BARBARA SHIELDS APN# A portion of: 1319-22-000-003 Recording Requested by/Mail to: Name: Barbara Shields KAREN ELLISON RECORDER Address: 4249 Spaulding St. City/State/Zip: Antioch, CA 94531 Mail Tax Statements to: Capital Management Maintenance Address: P.O.Box 864964 City/State/Zip: Orlando, FL 32886-4964 QuitClaim 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 Barbara D Shields **Printed Name** This document is being (re-)recorded to correct document # , and is correcting

DOUGLAS COUNTY, NV

Rec:\$35.00

Total:\$35.00

2019-933708

Pas=6

08/15/2019 01:51 PM

QOTTCLATIVI DEED	als.
This Quitclaim Deed is made on July 27, 2019,	/\
between Michael D. Shields	()
and Barbara D. Shields GRANTORS,	\ \
address: 4249 Spaulding St, Antioch, CA 94531.	\ \
address. 12 14 Space Mary Space 1, 74111 Design 1, 1931	\ \
and Grant S. Shields GRANTEE,	\ \
and CHARTES, GRANTEE,	\\\
2002 5 6 411 01 1 0 4 051 16	
address: 3003 E. Covell Blvd, Davis, CA 95618.	
For valuable consideration, the GRANTORS hereby quitclaims and tra	76. 76. 76.
real estate to the grantee to have and hold forever, located at 200	of Foothill Rd.
City of <u>Genoa</u> , State of <u>NV 89411</u> See exibit "A" attached hereto	் and described as follows:
See exibit "A" attached hereto.	+ incorporated
Description of property herein by this reference.)
	/ /
Dated: July 27 0,2019	
Mich Mich	el D. Shield
Signature of GRANTOR Printed Nam	e of GRANTOR
Barbara D Shields Barba	Shalala
	ua D. Shields
Signature of GRANTOR Printed Nam	e of GRANTOR Grant S. Shield
Signature of GRANTEE Trans	Printed Name of GRANTEE
State of <u>California</u>	
County of Cantra Cuita	
on July 27, 2019, Michael D and Barba	100 D., and
	and, being duly sworn, did state
that he and she are the persons described in the above document an	= '
above document in my presence.	5
-\. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Signature of Notaly Public	
Signature of Notaly Public	
and the second s	
Notary Public, in and for the County of <u>Lavitra</u> Costa	_
State of <u>California</u>	
August North Control	
My commission expires: <u>flygust 12</u> , ww	
Notary Seal See attached jurats	
DEC OLLINOA FOL DOANIS	

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

See Attached Document (Notary to cross out lines 1–6 below) ☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary) ignature of Document Signer No. Signature of Document Signer No. 2 (if any) 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 Subscribed and sworn to (or affirmed) before me Cartra Carta **JANICE ALTEMUS** (and (2) Notary Public - California Name(s) of Signer(s) Contra Costa County Commission # 2162447 proved to me on the basis of satisfactory evidence to My Comm. Expires Aug 12, 2020 be the person(s) who appeared before me. Signature Place Notary Seal and/or Stamp Above of Notary Public **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: North Deed Number of Pages: Signer(s) Other Than Named Above: CMINT

©2017 National Notary Association

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

See Attached Document (Notary to cross out lines 1–6 below) ☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary) Signature of Document Signer No. 2 (if any) 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 Subscribed and sworn to (or affirmed) before me custa WHYR! County of _ on this Date by Shields Grant (1) JANICE ALTEMUS Notary Public - California (and (2) Contra Costa County Name(s) of Signer(s) Commission # 2162447 My Comm. Expires Aug 12, 2020 proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me. Signature Place Notary Seal and/or Stamp Above of Notary Public 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: <u>Dvrtclaim</u> Number of Pages: Signer(s) Other Than Named Above: ρ

©2017 National Notary Association

Inventory No.: 17-019-08-81

EXHIBIT "A" (Walley's)

A timeshare estate comprised of an undivided interest as tenants in common in and to that certain real property and improvements as follows:

