

APN # 1320-29-117-030
RECORDING REQUESTED
AND RETURN TO:
DON E. WILSON & PHYLLIS A. WILSON, Trustees
1779 LINDEN CT.
MINDEN, NV 89423



KAREN ELLISON, RECORDER E07

MAILTAX STATEMENTS TO:
DON E. WILSON & PHYLLIS A. WILSON, Trustees
1779 LINDEN CT.
MINDEN, NV 89423

QUITCLAIM DEED

DON E. WILSON and PHYLLIS A. WILSON, husband and wife, as joint tenants, hereby quitclaims to DON E. WILSON and PHYLLIS A. WILSON, trustee(s) or successor trustee(s) of the WILSON FAMILY TRUST DATED OCTOBER 1, 2019, the following described real estate in Douglas County, State of Nevada:

Unit 183, as shown on the Official Plat of WINHAVEN, UNIT NO. 5, filed for record in the Office of the County Recorder of Douglas County, Nevada on February 10, 1994 in Book 294 at Page 1845 as Document No. 329790, Official Records.

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

This deed was prepared without the benefit of a title search and the description of the property was furnished by the parties or by said County Assessor in which the property resides. The preparer of this deed assumes no liability whatsoever either for the accuracy of the legal description or the status of the title to the property.

Dated: OCTOBER 1st, 2019

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

DON E. WILSON

PHYLLIS A. WILSON

STATE OF NEVADA

COUNTY OF WASHOE

)
) SS:
)

ACKNOWLEDGEMENT

Personally came before me this OCTOBER 1st, 2019, the above named DON E. WILSON and PHYLLIS A. WILSON, to me known to be the persons who executed the foregoing instrument and acknowledge the same.

SUSAN C. RHOADS
Notary Public
State of Nevada
Appt. No. 96-3392-2
My Appt. Expires April 1, 2021

Susan C. Rhoads, Notary Public
Washoe County, Nevada
My Commission Expires 04/01/2021

**STATE OF NEVADA
DECLARATION OF VALUE**

1. **Assessor Parcel Number(s)**
a) 1320-29-117-030

2. **Type of Property:**

- a) Vacant Land b)
 c) Condo/Twnhse d)
 e) Apt. Bldg. f)
 g) Agricultural h)
 j) other

Single Fam.
Res.
2-4 Plex
Comm'l/Ind'l
Mobile Home

FOR RECORDERS OPTIONAL USE ONLY	
DOCUMENT/INSTRUMENT #:	_____
BOOK _____	PAGE _____
DATE OF RECORDING:	_____
NOTES:	<i>Verified Trust - J</i>

3. **Total Value/Sales Price of Property:**

Deed in Lieu of foreclosure Only (value of property)	\$0
Transfer Tax Value:	\$0
Real Property Transfer Tax Due:	\$0

4. **If Exemption Claimed:**

- a. Transfer Tax Exemption, per NRS 375.090, Section: 7
 b. Explain Reason for Exemption: Transfer to a revocable living trust without consideration. Don E. & Phyllis A. Wilson are the creators and trustors of the Wilson Family Trust Dated 10/1/19.

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 disallowance of any claimed exemption, or other determination of additional taxes 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: Trustee

Signature: *Phyllis A. Wilson*

Capacity: Trustee

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Don E. & Phyllis A. Wilson
 Address: 1779 Linden Ct.
 City: Minden
 State: NV Zip: 89423

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Don E. & Phyllis A. Wilson
 Address: 1779 Linden Ct.
 City: Minden
 State: NV Zip: 89423

**tees of the Wilson
Family Trust
DTD 10/1/19**

COMPANY /PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

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

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)