

APN: 1318-23-410-028

**RECORDING REQUESTED BY:  
SIGNATURE TITLE COMPANY, LLC  
212 ELKS POINT RD, STE 445  
P.O. BOX 10297  
ZEPHYR COVE, NV 89448**

**MAIL RECORDABLE DOCS AND  
TAX STATEMENTS TO:  
DAVID A. BROADFOOT  
5820 COYOTE PASS RD  
SHINGLE SPRINGS, CA 95682**

**ESCROW NO: 11000356-ZCT**

RPTT \$702.00

**GRANT, BARGAIN, SALE DEED**

**THIS INDENTURE WITNESSETH: That Jenna Alcalá, a married woman as her sole and separate property**

**FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, do/does hereby Grant, Bargain, Sell, and Convey to:**

**David A. Broadfoot and Pamela K. Broadfoot, Husband and Wife as joint tenants with rights of survivorship**

**all that real property situated in the City of Stateline, County of Douglas, State of Nevada, described as follows:**

**See Exhibit A attached hereto and made a part hereof.**

**Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.**

Jenna Alcalá  
Jenna Alcalá  
10/25/18

STATE OF NEVADA  
COUNTY OF

} SS:

This instrument was acknowledged before me on \_\_\_\_\_

by \_\_\_\_\_

\_\_\_\_\_  
Notary Public (seal)

Notary Public  
See Attached

# CALIFORNIA 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 Santa Cruz }

On 06/25/2018 before me, Austin C. Straley, Notary Public  
(Here insert name and title of officer)

personally appeared Jenna Alcalá,  
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.



Notary Public Signature

(Notary Public Seal)



### ADDITIONAL OPTIONAL INFORMATION

**DESCRIPTION OF THE ATTACHED DOCUMENT**

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages \_\_\_\_\_ Document Date \_\_\_\_\_

**CAPACITY CLAIMED BY THE SIGNER**

Individual (s)

Corporate Officer

\_\_\_\_\_ (Title)

Partner(s)

Attorney-in-Fact

Trustee(s)

Other \_\_\_\_\_

### INSTRUCTIONS FOR COMPLETING THIS FORM

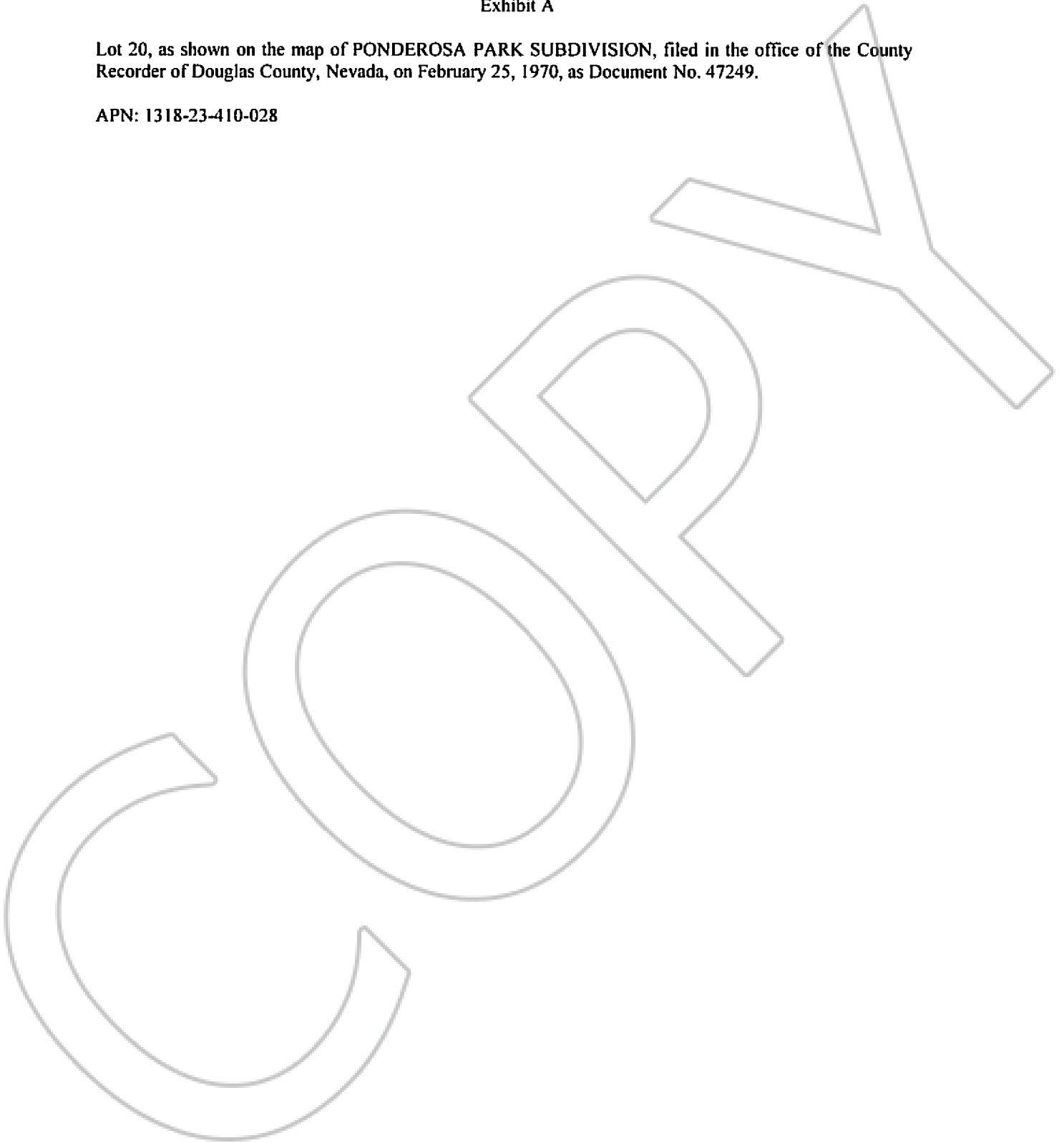
*This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate 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.

Exhibit A

Lot 20, as shown on the map of PONDEROSA PARK SUBDIVISION, filed in the office of the County Recorder of Douglas County, Nevada, on February 25, 1970, as Document No. 47249.

APN: 1318-23-410-028



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

**1. Assessor Parcel Number(s)**

- a) 1318-23-410-028
- 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
- Other

**FOR RECORDER'S OPTIONAL USE ONLY**

Book: \_\_\_\_\_ Page: \_\_\_\_\_

Date of Recording: \_\_\_\_\_

Notes: \_\_\_\_\_

**3. Total Value/Sales Price of Property:**

\$180,000.00

Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )

Transfer Tax Value \$180,000.00

Real Property Transfer Tax Due: \$702.00

**4. If Exemption Claimed**

- a. Transfer Tax Exemption, per NRS 375.090, Section \_\_\_\_\_
- b. Explain Reason for Exemption: \_\_\_\_\_

**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 Jenna Alcala Capacity Grantor

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

**SELLER (GRANTOR) INFORMATION**

**BUYER (GRANTEE) INFORMATION**

**(Required)**

**(Required)**

Print Name: Jenna Alcala

Print Name: David A. Broadfoot

Address: 207 Hollister Ave

Address: 5820 Coyote Pass Rd

Capitola, CA 95010

Shingle Springs, CA 95682

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

Print Name: Signature Title Company LLC Escrow #: 11000356-ZCT

Address: 212 Elks Point Road, Suite 445, PO Box 10297

Zephyr Cove, NV 89448

**AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED**