

A.P.N.: 1420-07-610-053  
File No: 143-2544172 (mk)  
R.P.T.T.: \$975.00

When Recorded Mail To: Mail Tax Statements To:  
Poker Brown, LLC  
6770 S. McCarran Blvd  
Reno, NV 89509

***GRANT, BARGAIN and SALE DEED***

*FOR A VALUABLE CONSIDERATION*, receipt of which is hereby acknowledged,

Barbara Jean Gamba, Trustee of The Barbara Jean Gamba Trust dated December 4, 1996

do(es) hereby *GRANT, BARGAIN and SELL* to

Poker Brown LLC., a Delaware Limited Liability Company

the real property situate in the County of Douglas, State of Nevada, described as follows:

**LOT 12 IN BLOCK B AS SHOWN ON THE FINAL MAP OF SUNRIDGE HEIGHTS PHASE 1, A PLANNED UNIT DEVELOPMENT, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA ON JUNE 11, 1993, AS DOCUMENT NUMBER 309550.**


Subject to

1. All general and special taxes for the current fiscal year.
2. Covenants, Conditions, Restrictions, Reservations, Rights, Rights of Way and Easements now of record.

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

Date: 05/17/2018

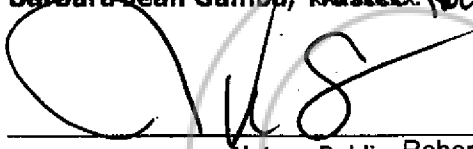
Barbara Jean Gamba, Trustee of The Barbara  
Jean Gamba Trust dated 12-4-1996

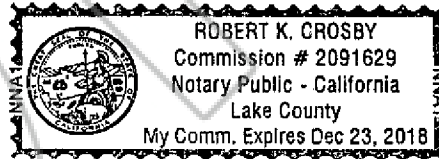
  
Barbara Jean Gamba, Trustee

STATE OF California )  
  ) : ss.  
COUNTY OF Lake )

This instrument was acknowledged before me on May 24, 2018 by

~~Barbara Jean Gamba, Trustee~~ 

  
Notary Public Robert K. Crosby  
(My commission expires: Dec. 23, 2018 )



This Notary Acknowledgement is attached to that certain Grant, Bargain Sale Deed dated **May 17, 2018** under Escrow No. **143-2544172**.

# ALL-PURPOSE CERTIFICATE OF 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 }

County of <sup>nk</sup> ~~Lake~~ Sonoma }

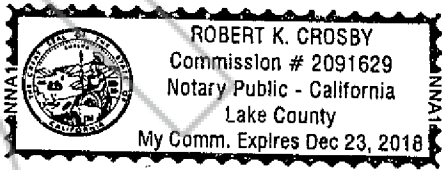
On May 24, 2018 before me, Robert K. Crosby, Notary Public  
(Here insert name and title of the officer)

personally appeared <sup>nk</sup> Barbara Jean Gamba,  
 who 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.

Robert K. Crosby  
 Notary Public Signature (Notary Public Seal)



**ADDITIONAL OPTIONAL INFORMATION**

DESCRIPTION OF THE ATTACHED DOCUMENT  
Grant Bargain and  
(Title or description of attached document)  
Sale Deed  
(Title or description of attached document continued)  
 Number of Pages 2 Document Date 5-17-18

**CAPACITY CLAIMED BY THE SIGNER**

Individual (s)  
 Corporate Officer  
 \_\_\_\_\_  
(Title)

Partner(s)  
 Attorney-in-Fact  
 Trustee(s)  
 Other \_\_\_\_\_

**INSTRUCTIONS FOR COMPLETING THIS FORM**

- This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.*
- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
  - Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
  - The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
  - Print the name(s) of document signer(s) who personally appear at the time of notarization.
  - Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/~~they~~, is /are ) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
  - The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
  - Signature of the notary public must match the signature on file with the office of the county clerk.
    - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
    - ❖ Indicate title or type of attached document, number of pages and date.
    - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
  - Securely attach this document to the signed document with a staple.

**STATE OF NEVADA  
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)  
 a) 1420-07-610-053  
 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	
Book _____	Page: _____
Date of Recording: _____	
Notes: _____	

3. a) Total Value/Sales Price of Property: \$250,000.00  
 b) Deed in Lieu of Foreclosure Only (value of property) ( \$ \_\_\_\_\_ )  
 c) Transfer Tax Value: \$250,000.00  
 d) Real Property Transfer Tax Due \$975.00

4. **If Exemption Claimed:**  
 a. Transfer Tax Exemption, per 375.090, Section: \_\_\_\_\_  
 b. Explain reason for exemption: \_\_\_\_\_

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: *Barbara Gamba*  
 Signature: \_\_\_\_\_

Capacity: *agent*  
 Capacity: \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION  
(REQUIRED)**

**BUYER (GRANTEE) INFORMATION  
(REQUIRED)**

Barbara Jean Gamba, Trustee of  
 The Barbara Jean Gamba Trust  
 Print Name: dated 12-4-1996  
 Address: P.O. Box 756  
 City: Cloverdale  
 State: CA      Zip: 95425

Poker Brown, LLC  
 Print Name: 6770 S. McCarran Blvd Ste  
202  
 Address: 202  
 City: Reno  
 State: NV      Zip: 89509

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**

First American Title Insurance  
 Print Name: Company  
 Address: 1663 US Highway 395, Suite 101  
 City: Minden

File Number: 143-2544172 mk/ mk  
 State: NV      Zip: 89423

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)