

APN# 1022-10-001-011



Recording Requested by/Mail to:

KAREN ELLISON, RECORDER E03

Name: ROSEMARIE SUMNER

Address: P.O. Box 104

City/State/Zip: Wellington NV 89444

Mail Tax Statements to:

Name: ROSEMARIE SUMNER

Address: P.O. Box 104

City/State/Zip: Wellington NV 89444

Transfer upon Death

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)

Rosemarie Sumner  
Signature

ROSEMARIE SUMNER  
Printed Name

~~35464~~ # 2020-945185

This document is being (re-)recorded to correct document # 2020-945185, and is correcting  
LOT 15 AS SHOWN ON MAP TOPAZ RANCH ESTATES  
UNIT TWO TO LOT 68

I PUT wrong LOT # ON DOCUMENT 35464  
THE RIGHT ONE IS LOT 68, SAME legal  
DESCRIPTION

A.P.N.: 1022-10-001-011

**RECORDING REQUESTED BY:**

Rosemarie Sumner  
P.O. Box 104  
Wellington, NV 89444



KAREN ELLISON, RECORDER E10

**MAIL TAX STATEMENTS AND WHEN RECORDED, MAIL TO:**

Same

The undersigned affirms that this document does not contain the social security number of any person or persons.  
Per NRS 239 B 030

**DEED UPON DEATH AFFIDAVIT OF GRANTOR**

I, Rosemarie Sumner, Grantor herein, do hereby convey, give and bequeath to:

Jonathon Wesley Sumner, my natural son, upon my death

All that certain real property situated in the County of Douglas, State of Nevada described as follows:

*lot 68*

~~lot 18~~ as shown on the official map of TOPAZ RANCH ESTATES UNIT NO. 2, filed on February 20, 1967 in Book 47, Page 761, as Document No. 35464, Douglas County Records

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

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.

Dated: *April 16, 2020*

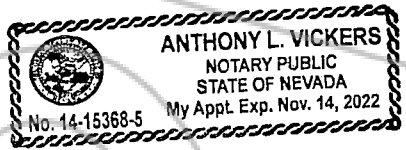
*Rosemarie Sumner*  
Rosemarie Sumner

STATE OF NEVADA )  
  )ss:  
County of Douglas )

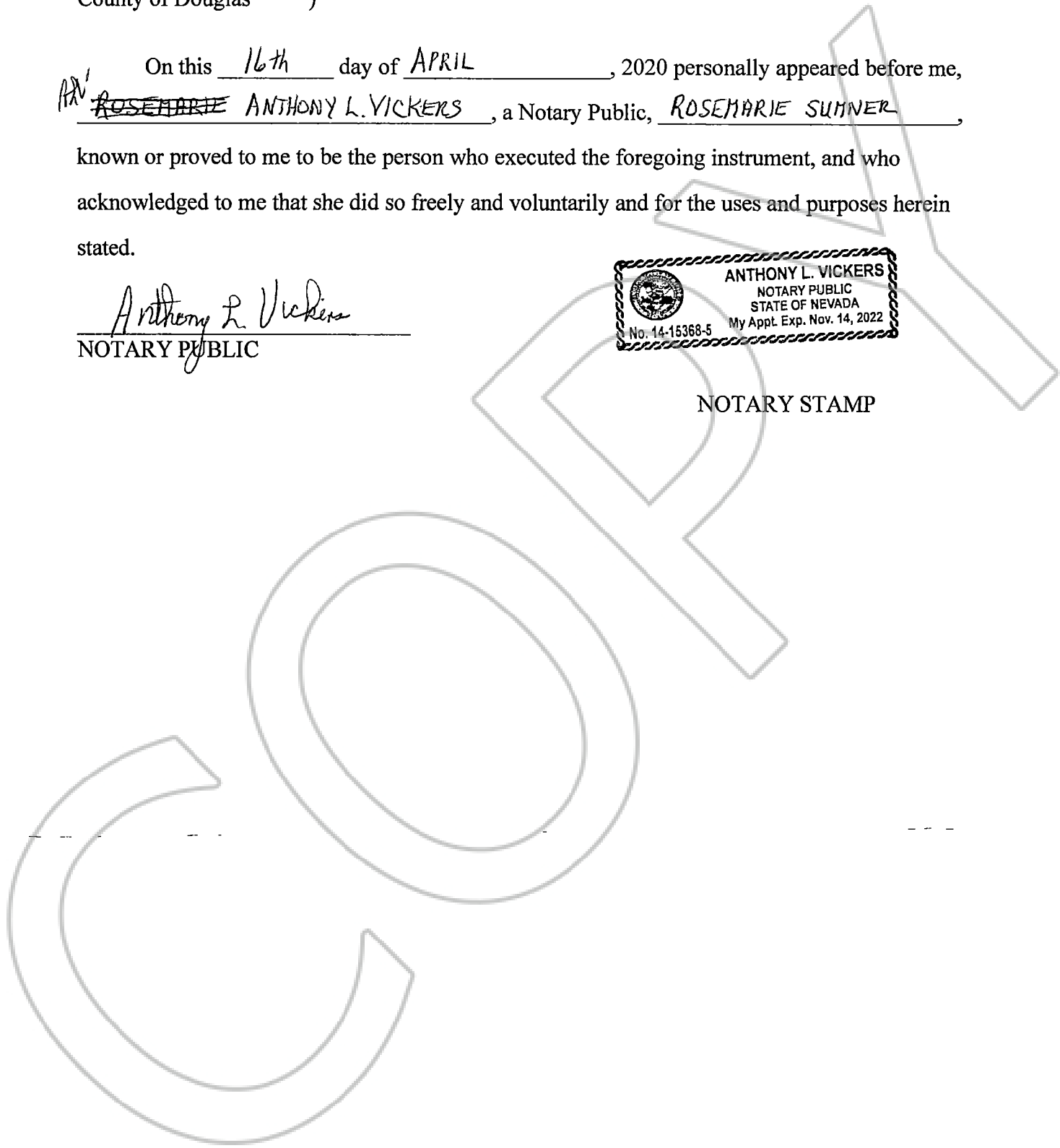
On this 16th day of APRIL, 2020 personally appeared before me,  
<sup>ANV</sup> ~~ROSEMARIE~~ ANTHONY L. VICKERS, a Notary Public, ROSEMARIE SUMNER,

known or proved to me to be the person who executed the foregoing instrument, and who  
acknowledged to me that she did so freely and voluntarily and for the uses and purposes herein  
stated.

Anthony L. Vickers  
NOTARY PUBLIC



NOTARY STAMP



STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

a) 1022-10-001-011 - Lot 68  
 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>Re-recording Doc 945185 to correct Lot #</u>	

3. Total Value/Sales Price of Property:

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

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section # # 3  
 b. Explain Reason for Exemption: DEED UPON DEATH

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 Rosemarie Summer Capacity OWNER

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION  
(REQUIRED)

BUYER (GRANTEE) INFORMATION  
(REQUIRED)

Print Name: ROSEMARIE SUMMER  
 Address: P.O. BOX 104  
 City: WELLINGTON  
 State: NV Zip: 89444

Print Name: JONATHAN WESTLEY SUMMER  
 Address: P.O. BOX  
 City: WELLINGTON  
 State: NV Zip: 89444

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

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