An undivided 1/2142nd interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

ADJUSTED PARCEL F: A parcel of land located within a portion of the West one-half of the Northeast one-quarter (W1/2 NE1/4) of Section 22, Township 13 North, Range 19 East, Mount Diablo Meridian, more particularly described as follows:

Commencing at the one-quarter corner common to Sections 15 and 22, T13N, R19E, M.D.M., a found 1985 BLM brass cap as shown on the Record of Survey prepared by David D. Winchell and recorded September 28, 1989 in the office of the Recorder, Douglas County, Nevada as Document No. 211937; thence South 57°32'32" East, 640.57 feet to the POINT OF BEGINNING; thence North 80°00'00" East, 93.93 feet; thence North 35°00'00" East, 22.55 feet; thence North 10°00'00" West, 92.59 feet; thence North 80°00'00" East, 72.46 feet; thence South 10°00'00" East, 181.00 feet; thence South 80°00'00" West, 182.33 feet; thence North 10°00'00" West, 72.46 feet to the POINT OF BEGINNING.

(Reference is made to Record of Survey for Walley's Partners Ltd. Partnership, in the office of the County Recorder of Douglas County, Nevada, recorded September 17, 1998 in Book 998, at Page 3261, as Document No. 449576.)

Together with a perpetual non-exclusive easement of use and enjoyment in, to and throughout the Common Area and a perpetual non-exclusive easement for parking and pedestrian and vehicular access, ingress and egress as set forth in Access Easement and Abandonment Deed recorded September 20, 2002 in Book 0902, at Page 06242, as Document No. 0552534, Official Records, Douglas County, Nevada.

A Portion of APN: 1319-22-000-003

STATE OF NEVADA	
DECLARATION OF VALUE	
1. Assessor Parcel Number(s) A Portion of:	
a) 1319-22-000-003	\wedge
b)	
c)	\ \
d)	\ \
2 Towns of December.	\ \
2. Type of Property:	\ \
a) Vacant Land b) Single Fam. Res.	
c) Condo/Twnhse d) 2-4 Plex	FOR RECORDERS OPTIONAL USE ONLY
e) Apt. Bldg f) Comm'l/Ind'l	BOOKPAGE DATE OF RECORDING:
g) Agricultural h) Mobile Home	NOTES:
i) U Other	
3. (Total Value Sales Price of Property:	\$
Deed in Lieu of Foreclosure Only (value of property)	
Transfer Tax Value:	s exempt
Real Property Transfer Tax Due:	\$
4 405	
4. If Exemption Claimed:	
a. Transfer Tax Exemption per NRS 375.090, Sec b. Explain Reason for Exemption: Transfer	from parents to son.
b. Explain Reason for Exemption: Transfer	from parents 10 3011.
5. Partial Interest: Percentage being transferred: 10	O %
The state of the s	<u>~</u>
The undersigned declares and acknowledges, under per	palty of periury pursuant to NRS 375 060 and NRS
375.110, that the information provided is correct to the	
supported by documentation if called upon to substanti	
parties agree that disallowance of any claimed exempti	
result in a penalty of 10% of the tax due plus interest at	1% per month.
~ \ \	
Pursuant to NRS 375.030, the Bayer and Seller shall be jointly	y and severally liable for any additional amount owed.
	COAUTOO
Signature	Capacity <u>GRANTOR</u>
Signature Sugar	Capacity GRANTEE
Signature Traval	Capacity OKAN I EE
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
	(,
Print Name: Michael D. Shields Pr	int Name: Grant S. Shields
Address: 4249 Spaulding St. A	ddress: 3003 E. Covell Blud
City: Antioch C	ity: Davis
State: <u>CA</u> Zip: <u>94531</u> St	ate: <u>CA</u> Zip: 95618
COMPANIA/DED COM DEOLIECTING DECORDING	
COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer)	
	Escrow #
Address:	LISOTOW IT
City: State:	Zip:
(AS A PUBLIC RECORD THIS FORM MA	AY BE RECORDED/MICROFILMED)