-026
 b) _____
 c) _____
 d) _____

2. Type of Property:

- | | | | |
|-----------------------------|--------------|--|-----------------|
| a) <input type="checkbox"/> | Vacant Land | b) <input checked="" type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex |
| e) <input type="checkbox"/> | Apt. Bldg. | f) <input type="checkbox"/> | Comm'l/Ind'l |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

FOR RECORDERS OPTIONAL USE ONLY

Notes: _____

3. Total Value/Sales Price of Property:

\$ _____
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ 0.00
 Real Property Transfer Tax Due: \$ 0.00

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 10
 b. Explain Reason for Exemption: _____
Deeds Upon Death are exempt from real property transfer tax under NRS 375.090(10).

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 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 Alice Palmer Capacity Grantor
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Alice Elaine Palmer
 Address: 1280 Campbell Ct.
 City: Gardnerville
 State: NV Zip: 89410

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Rhonda L. Page
 Address: 4081 Rundell Dr
 City: Dayton
 State: Ohio Zip: 45415

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)