

APN# 1318-10-312-029

Recording Requested by/Mail to:

Name: CRAIG L. SCHANK
Address: 650 Indian Lakes Rd.
City/State/Zip: Fallon, NV 89406



KAREN ELLISON, RECORDER E07

Mail Tax Statements to:

Name: Craig L. Schenk
Address: 650 Indian Lakes Rd
City/State/Zip: Fallon, NV 89406

Quit Claim Deed

Title of Document (required)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording
DOES contain personal information as required by law: (check applicable)

- Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)
- Judgment – NRS 17.150(4)
- Military Discharge – NRS 419.020(2)

Signature

Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

APN: 1318-10-312-029

Grantor: Craig L. Schank and Debra L. Schank, trustees of the Craig L. and Debra L. Schank Family Trust, dated 22 October, 1997, of 650 Indian Lakes Rd., Fallon, Nevada 89406.

Grantee: Maddie Asset Management, LLC, of 650 Indian Lakes Rd., Fallon, Nevada 89406, in its capacity as Trustee, and not personally, of the 720 Land Trust.

Mail To: Maddie Asset Management, LLC, 650 Indian Lakes Rd., Fallon, Nevada 89406.

QUITCLAIM DEED

Craig L. Schank and Debra L. Schank, trustees of the Craig L. and Debra L. Schank Family Trust, Grantors, of Fallon, State of Nevada 89406, in its capacity as Trustee, and not personally, of the 720 Land Trust, Grantee, for good and valuable consideration all of Grantors' right, title and interest in and to the following described tract of land in County of Douglas, State of Nevada.

Lot 47, as shown of the AMENDED PLAT OF ZEPHYR KNOLLS UNIT NO. 2, filed in the Office of the County Recorder of Douglas County, State of Nevada on July 5, 1957, as Document No. 12415.

Witness the hand of said grantor, this 24th day of July, 2019.

Signed in the presence of:

The Craig L. and Debra L. Schank Family Trust

By:

Craig L. Schank
Craig L. Schank, Trustee

Debra L. Schank
Debra L. Schank, Trustee

State of: Nevada)

County of: Churchill)

On the 24th day of July, 2019, personally appeared before me

Craig L. Schank, and Debra L. Schank, the signers of the within instrument, who duly acknowledged to me that he/she/they executed the same.

Taylor Espinosa
Notary Public

7-1-2023
My commission expires:

SEAL:

