

DOUGLAS COUNTY, NV **2019-936654**
RPTT:\$5557.50 Rec:\$35.00
\$5,592.50 Pgs=4 10/15/2019 01:28 PM
SIGNATURE TITLE - ZEPHYR COVE
KAREN ELLISON, RECORDER

APN: 1318-16-810-035

**RECORDING REQUESTED BY:
SIGNATURE TITLE COMPANY, LLC
212 ELKS POINT RD, STE 445
P.O. BOX 10297
ZEPHYR COVE, NV 89448**

**MAIL RECORDABLE DOCS AND
TAX STATEMENTS TO:
LINDA TERRIS
PO BOX 11181
ZEPHYR COVE, NV 89448**

ESCROW NO: 11000777-JML

RPTT \$

GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That Sandy D. Morford and Kelly S. Morford Trustees of the Sandy and Kelly Morford 2014 Trust

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, do/does hereby Grant, Bargain, Sell, and Convey to:

Linda Terris, an single woman

all that real property situated in the City of Zephyr Cove, County of Douglas, State of Nevada, described as follows:

See Exhibit A attached hereto and made a part hereof.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

The Sandy and Kelly Morford 2014 Trust

Sandy D. Morford
Sandy D Morford, Trustee

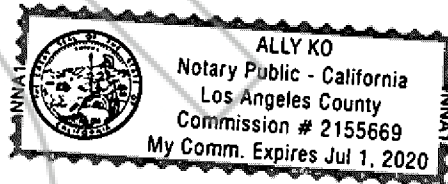
Kelly S. Morford
Kelly S. Morford, Trustee

California
STATE OF ~~NEVADA~~ } ss:
COUNTY OF *Los Angeles*

This instrument was acknowledged before me on Oct. 12. 2019.

by Sandy D. Morford, Kelly S. Morford.

[Signature] (seal)
Notary Public



CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 Los Angeles }

On Oct. 12, 2019 before me, Ally Ko, Notary Public,
(Here insert name and title of the officer)

personally appeared Sandy D Morford, Kelly S Morford,
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.

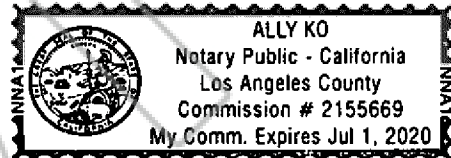
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Notary Public Signature

(Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Grant, Bargain, Sale Deed
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
 Corporate Officer

(Title)

- Partner(s)
 Attorney-in-Fact
 Trustee(s)
 Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

