



KAREN ELLISON, RECORDER E03

APN# 1318-23-310-026

Recording Requested by/Mail to:

Name: WAYNE PIHLGREN
Address: 5237 WHITECAP ST.
City/State/Zip: OXNARD, CA 93035

Mail Tax Statements to:

Name: same
Address: _____
City/State/Zip: _____

Corrective 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 # 0761340, and is correcting THE WRONG APN WHICH WAS ISSUED FOR THIS PROPERTY. THE CORRECT APN 1318-23-310-026 SHOULD BE USED.

OFFICIAL RECORD

Requested By:

MARQUIS TITLE & ESCROW INC

Recording Requested By
Marquis Title & Escrow Inc.
APN: 1318-23-210-026

Escrow No. 100215-SLG
R.P.T.T. \$975.00

Douglas County - NV
Karen Ellison - Recorder

Page. 1 OF 3 Fee: 16.00
BK-0310 PG- 7558 RPTT: 975.00

WHEN RECORDED MAIL TO:
WAYNE PIHLGREN and EVA PIHLGREN
5237 Whitecap Street
Oxnard, CA 93035



MAIL TAX STATEMENT TO:
Same as Above

GRANT, BARGAIN and SALE DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

TOM GAISER, a single man

do(es) hereby GRANT, BARGAIN and SELL to

WAYNE D. PIHLGREN and EVA A. PIHLGREN, husband and wife as community property with right of survivorship

the real property situate in the County of Douglas, State of Nevada, described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

TOGETHER with 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: 3/24/10

Tom Gaiser
TOM GAISER

STATE OF Nevada
COUNTY OF Douglas

This instrument was acknowledged before me on 3/25/10 by
TOM GAISER .

[Signature]
Notary Public

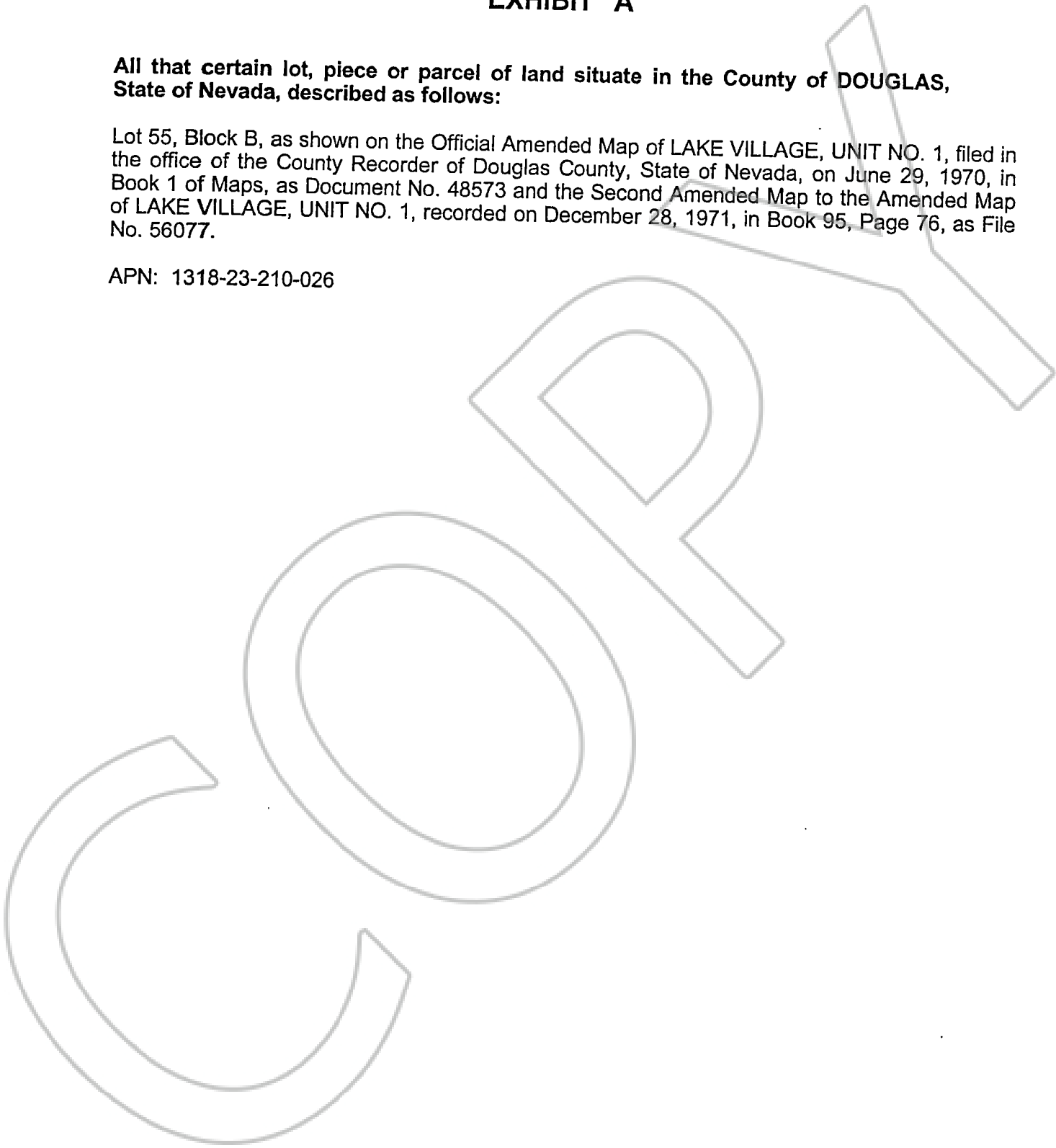
 SHARON GOODWIN
Notary Public - State of Nevada
Appointment Recorded in Lyon County
No: 94-1791-12 - Expires June 14, 2010

EXHIBIT "A"

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

Lot 55, Block B, as shown on the Official Amended Map of LAKE VILLAGE, UNIT NO. 1, filed in the office of the County Recorder of Douglas County, State of Nevada, on June 29, 1970, in Book 1 of Maps, as Document No. 48573 and the Second Amended Map to the Amended Map of LAKE VILLAGE, UNIT NO. 1, recorded on December 28, 1971, in Book 95, Page 76, as File No. 56077.

APN: 1318-23-210-026



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1318-23-310-026
 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: _____	

3. Total Value/Sales Price of Property: \$ 0
 Deed in Lieu of Foreclosure Only (value of property) (00)
 Transfer Tax Value: \$ 00
 Real Property Transfer Tax Due: \$ 0

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # 3
 b. Explain Reason for Exemption: CORRECT APN number LISTED ON GRANT DEED.

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 Wayne Pihlgren Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: WAYNE PIHLGREN
 Address: 5237 WHITECAP ST
 City: OXNARD
 State: CA Zip: 93035

Print Name: Same
 Address: _____
 City: _____
 State: _____ Zip: _____

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/MICROFILMED)