

Prepared By

Name: **BOSTON NATIONAL TITLE AGENCY**
Address: **400 ROUSER RD BLDG 2 STE 602**
CORAOPOLIS
State: **PA** Zip Code: **15108**

**After Recording Return To AND
MAIL TAX STATEMENT**

Name: **WILLIAM KIRCShNER**
Address: **251 TERRACE VIEW DR**
STATELINE
State: **NV** Zip Code: **89449**

TAX ID: 1318-23-611-018

Space Above This Line for Recorder's Use

NEVADA GENERAL WARRANTY DEED

STATE OF NEVADA
DOUGLAS COUNTY

KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of ZERO DOLLARS (\$ 0.00) in hand paid to William Kircshner, a single man, residing at 251 Terrace View Dr, County of Douglas, City of Stateline, State of Nevada (hereinafter known as the "Grantor(s)") hereby conveys and warrants the title against all persons whomsoever to **William A. Kirschner Successor Trustee of The William A. Kirschner and Barbara D. Kirchner Revocable Living Trust, UTD December 24, 1986**, residing at 251 Terrace View Dr, County of Douglas, City of Stateline, State of Nevada (hereinafter known as the "Grantee(s)") all the rights, title, interest, and claim in or to the following *described real estate (*and in Exhibit A if attached), situated in DOUGLAS County, Nevada to-wit:

LOT 7, BLOCK C, AS SHOWN ON THE MAP OF FOOTHILLS ESTATES
SUBDIVISION FILED IN THE OFFICE OF THE COUNTY RECORDER OF
DOUGLAS COUNTY, STATE OF NEVADA ON NOVEMBER 13, 1962
DOCUMENT NO. 21266

TOGETHER WITH all the rights, members and appurtenances to the Real Estate in anywise appertaining or belonging thereto.



TO HAVE AND TO HOLD, the tract or parcel of land above described together with all and singular the rights, privileges, tenements, appurtenances, and improvements unto the said Grantees, their heirs and assigns forever.

And said Grantors, for said Grantors, their heirs, successors, executors and administrators, covenants with Grantees, and with their heirs and assigns, that Grantors are lawfully seized in fee simple of the said Real Estate; that said Real Estate is free and clear from all Liens and Encumbrances, except as hereinabove set forth, and except for taxes due for the current and subsequent years, and except for any Restrictions pertaining to the Real Estate of record in the Probate Office of said County; and that Grantors will, and their heirs, executors and administrators shall, warrant and defend the same to said Grantees, and their heirs and assigns, forever against the lawful claims of all persons.

IN WITNESS WHEREOF, Grantor has executed and delivered this General Warranty Deed under seal as of the day and year first above written.

<u>William Kirschner</u> William Kirschner	_____	Grantor's Signature
<u>WILLIAM KIRSCHNER</u> Grantor's Name	_____	Grantor's Name
<u>P.O. 3596</u> Address	_____	Address
<u>STATELINE, NV 89449</u> City, State & Zip	_____	City, State & Zip

STATE OF NEVADA)
COUNTY OF _____)

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that _____ whose names are signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they, executed the same voluntarily on the day the same bears date.

Given under my hand this _____ day of _____ See Arnold
Apr 25 2019

Notary Public

My Commission Expires: _____



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 SAN MATEO)

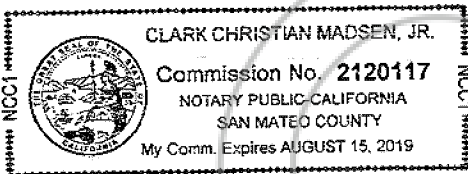
On APRIL 25 2019 before me, _____ Clark Christian Madsen, Jr., Notary Public
Date Here Insert Name and Title of the Officer

personally appeared WILLIAM KRASCHNER
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(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.
Signature _____
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: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- 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. Assessors Parcel Number(s)
 a) 1318-23-611-018
 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: _____	
NOTES: <u>SG - Trust OK</u>	

3. Total Value/Sales Price of Property: \$ 0.00
 Deed in Lieu of Foreclosure Only (value of property) (_____
 Transfer Tax Value: \$ 0.00
 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: _____
TRANSFER WITHOUT CONSIDERATION TO OR FROM A TRUST

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 Aaron Avery Capacity AGENT
 Signature Aaron Avery Capacity AGENT

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

Print Name: WILLIAM KIRSCHNER
 Address: 251 TERRACE VIEW DR
 City: STATELINE
 State: NV Zip: 89449

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

Print Name: WILLIAM A KIRSCHNER & BARBARA D KIRCHNER
 Address: 251 TERRACE VIEW DR
 City: STATELINE
 State: NV Zip: 89449

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: BOSTO NATIONAL TITLE AGENCY LLC Escrow # _____
 Address: 400 ROUSER RD BLDG 2 STE 602
 City: CORAOPOLIS State: PA Zip: 15108

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