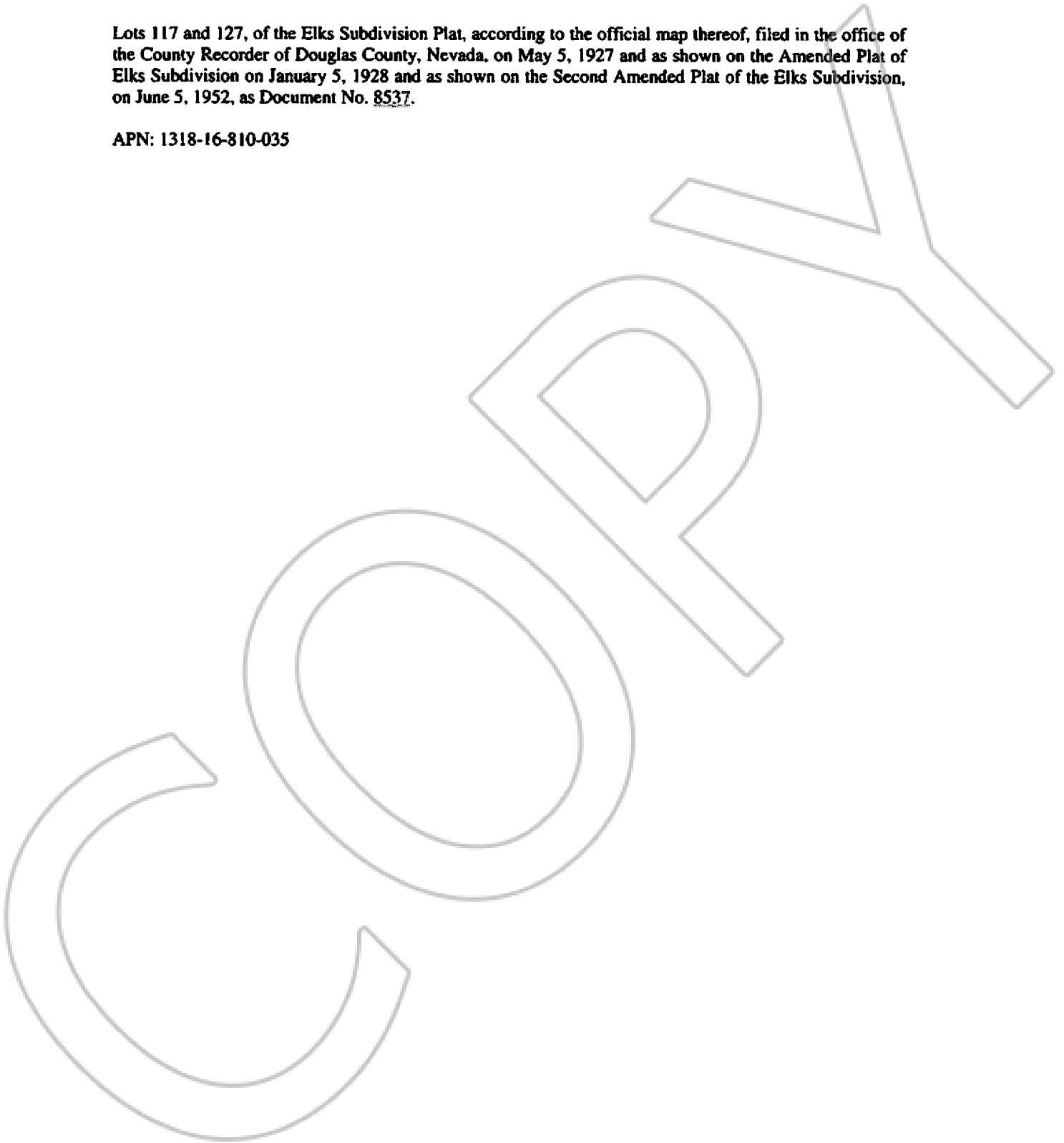
This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they- is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.

Exhibit A

Lots 117 and 127, of the Elks Subdivision Plat, according to the official map thereof, filed in the office of the County Recorder of Douglas County, Nevada, on May 5, 1927 and as shown on the Amended Plat of Elks Subdivision on January 5, 1928 and as shown on the Second Amended Plat of the Elks Subdivision, on June 5, 1952, as Document No. 8537.

APN: 1318-16-810-035



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

- a) 1318-16-810-035
- 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
- Other

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

3. Total Value/Sales Price of Property:

\$1,425,000.00

Deed in Lieu of Foreclosure Only (value of property) (_____)

Transfer Tax Value \$1,425,000.00

Real Property Transfer Tax Due: \$5,557.50

4. If Exemption Claimed

a. Transfer Tax Exemption, per NRS 375.090, Section _____

b. Explain Reason for Exemption: _____

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: _____ Capacity: Grantor Agent

Signature: Linda Terris Capacity: Grantee

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(Required)

(Required)

Print Name: Sandy D. Morford and Kelly S. Morford Trustees of the Sandy and Kelly Morford 2014 Trust

Print Name: Linda Terris

Address: 30308 Mallcorca Place
Castaic, CA 91384

Address: PO Box 11181
Zephyr Cove, NV 89448

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

Print Name: Signature Title Company LLC Escrow #: 11000777-JML

Address: 212 Elks Point Road, Suite 445, PO Box 10297
Zephyr Cove, NV 89448

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED