

Assessor's Parcel Number: 1420-07-718-001)
)
RECORDING REQUESTED)
AND RETURN TO:)
Gypsee A. Solis)
912 Garnet Court)
Carson City, NV 89705)
)
MAIL TAX STATEMENTS TO:)
Gypsee A. Solis)
912 Garnet Court)
Carson City, NV 89705)
)



KAREN ELLISON, RECORDER E10

(SPACE ABOVE THIS LINE FOR RECORDER'S USE)

DEED UPON DEATH

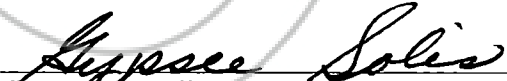
I, **Gypsee A. Solis**, a widow, (hereinafter referred to as "Grantor"), do hereby convey to my granddaughter Melissa M. Miller, (hereinafter referred to as "Grantees"), as her sole and separate property, effective upon the death of the Grantor, all right, title and interest in the real property more particularly described as:

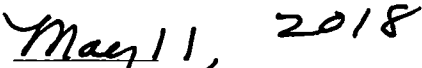
LOT 83, AS SHOWN ON THE MAP OF RIDGEVIEW ESTATES, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA. ASSESMENT PARCEL. #13-132-14

TOGETHER WITH all improvements, tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and any reversion, 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 ENTIRE INTEREST OF THE GRANTORS IN THE SAME REAL PROPERTY.

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.


Gypsee A. Solis


Date

State of Nevada }

County of Douglas }

Subscribed and sworn to on this 11th day of May, in the year 2018, before me, Michael D. Troutner, personally appeared Gypsee A. Solis, personally known to me (or proved to me on the basis of satisfactory evidence), to be the person whose names are subscribed to this instrument, and acknowledged that he and she executed it.



Michael D. Troutner
SIGNATURE OF NOTARY OFFICER

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 1420-07-718-001
 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:	_____

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ 0.00
 Real Property Transfer Tax Due: \$ 0.00

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 10
 b. Explain Reason for Exemption: _____
Deeds Upon Death are exempt from real property transfer tax under NRS 375.090(10).

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 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 Gypsee A. Solis Capacity Grantor
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Gypsee A. Solis
 Address: 912 Garnet Court
 City: Carson City
 State: NV Zip: 89705

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Sam
 Address: _____
 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)