

APN:  
Return document to:

Mrs. Connie Kahn  
PO Box 4056  
Stateline, NV 89449



KAREN ELLISON, RECORDER E10

Mail tax statements to:

Mrs. Connie Kahn  
PO Box 4056  
Stateline, NV 89449

**DEED UPON DEATH**  
Under NRS 111.695

I, ("Owner")

Connie Terry Kahn

hereby convey to ("Beneficiary")

Richard Earl Kahn

effective on my death, all right, title and interest in the real property commonly known as 184 Cottonwood Dr, City of Stateline, County of Douglas, State of Nevada, and more particularly described as:

**Legal Description**

LOT 15, BLOCK A, AS SHOWN ON THE OFFICIAL MAP OF KINGSBURY MEADOWS SUBDIVISION, RECORDED IN THE OFFICE OF THE COUNTY RECORDER ON JULY 5, 1955, IN BOOK 1 OF MAPS AS DOCUMENT NO. 10542. COUNTY OF DOUGLAS, STATE OF NEVADA

Parcel ID # 1318-23-810-013

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

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR(S). THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR(S) WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTOR(S) IN THE SAME REAL PROPERTY.

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

IN WITNESS WHEREOF, the said parties have signed and sealed these presents this 12 day of Feb, 2020

Connie Terry Kahn

Signature

Connie Terry Kahn

Print name

Capacity

Signature

Print name

Capacity

*Construe all terms with the appropriate gender and quantity required by the sense of this deed.*

STATE OF NEVADA )  
COUNTY OF Douglas )

On this 12<sup>th</sup> day of February in the year 2020 before me,  
Julia Blair, personally appeared Connie Terry Kahn

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument, and acknowledged that he or she executed it.

Julia Blair

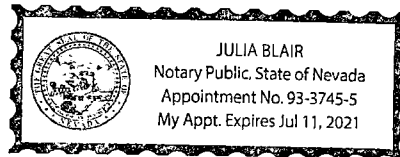
Notary Public

Julia Blair

Print name

My commission expires:

July 11, 2021



# State of Nevada Declaration of Value

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument #	_____
Book: _____	Page: _____
Date of Recording: _____	
Notes: _____	

1. Assessor Parcel Number(s)  
a) 1318-23-810-013  
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 \_\_\_\_\_

3. Total Value/Sales Price of Property: \$ \_\_\_\_\_  
Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
Transfer Tax Value per NRS 375.010, Section 2: \$ \_\_\_\_\_  
Real Property Transfer Tax Due: \$ \_\_\_\_\_

4. **If Exemption Claimed:**  
a. Transfer Tax Exemption, per NRS 375.090, Section: 10  
b. Explain Reason for Exemption: transfer upon death to Richard Kahn

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 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 Connie T. Kahn Capacity GRANTOR  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

### **SELLER (GRANTOR) INFORMATION**

(REQUIRED)  
Print Name: Connie T. Kahn  
Address: P.O. Box 4056  
City: Stateline  
State: NV Zip: 89449

### **BUYER (GRANTEE) INFORMATION**

(REQUIRED)  
Print Name: Richard E. Kahn  
Address: P.O. Box 5454  
City: Stateline,  
State: NV Zip: 89449

### **COMPANY REQUESTING RECORDING**

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_