

RECORDING REQUESTED BY:

JOHN CHRISTIAN HYDE

WHEN RECORDED MAIL TO:

JOHN CHRISTIAN HYDE
C/O LAW OFFICES OF ERIC G. DZUBUR
21550 FOOTHILL BLVD., #3
HAYWARD, CA 94541

MAIL TAX STATEMENTS TO:

JOHN CHRISTIAN HYDE
1118 DUTTON AVENUE
SAN LEANDRO, CA 94577



KAREN ELLISON, RECORDER

E07

TRUST TRANSFER DEED

Not pursuant to sale, the undersigned, JOHN HYDE, does hereby grant and transfer to JOHN CHRISTIAN HYDE, Trustee of THE 2020 HYDE REVOCABLE LIVING TRUST all that certain real property situated in the County of Douglas, State of Nevada, described as follows:

See Exhibit "A"

APN: 122-16-210-091

More Commonly Known as: 1289 Manhattan Way, Gardnerville, NV.

Transfer made without consideration.

- (X) Documentary transfer tax is \$0.00. Transfer not pursuant to sale. Conveyance into a Revocable Living Trust. NRS 375.090; Section #7.
- () Computed on full value of property conveyed, or
- () Computed on full value less value or liens and encumbrances remaining at time of sale.

DATED: 2/10/20

John Hyde
JOHN HYDE

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 ALAMEDA)

On February 10, 2020, before me, Lucia Gomez, Notary Public, personally appeared JOHN HYDE, 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 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.
Lucia Gomez

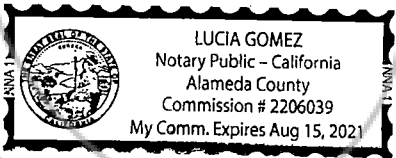
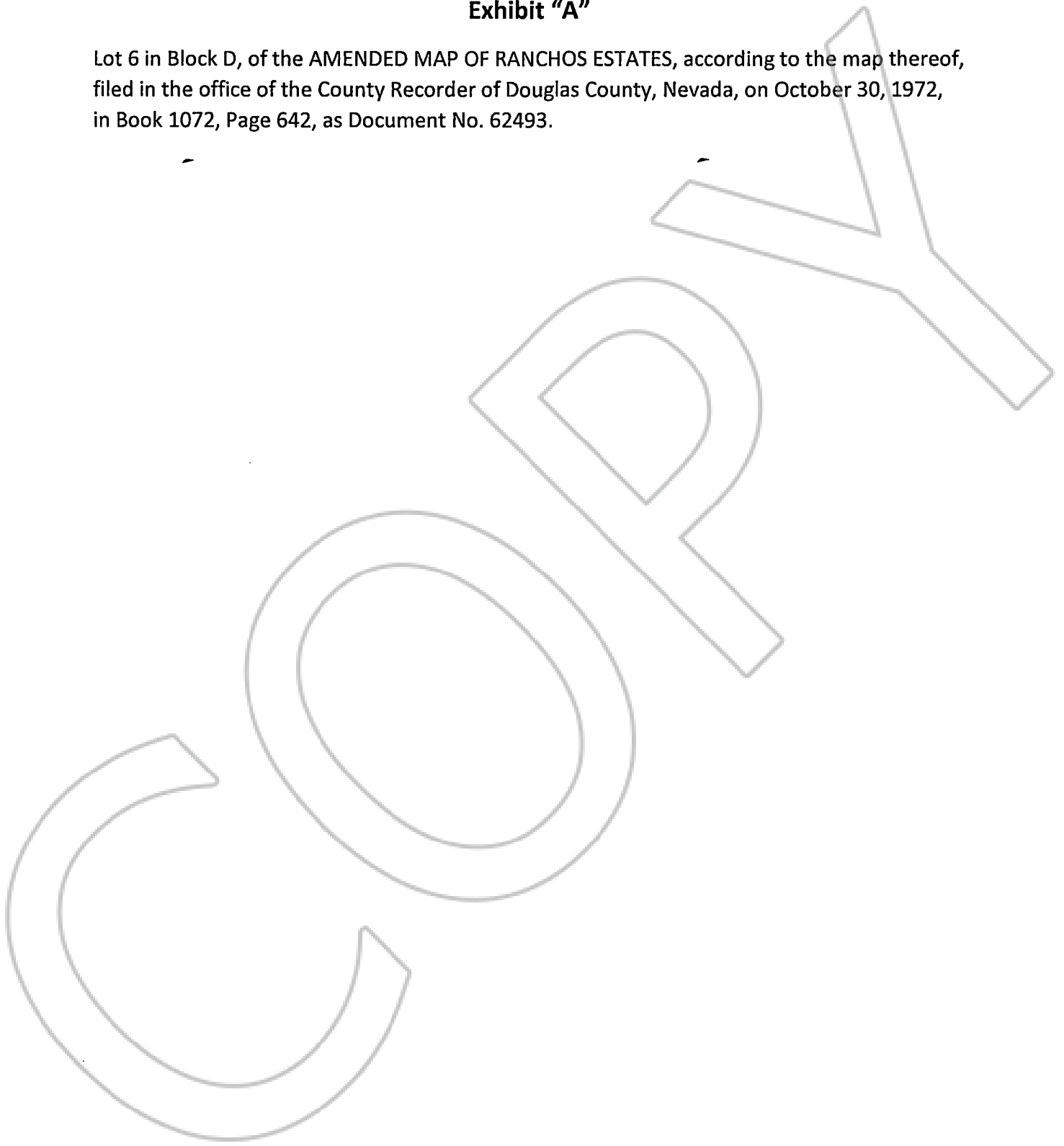


Exhibit "A"

Lot 6 in Block D, of the AMENDED MAP OF RANCHOS ESTATES, according to the map thereof, filed in the office of the County Recorder of Douglas County, Nevada, on October 30, 1972, in Book 1072, Page 642, as Document No. 62493.



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 122-16-210-091
 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 _____

FOR RECORDERS OPTIONAL USE ONLY	
BOOK _____	PAGE _____
DATE OF RECORDING: _____	
NOTES: <u>Verified Trust - JH</u>	

3. Total Value/Sales Price of Property: \$ 0
 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 Transferor's Revocable Living Trust without consideration

5. Partial Interest: Percentage being transferred: 100 %

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 John Hyde Capacity Trustor
 Signature John Hyde Capacity Trustee

SELLER (GRANTOR) INFORMATION
(REQUIRED)
 Print Name: JOHN HYDE
 Address: 1118 Dutton Ave
 City: San Leandro
 State: CA Zip: 94577

BUYER (GRANTEE) INFORMATION
(REQUIRED)
 Print Name: John Christian Hyde Trustor
 Address: 1118 Dutton Ave
 City: San Leandro
 State: CA Zip: 94577

COMPANY/PERSON REQUESTING RECORDING
 (required if not the seller or buyer)
 Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____