

APN: 1420-07-612-011



KAREN ELLISON, RECORDER E07

RECORDING REQUESTED BY:

Name: FOR THE PEOPLE
Address: 6405-2 S. Virginia Street
City/State/Zip: Reno, NV 89511

WHEN RECORDED MAIL TO GRANTOR I/C/O:

Name: NANCY STEPHENS
Address: 3540 Haystack Drive
City/State/Zip: Carson City, NV 89705

MAIL TAX STATEMENT TO:

Name: NANCY STEPHENS
Address: 3540 Haystack Drive
City/State/Zip: Carson City, NV 89705

GRANT BARGAIN AND SALE DEED

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the personal information of any person or persons. (Per NRS 239B.030)

-OR-

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the personal information of a person or persons as required by law:

(State specific law)



Signature

Signature

GRANTOR
Title

Title

NANCY STEPHENS
Print Name

Print Name

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

a) 1420-07-612-011
 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: SD Trust Verified

3. Total Value/Sales Price of Property:

\$0.00
 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: _____
Transfer without consideration from a trust

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 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 Nancy A Stephens Capacity Grantor
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: The Nancy A. Stephens Living
Address: Trust 3450 Haystack Dr.
City: Carson City
State: NV **Zip:** 89705

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Nancy Stephens
Address: 3450 Haystack Dr.
City: Carson City
State: NV **Zip:** 89705

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: For the People **Escrow #** _____
Address: 6405-2 South Virginia Street
City: Reno **State:** NV **Zip:** 89511