

APN: 1420-27-701-039

RECORDING REQUESTED BY:

Robert H. Zeisloft & Helen M. Zeisloft
1560 Gloria Way
Minden, NV 89423

AFTER RECORDATION, RETURN BY MAIL TO:

Robert H. Zeisloft & Helen M. Zeisloft, Trustees
1560 Gloria Way
Minden, NV 89423



KAREN ELLISON, RECORDER

E07

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUIT CLAIM DEED

THIS QUITCLAIM DEED, executed this 10th day of October, 2017, by first party, Grantors, ROBERT H. ZEISLOFT and HELEN M. ZEISLOFT, husband and wife as joint tenants with right of survivorship, whose post office address is 1560 Gloria Way, Minden, NV 89423, to second party, Grantees, ROBERT H. ZEISLOFT and HELEN M. ZEISLOFT, Trustees of THE HR ZEISLOFT LIVING TRUST, Dated October 10, 2017, whose post office address is 1560 Gloria Way, Minden, NV 89423.

WITNESSETH, that the said first party, for good consideration and for the sum of Ten Dollars (\$10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Lyon, State of Nevada to wit:

Parcel C-4B, as set forth on Parcel Map No. 12 for RAYMOND M. SMITH, recorded August 14, 1992, in Book 892, Page 2533, as Document No. 286106, of Official Records, Douglas County, Nevada.

Subject to Restrictions, Conditions, Covenants, Rights, Rights of Way, and Easements now of record, if any. TOGETHER with all and singular the tenements, hereditaments and appurtenances now of record, if any.

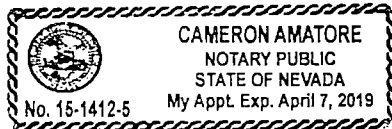
IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first above written.

Robert H Zeisloft
Robert H. Zeisloft
Helen M Zeisloft
Helen M. Zeisloft

STATE OF NEVADA)
) ss.
COUNTY OF DOUGLAS)

This instrument was acknowledged before me on the 10 day of October, 2017, by Robert H. Zeisloft and Helen M. Zeisloft,

Cameron Amatore
Notary Public



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1420-27-701-039
 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: <u>Set Trust OK</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 to Trust without consideration

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 Robert H Zeisloft Capacity _____ Grantor
 Signature Helen M Zeisloft Capacity _____ Grantor

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Robert H. Zeisloft & Helen M. Zeisloft
 Address: 1560 Gloria Way
 City: Minden
 State: NV Zip: 89423

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Robert H. Zeisloft & Helen M. Zeisloft, Trustees
 Address: 1560 Gloria Way
 City: Minden
 State: NV Zip: 89423

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)