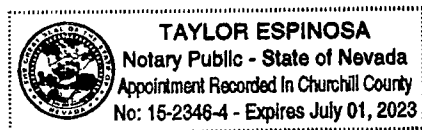
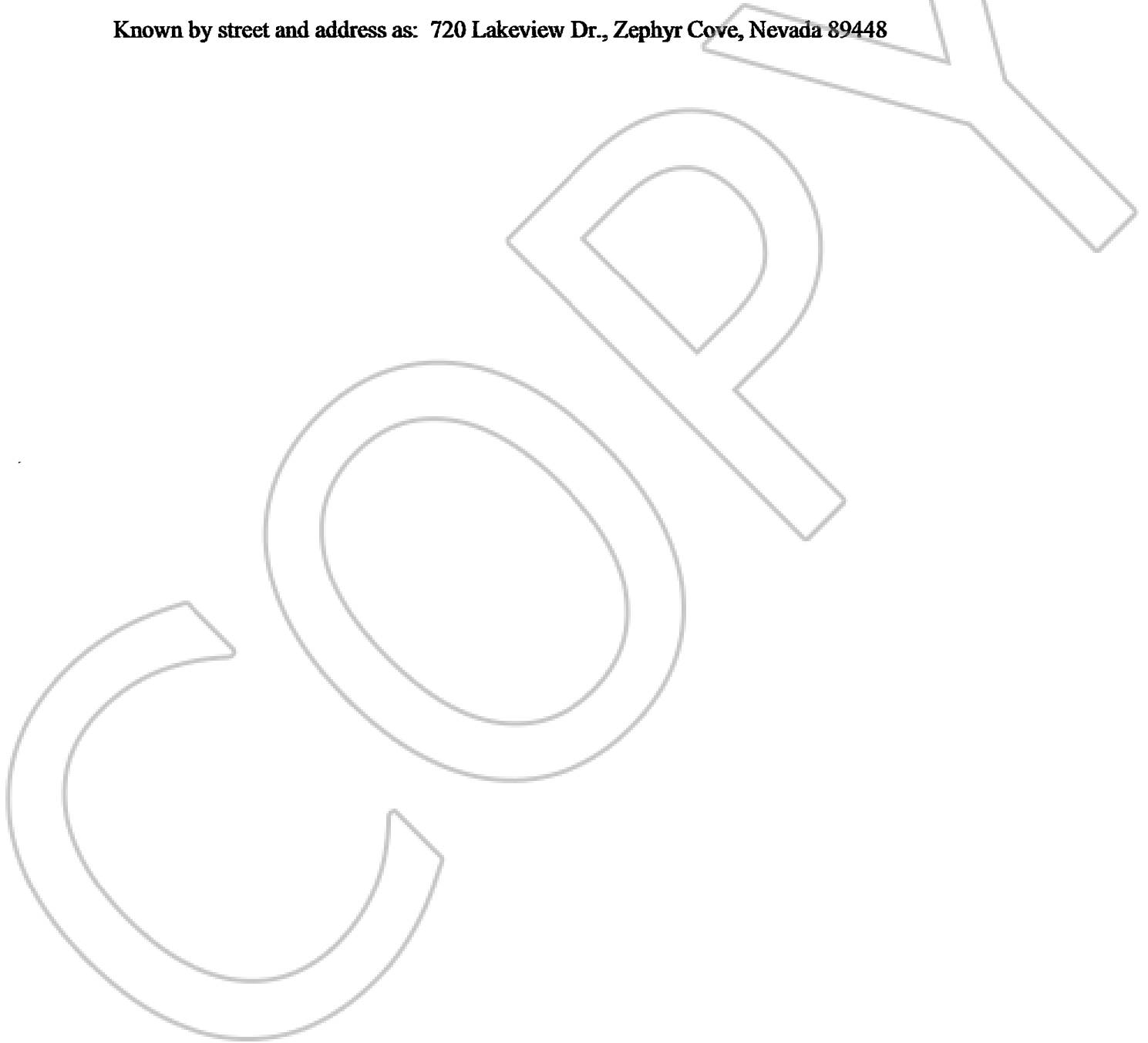


EXHIBIT "A"
TRUST PROPERTY

Lot 47, as shown on the AMENDED PLAT OF ZEPHYR KNOLLS UNIT NO. 2, filed in the Office of the County Recorder of Douglas County, State of Nevada on July 5, 1957, as Document No. 12415

Known by street and address as: 720 Lakeview Dr., Zephyr Cove, Nevada 89448



APN: 1318-10-312-029

STATE OF NEVADA
DECLARATION OF VALUE

- 1. Assessor Parcel Number(s)
 - a) 1318-10-312-029
 - b) _____
 - c) _____
 - d) _____

- 2. Type of Property:

<ul style="list-style-type: none"> a) <input type="checkbox"/> Vacant Land c) <input type="checkbox"/> Condo/Twnhse e) <input type="checkbox"/> Apt. Bldg g) <input type="checkbox"/> Agricultural <input type="checkbox"/> Other 	<ul style="list-style-type: none"> b) <input checked="" type="checkbox"/> Single Fam. Res. d) <input type="checkbox"/> 2-4 Plex f) <input type="checkbox"/> Comm'l/Ind'l h) <input type="checkbox"/> Mobile Home
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FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument #:	
Book _____ Page:	
Date of Recording: <u>7/25/19</u>	
Notes: <u>Verified Trust 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 \$ _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section #7
- b. Explain Reason for Exemption: TRANSFER from Trust without Consideration

- 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 Craig L. Schuch
 Signature _____ Capacity Grantor

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Name: Craig L. & Debra L. Schuch Trust
 Address: 650 Indian Lakes Rd
 City: Fallon
 State: NV Zip 89406

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Name: Maddie Asset Management
 Address: 650 Indian Lakes Rd.
 City: Fallon, NV
 Zip: 89406

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

Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____