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**ASSESSOR'S PARCEL NO.** 1420-33-111-026

**RECORDING REQUESTED BY:**

Mr. and Mrs. John Larson  
2659 Fuller Avenue  
Minden, NV 89423



KAREN ELLISON, RECORDER

E07

**WHEN RECORDED MAIL TO:**  
[SAME AS ABOVE]

**GRANTEES ADDRESS:**  
[SAME AS ABOVE]

**SPACE ABOVE FOR RECORDER'S USE**

**TAX STATEMENTS TO:**  
[SAME AS ABOVE]

**QUITCLAIM DEED**

THIS QUITCLAIM DEED made and executed this 17<sup>TH</sup> day May, 2017,  
by and between JOHN M. LARSON and PATRICIA GALES LARSON, husband and wife,  
hereinafter referred to collectively as "Grantor" and JOHN M. LARSON and PATRICIA  
GALES LARSON, Trustees of the 2001 LARSON FAMILY TRUST, hereinafter referred to  
collectively as "Grantee".

**WITNESSETH:**

That the Grantor, for and in consideration of the sum of TEN DOLLARS  
(\$10.00) lawful money of the United States, and other valuable consideration, to them in  
hand paid by Grantee, the receipt whereof is hereby acknowledged, does by these  
presents remise, release and forever quitclaim unto the Grantee, whose successors and  
appointees are also named in that instrument known as the 2001 LARSON FAMILY  
TRUST, all of their right, title, claim and interest in and to that lot, piece or parcel of land,  
situate in the City of Minden, Douglas County, State of Nevada and as more particularly  
described as follows:

Lot 38 in Block B of WILDHORSE SUBDIVISION UNIT  
NO. 3, a Planned Unit Development, according to the  
map thereof, filed in the office of the County Recorder  
of Douglas County, State of Nevada, on July 2, 1990  
in Book 790, as Page 105, as Document No. 229406.

TOGETHER with all and singular the tenements, hereditament and appurtenances thereunto belonging or in anyway appertaining and the reversion and reversions, remainder and remainders, rents, issues, and profits thereof.

TO HAVE AND TO HOLD the singular, the said premises, together with the appurtenances unto the individual trustees of the trust identified as the 2001 LARSON FAMILY TRUST.

DATED: This 17<sup>th</sup> day of MAY, 2017.

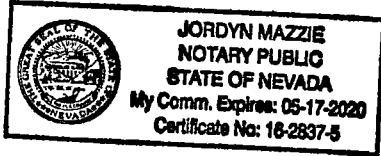
  
\_\_\_\_\_  
JOHN M. LARSON

  
\_\_\_\_\_  
PATRICIA GALES LARSON



STATE OF NEVADA )  
COUNTY OF DOUGLAS ) SS

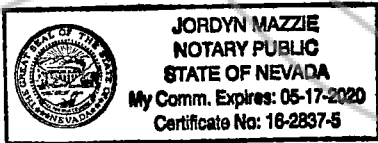
On this 17 day of may, 2017, before me, a Notary Public, personally appeared JOHN M. LARSON, who acknowledged to me that he executed the above instrument voluntarily and freely and for the purposes stated therein.



*Jordyn Mazzie*  
NOTARY PUBLIC

STATE OF NEVADA )  
COUNTY OF DOUGLAS ) SS

On this 17<sup>th</sup> day of may, 2017, before me, a Notary Public, personally appeared PATRICIA GALES LARSON, who acknowledged to me that she executed the above instrument voluntarily and freely and for the purposes stated therein.



*Jordyn Mazzie*  
NOTARY PUBLIC

# STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)  
 a) 1420-33-111-026  
 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: <u>Trust OK 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 by husband & wife, w/o consideration, to a revocable living trust established w/ them as trustees

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 \_\_\_\_\_ Capacity GRANTOR  
 Signature \_\_\_\_\_ Capacity GRANTEE/TRUSTEE

SELLER (GRANTOR) INFORMATION		BUYER (GRANTEE) INFORMATION	
(REQUIRED)	(REQUIRED)	(REQUIRED)	(REQUIRED)
Print Name: <u>JOHN M. CARSON</u>	Print Name: <u>JOHN M. CARSON TRUSTEE</u>	Print Name: <u>JOHN M. CARSON TRUSTEE</u>	Print Name: <u>JOHN M. CARSON TRUSTEE</u>
Address: <u>2659 FULLER AVE</u>	Address: <u>2659 FULLER AVE</u>	Address: <u>2659 FULLER AVE</u>	Address: <u>2659 FULLER AVE</u>
City: <u>MINDEN</u>	City: <u>MINDEN</u>	City: <u>MINDEN</u>	City: <u>MINDEN</u>
State: <u>NV</u> Zip: <u>89423</u>	State: <u>NV</u> Zip: <u>89423</u>	State: <u>NV</u> Zip: <u>89423</u>	State: <u>NV</u> Zip: <u>89423</u>

COMPANY/PERSON REQUESTING RECORDING  
 (REQUIRED IF NOT THE SELLER OR BUYER)  
 Print Name: JOHN M. CARSON Escrow # \_\_\_\_\_  
 Address: 2659 FULLER AVENUE  
 City: MINDEN State: NV Zip: 89423