

RECORDING REQUESTED
AND WHEN RECORDED MAIL TO
AND MAIL TAX STATEMENTS TO



KAREN ELLISON, RECORDER

E06

Uwe Kleinhempel
~~2926 Vista Creek Drive~~
~~San Jose, CA 95133~~
998 Aspen Grove Circle
Minden, NV
89423

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$0

Computed on full value of property conveyed, or
 Computed on full value less liens and encumbrances
remaining at time of sale.

Signature of Declarant or Agent Determining Tax

This is a transfer from both spouses to one spouse incident to a Dissolution of Marriage.

Uwe Kleinhempel and Sau Lin See, husband and wife as joint tenants hereby grant to Uwe Kleinhempel, as his sole and separate property, all the following real property in the City of Minden, County of Douglas, State of Nevada, described as follows:

Lot 9 in Block A., as set forth on the final map of Mountain Glen, Phase I, according to the map thereof, filed in the office of the County recorder of Douglas County, State of Nevada on December 28, 1987, in Book 1287, Page 3712, as Document No. 169542.

PROPERTY ADDRESS: 998 Aspen Grove Circle, Minden, NV. 89523

ASSESSOR'S PARCEL NO. 1320-30-812-009

Dated: 3/27, 2018

Dated: 3/27, 2018

Uwe
Uwe Kleinhempel

Sau Lin See
Sau Lin See

ACKNOWLEDGMENT ATTACHED

CALIFORNIA A. L. PURPOSE 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.

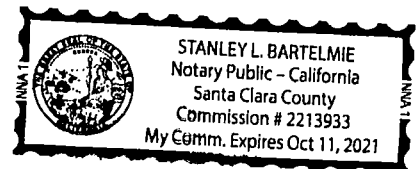
STATE OF CALIFORNIA)
) ss.
COUNTY OF SANTA CLARA)

On March 27, 2018 before me, Stanley L. Bartelmie, Notary Public, personally appeared Uwe Kleinhempel and Sau Lin See 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.

Stanley L. Bartelmie



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1320-30-812-009
 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 # 6
 b. Explain Reason for Exemption: per divorce settlement

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 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 [Signature] Capacity grantee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: Sau Lin See
 Address: 2926 Vista Creek Dr.
 City: San Jose, CA
 State: CA Zip: 95133

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Uwe Kleinhempel
 Address: 998 Aspen Grove Circle
 City: Minden
 State: NV Zip: 89423

COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer)
 Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____