DOUGLAS COUNTY, NV Rec \$35 00

2019-927514 04/05/2019 09 35 AM

PAULT SLOWICK

Total \$35 00

Pas=3

APN: 1022-14-001-029

RECORDING REQUESTED BY

Paul T Slowik

AFTER RECORDATION, RETURN BY MAIL TO

Paul T Slowik 4454 San Joaquin St Oceanside, CA 92057



KAREN ELLISON, RECORDER

E07

SPACE ABOVE THIS LINE FOR RECORDER'S USE

## **QUIT CLAIM DEED**

THIS QUITCLAIM DEED, executed this day of da

WITNESSETH, that the said first party, for good consideration and for the sum of Ten Dollars (\$10 00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Douglas, State of Nevada to wit

Parcel No 40, as shown on that certain Record of Survey recorded October 10, 1960, as File No 45991, Douglas County, Nevada, and being a portion of Section 13 and 14, Township 10 North, Range 22 East, M D B &M

Per NRS 111 312, this legal description was previously recorded as Document No 0623231, Book 0904, Page 00496, on September 1, 2004

Subject to Restrictions, Conditions, Covenants, Rights, Rights of Way, and Easements now of record, if any TOGETHER with all and singular the tenements, hereditaments and appurtenances now of record, if any

TN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first above written

Paul T Slowik

## CALIFORNIA ALL 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 }  |  |  |
|--|--|--|
| COUNTY OF SAN DIEGO  |  |  |
| On 3/19/2019 before me,  | TRESA BULANTED Notary Insert Name and Title of the officer   |  |
| Public, personally appeared  | SIOUXK   |  |
|  |  |  |
| 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/they executed the same in his/her/their authorized capacity(jes); 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  | TOTAL OLIDONEO   |  |
| WITNESS my hand and official seal  | TRESA GLIPONEO Commission No 2125309 NOTARY PUBLIC - CALIFORNIA B SAN DIEGO COUNTY Commission Expres August 28, 2019 |  |
| Signature  | FIONAL   |  |
| Though this section is optional, completing this information can deter alteration of the document or fraudulent  |  |  |
| attachment of this form to an unintended document  |  |  |
| Description of Attached Document   |  |  |
| Title or Type of Document  | Document Date  |  |
| Number of Pages Signer(s) Other Than Named Above   |  |  |
| Capacity(ies) Claimed by Signer(s)   |  |  |
| Signers Name   | Signers Name   |  |
| ☐ Corporate Officer — Title(s)   | ☐ Corporate Officer — Title(s)   |  |
| ☐ Partner - ☐ Limited ☐ General  | ☐ Partner - ☐ Limited ☐ General  |  |
| ☐ Individual ☐ Attorney in Fact  | ☐ Individual ☐ Attorney in Fact  |  |
| ☐ Trustee ☐ Guardian or Conservator  | ☐ Trustee ☐ Guardian or Conservator  |  |
| Other  | Other  |  |
| Signer is Representing   | Signer is Representing   |  |
|  |  |  |

| STATE OF NEVADA  |  |
|--|--|
| DECLARATION OF VALUE   |  |
| 1 Assessor Parcel Number(s)                                    |  |
| a) 1022-14-001-029   |  |
| b)   | ( )  |
| c)   | \ \  |
| d)   | \ \  |
|  | \ \  |
| 2 Type of Property   | \ \  |
| · — · · · —  | Fam Res  |
|  |  |
| c) Condo/Twnhse d) 2-4 Ple                                     | TOR RECORDERS OF FROMIS COLO CITE                                    |
| e) Apt Bldg f) Comm'   | /Ind'l   BOOK PAGE DATE OF RECORDING   DISTIG                        |
| g) Agricultural h) Mobile                                      | Home NOTES Alexander Stud  |
| ı) Other   | Hores Tremated Dung Se   |
| i) Li Other  |  |
| o m + 1 T/ 1 /O 1 - D CD                                       | \$ 40,000 00   |
| 3 Total Value/Sales Price of Property                          |  |
| Deed in Lieu of Foreclosure Only (value of                     | property) (  |
| Transfer Tax Value   |  |
| Real Property Transfer Tax Due                                 |  |
| 4 105 4 2 61-22-1  |  |
| 4 <u>If Exemption Claimed</u> a Transfer Tax Exemption per NRS | 275 000 Section #7   |
| a Transfer Tax Exemption per NRS                               | ransfer to Trust without consideration                               |
| b Explain Reason for Exemption 1                               | district to frust without desirate testion                           |
|  |  |
| 5 Partial Interest Percentage being trans                      | ferred %   |
| 5 Partial Interest Percentage being trans                      | 70 letted  |
|  | 1 1 C NDC 275 000 13/DC  |
| The undersigned declares and acknowledge                       | s, under penalty of perjury, pursuant to NRS 375 060 and NRS         |
| 375 110, that the information provided is co                   | orrect 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 clain                   | ned exemption, or other determination of additional tax due, may     |
| result in a penalty of 10% of the tax due plu                  | is interest at 1% per month  |
|  | ns 4 s 116 11441 4 3   |
| Pursuant to NRS 375.030, the Buyer and Seller's                | nall be jointly and severally liable for any additional amount owed. |
|  | Canacity Grantor   |
| Signature Full   | Capacity Graffion  |
|  | 0  |
| Signature  | Capacity   |
| SELLER (GRANTOR) INFORMATION                                   | DN BUYER (GRANTEE) INFORMATION                                       |
| (REQUIRED)   | (REQUIRED)   |
| (REQUIRED)   | (REQUIRED)   |
| Print Name Paul T Slowik                                       | Print Name Paul T Slowik, Trustee                                    |
|  | Address 4454 San Joaquin St  |
| Address 4454 San Joaquin St<br>City Oceanside                  | City Oceanside   |
|  | State CA Zip 92057   |
| State CA Zip 92057   | State OA Zip 92001   |
| COMPANY/PERSON REQUESTING RECOI                                | DING   |
| (required if not the seller or buyer)                          | <u>witto</u>   |
|  | Escrow #   |
| Print Name   | Listiow π  |
| Address  | State Zıp  |
| City (AS A PUBLIC RECORD TH                                    | IS FORM MAY BE RECORDED/MICROFILMED)                                 |
| (VO V LODPIC VECOVD IU   | GIORNIANI DE RECORDEDIMICIOI IEMED)                                  |