APN: 1022-10-002-086

The undersigned hereby affirms That there is no Social Security Number Contained in this document

When Recorded, Mail to: Frank & Lvnn Watson 3539 Long Dr. Minden NV 89423

DOUGLAS COUNTY, NV Rec:\$14.00

Total:\$14.00 GIL LEDERMAN 05/09/2017 12:43 PM

2017-898348

Pgs=2



KAREN ELLISON, RECORDER

E10

Frank & Lynn Watson 3539 Long Dr. Minden NV 89423

Milcah Valiente 3544 Long Dr. Minden NV 89423

DEED UPON DEATH

I, Gil Lederman, Granter, hereby convey to: Beneficiary's, Frank and Lynn Watson and (or) daughter, Milcah Valiente as alternate beneficiary, effective on my death, all right, title and interest in the real property commonly known as 1395 Albite Rd, city of Wellington county of Douglas, state of Nevada, and more particularly described as:

Legal description for 1395 Albite, Wellington NV. 89444.

Lot 175, of Topaz Ranch Estates unit No. 2, according to the map thereof, filed in the field office of the county recorder of Douglas County, state of Nevada on April 19, 1979 No. 31706 in book 479, page 1065. APN No. 1022-10-002-086.

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

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL DEATH OF THE GRANTOR. THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR 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 GRANTOR IN THE SAME REAL PROPERTY.

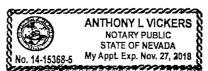
THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURIT NUMBER.

Date:

State of Nevada County of Douglas

This instrument was acknowledged before Me on 1997, 2017 by

GIL LEDERMAN Anthony L. Vickers



STATE OF NEVADA	
DECLARATION OF VALUE 1. Assessor Parcel Number(s)	^
a) /022 \ /0 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
b)	(\
c)	\ \
d)	\ \
-)	\ \
2. Type of Property:	\ \
	\ \
c) Condo/Twnhse d) 2-4 Plex	FOR RECORDERS OPTIONAL USE ONLY
e) Apt. Bldg f) Comm'l/Ind'l	BOOKPAGE DATE OF RECORDING:
g) Agricultural h) Mobile Home	NOTES:
i) U Other	
,	
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. <u>If Exemption Claimed:</u>	
a. Transfer Tax Exemption per NRS 375.090, Se	
b. Explain Reason for Exemption:	
upon my death as while	ume, property is so transferred
5. Partial Interest: Percentage being transferred:	%
5. Partial Interest: Percentage being transferred:	76
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 substanti	
parties agree that disallowance of any claimed exempti	
result in a penalty of 10% of the tax due plus interest a	
result in a penalty of 1070 of the tax due plus interest a	t 170 per mondi.
Pursuant to NRS 375,030, the Buyer and Seller shall be joint	ly and severally liable for any additional amount owed.
LA L	
Signature Selenny	Capacity Owner / Grandon
Signature	Capacity
CELLED (CD 1)/ECD) IN ECD) (1/E/C)	DAMED (OD ANTEDE) DATE DA LA TROM
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: G'LL LEDER MAN	rint Name: Gil LEOERMAN
Address: 390/70 PAZ RANCH DR	ddress:
City: WELL A LOVE C	ddress: ity: tate: Zip:
	tate: Zip:
5tato. 700	
COMPANY/PERSON REQUESTING RECORDING	
(required if not the seller or buyer)	
Print Name:	Escrow #
Address:	
City: State:	
(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)	