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THE UNDERSIGNED HEREBY AFFIRMS THAT
THIS DOCUMENT DOES NOT CONTAIN A
SOCIAL SECURITY NUMBER PER NRS 239B.030.
APN: 1420-28-210-015



KAREN ELLISON, RECORDER E07

Recording Requested by:
Grantors, THOMAS and LORI MARTEL

When Recorded Mail Document and tax statements to:
THOMAS O. MARTEL & LORI M. MARTEL FAMILY TRUST
P.O. Box 486
Minden, NV 89423

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

QUIT CLAIM DEED

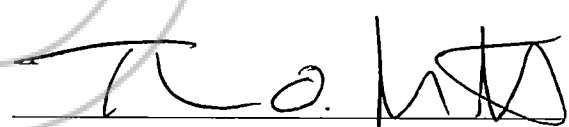
THOMAS O. MARTEL & LORI M. MARTEL, without consideration, do hereby remise, release and forever quitclaim all right, title and interest to the THOMAS O. MARTEL & LORI M. MARTEL FAMILY TRUST, THOMAS O. MARTEL and LORI M. MARTEL, as Trustees, the following described real property situated in Douglas County, State of Nevada, bounded and described as:

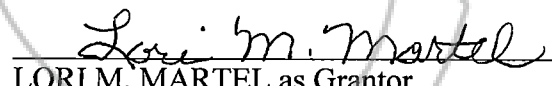
Lot 21, as set forth on Final Map of SARATOGA SPRINGS ESTATES UNIT NO. 2, a Planned Unit Development, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on May 23, 1994, in Book 594, Page 3894, as Document No. 338088 and as amended by Certificate of Amendment recorded July 8, 1994, in Book 794, Page 1165, as Document No. 341498, Official Records of Douglas County, Nevada.

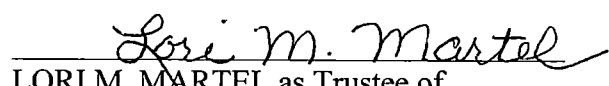
Together with all and singular the tenements, hereditaments and appurtenance, if any, thereto belonging or appertaining, and any reversions, remainders, rents issues, or profits thereof.

WITNESS my hand this 1st day of August, 2017


THOMAS O. MARTEL as Grantor


THOMAS O. MARTEL as Trustee of the
THOMAS O. MARTEL & LORI M. MARTEL
FAMILY TRUST


LORI M. MARTEL as Grantor


LORI M. MARTEL as Trustee of
the THOMAS O. MARTEL & LORI M. MARTEL
FAMILY TRUST

STATE OF NEVADA)
CARSON CITY)

On this 1st day of August, 2017 before me, a Notary Public, personally appeared THOMAS O. MARTEL and LORI M. MARTEL personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.

Collette Teuscher
Notary Public



THIS ACKNOWLEDGMENT IS ATTACHED TO A QUIT CLAIM DEED
DATED August 1, 2017

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessors Parcel Number(s)
 a) 1420-28-210-015
 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	
DOCUMENT/INSTRUMENT #:	_____
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: \$ 0.00

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # 7
 b. Explain Reason for Exemption: A transfer of title to or from a trust without consideration if a Certificate of trust is presented at the time of transfer

5. Partial Interest: Percentage being transferred: 100 %

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 [Signature] Capacity grantor-trustee
 Signature Lori Martel Capacity grantor-trustee

**SELLER (GRANTOR) INFORMATION
(REQUIRED)**

Print Name: Thomas & Lori Martel
 Address: P.O. Box 486
 City: Minden
 State: NV Zip: 89423

**BUYER (GRANTEE) INFORMATION
(REQUIRED)**

Print Name: Thomas & Lori Martel-Trustees
 Address: P.O. Box 486
 City: Minden
 State: NV Zip: 89423

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: A+ Documents, Inc. Escrow # _____
 Address: 411 W. Fourth Street, Suite 1
 City: Carson City State: NV Zip: 89703