

APN 1320-02-001-094

RPTT: None/Exempt #10

When Recorded, Mail To:  
Mail Tax Statements To:  
Danny R. and Darlene D. Smudski  
2548 Nye Drive  
Minden, NV 89423



KAREN ELLISON, RECORDER

E10

DEED UPON DEATH

We, DANNY R. SMUDSKI and DARLENE D. SMUDSKI, husband and wife, Grantors, do hereby convey unto LAURENCE SMUDSKI, a married man as his sole and separate property, and LOREN SMUDSKI, a married man as his sole and separate property, as joint tenants with right of survivorship, effective on my death the following described real property:

Lot 10, as shown on that certain map entitled PIONEER HEIGHTS SUBDIVISION, UNIT NO. 1, filed in the office of the County Recorder of Douglas County, Nevada, on March 13, 1961, as Document No. 17360.

TOGETHER WITH all improvements, tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTORS. THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTORS WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF

WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE GRANTORS' ENTIRE INTEREST IN THE SAME REAL PROPERTY.

This deed is subject to any valid liens on the property in existence on the date of death of Grantors.

The undersigned affirm this document does not contain a social security number.

WITNESS MY HAND this 29 day of November, 2017.

*Danny R. Smudski*  
DANNY R. SMUDSKI  
*Darlene D. Smudski*  
DARLENE D. SMUDSKI

STATE OF NEVADA        )  
                                  ss  
CARSON CITY            )

On the 29<sup>th</sup> day of November, 2017, personally appeared before me, a Notary Public, DANNY R. SMUDSKI and DARLENE D. SMUDSKI, personally known or proved to me on the basis of satisfactory evidence to be the persons whose names are subscribed to the above instrument who acknowledged to me that they executed same.



SANDRA F. MENDEZ  
NOTARY PUBLIC  
STATE OF NEVADA  
My Commission Expires: 10-18-19  
Certificate No: 88-12514-8

*Sandra F. Mendez*  
Notary Public

STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)  
 a) 1320-02-001-094  
 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: \$ \_\_\_\_\_  
 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: 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 Danny R Smudski Capacity GRANTOR

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION  
(REQUIRED)

Print Name: DANNY SMUDSKI  
 Address: 2548 NYE DR  
 City: MINDEN  
 State: NV Zip: 89423

BUYER (GRANTEE) INFORMATION  
(REQUIRED)

Print Name: \_\_\_\_\_  
 Address: SAME  
 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)