

THE UNDERSIGNED HEREBY AFFIRMS THAT
THIS DOCUMENT DOES NOT CONTAIN A
SOCIAL SECURITY NUMBER PER NRS 239B 030
APN. 1320-32-611-011



KAREN ELLISON, RECORDER

E07

Recording Requested by
Grantors, Michael & Kristie Mazza

When Recorded Mail Document and tax statements to
MAZZA FAMILY REVOCABLE LIVING TRUST
1513 Wildrose Drive
Gardnerville, NV 89410

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

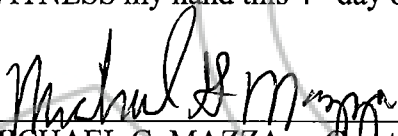
QUIT CLAIM DEED

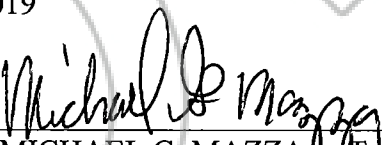
MICHAEL G MAZZA & KRISTIE A MAZZA, without consideration, do hereby remise, release and forever quitclaim all right, title and interest to the MAZZA FAMILY REVOCABLE LIVING TRUST, MICHAEL G MAZZA and KRISTIE A MAZZA, as Trustees, the following described real property situated in Douglas County, State of Nevada, bounded and described as

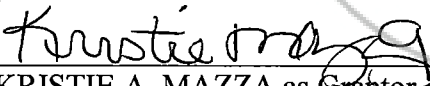
Lot 5, as shown on the map of WILDROSE SUBDIVISION, PLAT NO 1, filed for record in the office of the County Recorder of Douglas County, Nevada, on October 28, 1964 in Book 27, Page 452 as Document No 26425

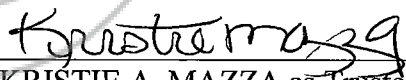
Together with all tenements, hereditaments and appurtenances, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof

WITNESS my hand this 4th day of March, 2019


MICHAEL G MAZZA as Grantor


MICHAEL G MAZZA as Trustee of the
Mazza Family Revocable Living Trust


KRISTIE A MAZZA as Grantor


KRISTIE A MAZZA as Trustee of the
Mazza Family Revocable Living Trust

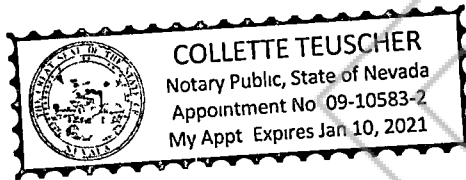
-A LOOSE CERTIFICATE ATTACHED-

STATE OF NEVADA)
CARSON CITY)

On this 4th day of March, 2019 before me, a Notary Public, personally appeared MICHAEL G MAZZA and KRISTIE A MAZZA personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument

WITNESS my hand and official seal

Collette Teuscher
Notary Public



THIS ACKNOWLEDGMENT IS ATTACHED TO A QUIT CLAIM DEED
DATED March 4, 2019

STATE OF NEVADA
DECLARATION OF VALUE

- 1 Assessors Parcel Number(s)
 - a) 1320-32-611-011
 - 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	
DOCUMENT/INSTRUMENT #	_____
BOOK	PAGE _____
DATE OF RECORDING	<u>3/6/19</u>
NOTES	<u>Verified Trust w/ AB</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 \$ 0 00

- 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 presented at the time of transfer

- 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 Michael & Kristie Mazza Capacity grantor-trustee
 Signature Kristie Mazza Capacity grantor-trustee

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

Print Name Michael & Kristie Mazza
 Address 1513 Wildrose Drive
 City Gardnerville
 State NV Zip 89410

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

Print Name Michael & Kristie Mazza-Trustees
 Address 1513 Wildrose Drive
 City Gardnerville
 State NV Zip 89410

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name A+ Documents, Inc Escrow # _____
 Address 411 W Fourth Street, Suite 1
 City Carson City State NV Zip 89703

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