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APN #: 1320-33-817-019
Recording Requested By:
08/29/2017
Return Documents to:
Name: Theresa A. Sweeney
Address: 1841 50th Street
City/State/Zip: Sacramento, CA, 95819
Send Tax Statements to:
Name: Monica A. Knight
Address: 1841 50th Street
City/State/Zip: Sacramento, CA 95819



KAREN ELLISON, RECORDER E10

TRANSFER ON DEATH DEED

KNOW ALL MEN BY THESE PRESENTS THAT:

I, **Theresa A. Sweeney**, an individual, unmarried, hereinafter referred to as "Grantor", do hereby convey unto the Grantees as designated below, effective on my death, the following land and property, together with all improvements located thereon, lying in the County of Douglas, State of Nevada, to-wit:

Single Family Dwelling at 1381 Brooke Way, Gardnerville, NV 89410

Grantees:

Kevin Scott Knight
7008 8th Avenue
Tahoma, CA 96142
(Ph) 805-708-6867

Monica Ann Knight
1841 50th Street
Sacramento, CA 95819
(Ph) 775-901-0817

This transfer on death deed is revocable. This transfer on death deed does not transfer any ownership until the death of the grantor. This transfer on death deed revokes all prior deeds by the grantor which convey the same real property pursuant to subsection 1 of NRS 111.109 regardless of whether the prior deeds failed to convey the grantor's entire interest in the same real property.

SUBJECT to all easements, rights-of-way, protective covenants and mineral reservations of record, if any.

TO HAVE AND TO HOLD same unto Grantees, and unto Grantees' heirs and assigns forever, with all appurtenances thereunto belonging.

WITNESS Grantor hand this the 29 day of August, 2017.


Signature

Theresa A. Sweeney
Print Name

State of Nevada, County of _____

The foregoing instrument was acknowledged before me on _____ (Date)

by _____ (Full Name of Signor)

(Seal)

Notary Public, State of _____

Print or Type Name

My Commission Expires: _____

Grantor(s) Name, Address, phone:

Theresa A. Sweeney
1841 50th Street
Sacramento CA 95819

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }

County of Sacramento }

On September 18 2019 before me, Daniel Kelly, notary public,
(Here insert name and title of the officer)

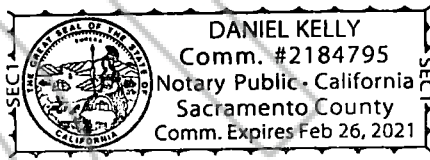
personally appeared Theresa A. Sweeney,
 who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

[Handwritten Signature]

Notary Public Signature



(Notary Public Seal)

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT
Transfer on Death Deed
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 3 Document Date N/A

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.

CAPACITY CLAIMED BY THE SIGNER

Individual (s)

Corporate Officer

Trustee(s)

Partner(s)

Attorney-in-Fact

Other _____

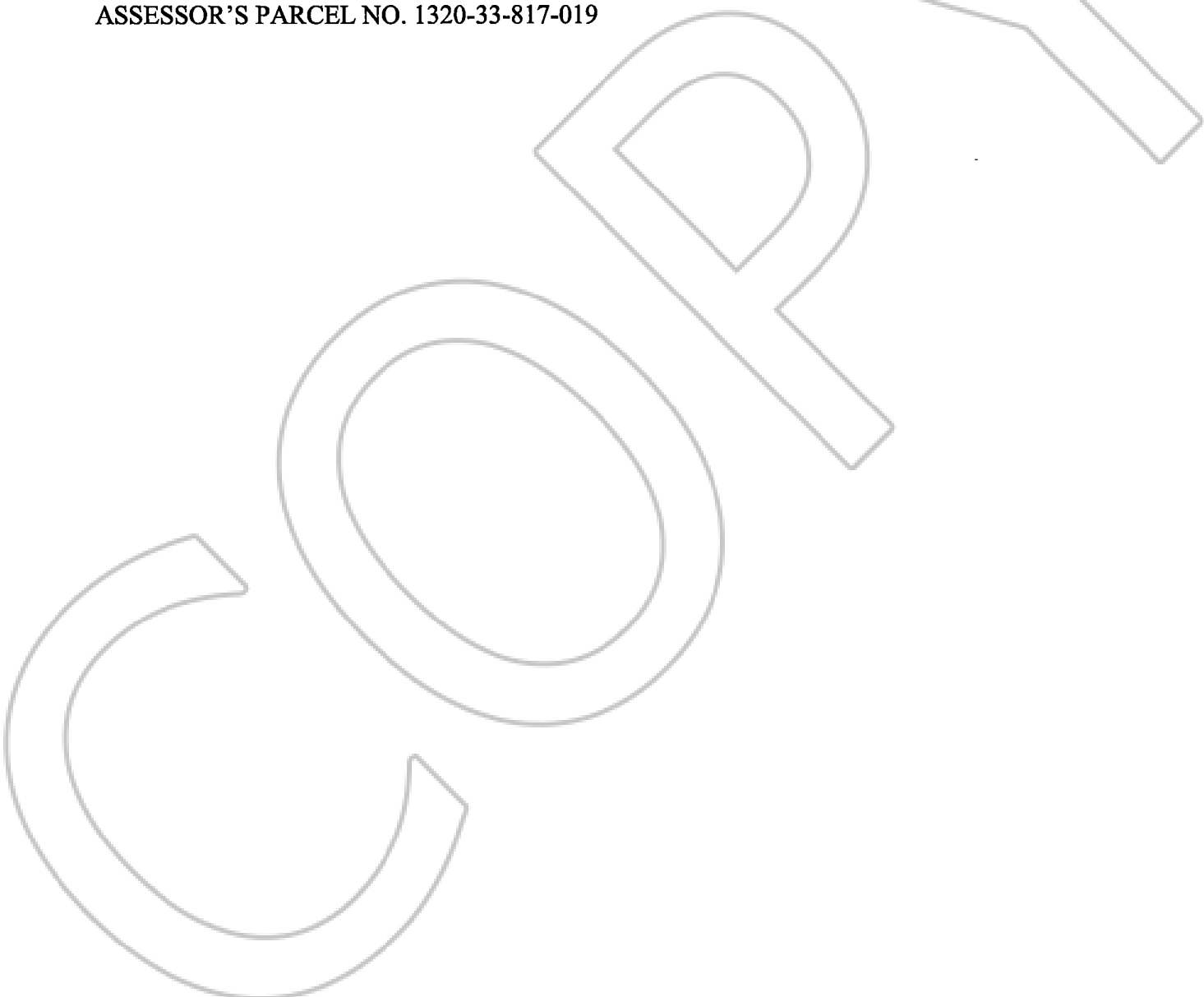
EXHIBIT A

Order No.: 040300853

The land referred to herein is situated in the State of Nevada, County of Douglas, described as follows:

Lot 19, in Block D, as set forth on FINAL SUBDIVISION MAP No. 1006-12 for CHICHESTER ESTATES, PHASE 12, filed in the office of the County Recorder of Douglas County, Nevada and recorded January 8, 2004 in Book 0104, Page 2012, as Document No. 601490.

ASSESSOR'S PARCEL NO. 1320-33-817-019



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
a) 1320-33-817-019
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: \$338,000.00
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 # 10
b. Explain Reason for Exemption: Transfer Deed Upon Death

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 [Handwritten Signature] Capacity Owner
Signature _____ Capacity _____

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

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

Print Name: Theresa Sweeney
Address: 1841 50th Street
City: Sacramento
State: CA Zip: 95819

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: _____