

35-

APN# 1318-09-810-003



KAREN ELLISON, RECORDER E07

Recording Requested by/Mail to:
Name: Joel R Baker
Address: P.O. Box 66
City/State/Zip: Buellton, CA 93427

Mail Tax Statements to:
Name: Randal B. Baker and Mallory D. Baker Revocable Trust Agreement
Address: 20000 Hiawatha St.
City/State/Zip: Chatsworth, CA 91311

Grant, Bargain and Sale Deed

Title of Document (required)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording
DOES contain personal information as required by law: (check applicable)

Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)

Signature

Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH: That

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Joel Robert Baker, Trustee of the Arline Brownlie Baker Trust, FBO Joel Robert Baker, dated the 19th day of March 2012

do(es) hereby GRANT(s) BARGAIN SELL AND CONVEY to

Joel R. Baker, as Trustee of the Joel R. Baker 1998 Revocable Trust dated June 7, 1998 and Amended and Restated May 23, 2003 as to 50% interest

and to the heirs and assigns of such Grantee forever, all the following real property situated in the City of Zephyr Cove, County of Douglas State of Nevada bounded and described as follows:


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

Lot 8, in Block C as shown on the Amended Map of Subdivision No. 2, Zephyr Cove Properties, Inc., in Sections 9 and 10, Township 13, North, Range 18 East, M.D.B. & M., filed in the Office of the County Recorder of Douglas County, Nevada on August 5, 1929, as Document No. 267.

TOGETHER with all tenements, hereditaments and appurtenances, if any, thereto belonging or appertaining, and any reversions, rents, issues or profits thereof.

Dated: 06/25/2018

Arline Brownlie Baker Trust, FBO Joel Robert Baker, dated the 19th of March 2012


Joel Robert Baker, Trustee

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

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 SANTA BARBARA)

On JUNE 25, 2018 before me, KATHERINE V. TATE, NOTARY PUBLIC,
Date Here Insert Name and Title of the Officer

personally appeared JOEL R. BAKER
Name(s) of Signer(s)

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 executed the same in ~~his~~ her authorized capacity(ies), and that by ~~his~~ her 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.

Signature Katherine V. Tate
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: GRANT SALE BARGAIN REED Document Date: 6/25/2018
Number of Pages: 1 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: JOEL R. BAKER
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1318-09-810-003
 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: <u>Verified Trust - JB</u>	

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 # 7
 b. Explain Reason for Exemption: A transfer of title to or from a trust without consideration if a certificate of trust is present at the time of transfer. (see attached Trust Certificate)

5. Partial Interest: Percentage being transferred: 50.00 %

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 _____ Capacity Trustee

Signature _____ Capacity Trustee

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

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

Print Name: Arline Brownlie Baker Trust, FBO Joel Robert Baker dtd 2/10/12
 Address: PO Box 66
 City: Buellton
 State: CA Zip: 93427

Print Name: Joel R. Baker 1998 Revocable Trust dtd 6/7/98 and Amended & Restated May 22, 2002
 Address: PO Box 66
 City: Buellton
 State: CA Zip: 93427

**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)