

APN: 1220-12-310-029

WHEN RECORDED MAIL TO:

Jennifer Yturbide Law PC
Jennifer A. Yturbide, Esq.
1701 County Rd., Suite M
Minden, NV 89423



KAREN ELLISON, RECORDER

E07

MAIL TAX NOTICES TO:

Michael Lenzi and Patricia Lenzi
P O Box 594
Gardnerville, NV 89410

Quitclaim Deed

PATRICIA R. LENZI and MICHAEL R. LENZI , husband and wife, as joint tenants, do hereby QUITCLAIM to, PATRICIA R. LENZI and MICHAEL R. LENZI Trustees of The LENZI REVOCABLE TRUST dated July 19, 2019, and any amendments thereto, whose address is P O Box 594, Garderville, Nevada, all right, title and interest in and to that certain real property located in Douglas County Nevada, more particularly described as follows:

LOT 20, AS SHOWN ON THE MAP OF PINENUT SUBDIVISION UNIT NO. 1, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON JUNE 11, 1963, IN BOOK 1 OF MAPS AS DOCUMENT NO. 22783.

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

Pursuant to NRS 239B.030(4), I affirm that this instrument does not contain the social security number of any person.

Pursuant NRS 111.312, this legal description was previously recorded as Document No. 751307 on September 25, 2009, in Book No. 909, at Page No. 5628.

DATED this 19th day of July, 2019.

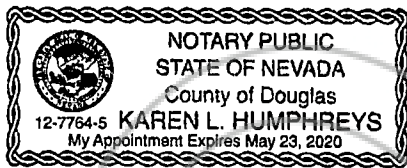
MICHAEL R. LENZI

PATRICIA R. LENZI

STATE OF NEVADA)
)ss.
COUNTY OF DOUGLAS)

On this 19th day of July, 2019 before me, a Notary Public in and for said County and State, personally appeared MICHAEL R. LENZI and PATRICIA R. LENZI, who 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 capacities, and that by their signatures on the instrument, the persons, or entities upon behalf of which the persons acted, executed the instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.



Karen L. Humphreys

Notary Public

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1220-12-310-029
 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: <u>7/22/19</u>	
NOTES: <u>Verified Trust ARB</u>	

3. Total Value/Sales Price of Property: \$ \$0.00
 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 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 [Signature] Capacity Individual

Signature [Signature] Capacity Trustee

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: MICHAEL R. LENZI
 Address: P O BOX 594
 City: GARDNERVILLE
 State: NV Zip: 89410

Print Name: MICHAEL R. LENZI, TRUSTEE
 Address: P O BOX 594
 City: GARDNERVILLE
 State: NV Zip: 89410

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: Jennifer Yturbide, Esq. Escrow # _____

Address: 1701 County Road, Suite M

City: Minden State: NV Zip: 89423

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