DOUGLAS COUNTY, NV Rec:\$40.00

Rec:\$40.00 Total:\$40.00 CYNTHIA E. SIMPSON 2020-948034 06/22/2020 03:43 PM

Pgs=3

APN#: 1220-22-310-091

RPTT: 0

KAREN ELLISON, RECORDER

E07

Recording Requested By:

When Recorded Mail To: Barry G. Simpson and Cynthia E. Simpson, et al P.O. Box 2393 Gardnerville, NV 89410

Mail Tax Statements to: (deeds only) Same as Above

GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH: That

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged.

Bary G. Simpson and Cynthia E. Simpson, Trustees of The Simpson Family Trust, dated January 30, 2004, and any amendments thereto

do(es) hereby GRANT(s) BARGAIN SELL and CONVEY to

Barry G. Simpson and Cynthia E. Simpson, husband and wife and Benjamin Ediss and Whitney Ediss, husband and wife, all as joint tenants with right of survivorship

and to the heirs and assigns of such Grantee forever, all the following real property situated in the City of Gardnerville, County of Douglas State of Nevada bounded and described as follows:

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

Lot 710, as shown on the map of GARDNERVILLE RANCHOS UNIT NO. 7, according to the map thereof, filed in the office of the Recorder of Douglas County, State of Nevada on March 27, 1974, in Book 374, Page 876, Document No. 72456, Official Records.

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

Dated: 05/04/2020

Grant, Bargain and Sale Deed - Page 2

The Simpson Family Tfust G. Simpson, Trustee Cynthia E. Simpson, Trustee STATE OF SS By Barry G. Simpson and Cynthia E. Simpson. Notary Public LAEHA P. HILL Notary Public - State of Nevada Appointment Recorded in Washoe County No: 16-1292-2 - Expires January 20, 2024

STATE OF NEVADA DECLARATION OF VALUE

Assessors Parcel Number(s)
 a) 1220-22-310-091

2.	Type of Property:		FOR DEC	FOR RECORDERS OPTIONAL USE ONLY			
	a) ☐ Vacant Land	b) ⊠ Single Fam. Res		CKDERS O	FIIONAL	OSE ONLY	
	c) \square Condo/Twnhse	•	· NOTES.	miles -	Tant +1	h-	
	e) ☐ Apt. Bldg	d) □ 2-4 Plex f) □ Comm'l/Ind'l		1-11100 /	pusi y		
	g) ☐ Agricultural	h) ☐ Mobile Home				 	
	i) ☐ Other					\ \	
	1)					٦ (
3. <i>′</i>	Total Value/Sales Price	of Property:	\$0				
		sure Only (value of propert				1	
	Transfer Tax Value:		\$0				
	Real Property Transfer T	Tax Due:	\$0	1		/ /	
				//	 		
4.	If Exemption Claimed:	())			
	a. Transfer Tax Exemption per NRS 375.090, Section #7						
	b. Explain Reason for Exemption: <u>transfer out of trust, no consideration</u>						
5.	Partial Interest: Paraantage haing transformed, 100 0/						
<i>J</i> . 1	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.						
	1 1	Pana					
Purs	uant to NRS 375.030, tl	he Buyer and Seller shall	be jointly and	severally lia	ble for any	y additional amount	
owed		V	1 1		•		
Signature Long Sperson			Capacity	Granter			
Signa	sture Cynthin Efficient		Capacity	Gran	LUY		
	CELLED (CDANITOD)	NEODMATION	DLIVED (C			TION	
SELLER (GRANTOR) INFORMATION				BUYER (GRANTEE) INFORMATION			
Print	(REQUIRED) Barry G. Simps	on and Cynthia E	(REQUIR Print Name:	вы) Barry G. Si	mncon and	Cynthia E	
Name	-	ees of the Simpson Family	Timt Name:	Simpson an			
1 (41)	Trust	ees of the ompson ranning		Whitney Ed		i Luiss and	
Addr			Address:	P.O. Box 23			
City:		1)	City:	Gardnervill			
State		Zip: 89410	State:	NV	Zip:	89410	
1		- / / 	-				
		JESTING RECORDING					
	required if not the seller or l	buyer)					
Print Name:			Es	Esc. #:			
Addre	The state of the s						
City/S	State/Zip:	UBLIC RECORD THIS FOR	MMAVDEDEC		OPH MEDI		
	(ASA P	ODDIE VECOVE LUIS LOKI	VI MAI DE KEU		OLIUMED)		