A.P.N.1219-10-001-020

Recording Requested By: When Recorded Return to:

Guy L. Pearson 1176 Foothill Road Gardnerville, NV 89460

Mail Tax Information to:

Same as above

DOUGLAS COUNTY, NV Rec:\$40.00

Total:\$40.00

GUY PEARSON

2020-948260

06/26/2020 01:27 PM

Pgs=4



KAREN ELLISON, RECORDER

E07

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons.

(Per NRS 239B.030)

Guy Pearson

A.P.N. 1420-28-402-003

Recording Requested By: When Recorded Return to:

Edward Y. Gillespie, Jr. 1269 Melborn Way Minden, NV 89463

Mail Tax Information to:

Same as above

The undersigned grantor(s) declare(s):

Documentary Transfer tax is _____0__

THERE IS NO CONSIDERATION FOR THIS TRANSFER

There is no Documentary transfer tax due. This is a Trust Transfer under Section 62(d) of the Revenue and Taxation Code: Transfer to a revocable trust. This conveyance transfers an interest into or out of a Living Trust, R & T 11930.

GRANT DEED

GUY PEARSON, an unmarried man, does hereby grant to

GUY LES PEARSON as Trustee of the GUY LES PEARSON REVOCABLE TRUST dated June 25, 2020.

the 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 3, as shown on the Official Plat of CARY CREEK ESTATES, according to the map thereof, filed in the office of the County Recorder of Douglas County, State of Nevada on May 25, 1977 in Book 577, Page 1350, as Document No. 9494.

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

Dated:

GUY PEARSON

STATE OF NEVADA)	\ \
)ss:	\ \
County of Carson City)	\ \
a th	\ \
On this, 2020, personally a	appeared before me,
On this 25 th day of we , 2020, personally a, a Notary Public, Guy Po	earson, known or proved to
me to be the person(s) who executed the foregoing instrument, and wh	no acknowledged to me that
he/she did so freely and voluntarily and for the uses and purposes here	ein stated.
8 Carl	HEATHER T. COONEY
Heather Cooney	NOTARY PUBLIC N
No. 09-101	STATE OF NEVADA 117-3 My Appt. Exp. Feb. 14, 2021
NOTARY PUBLIC	STATE OF THE PROPERTY OF THE PARTY OF THE PA

NOTARY STAMP

	E OF NEVADA		
	ARATION OF VALUE	\wedge	
1.	Assessor Parcel Number(s) a) 1420 - 29-WD2-003		
		\ \	
	b)	\ \	
	c)	\ \	
	d)	\ \	
		\ \	
2.	Type of Property:	\ \	
	a) Vacant Land b) Single Fam. R	es.	
	c) Condo/Twnhse d) 2-4 Plex	FOR RECORDERS OPTIONAL USE ONLY	
	e) Apt. Bldg f) Comm'l/Ind'l	BOOK PAGE	
		DATE OF RECORDING:	
	g) Agricultural h) Mobile Home	NOTES: / To J	
	i)	- Coperates naise	
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,		
	b. Explain Reason for Exemption:	ransfer to trust	
	VOIPOINT CONSICLEYO	CTIVII.	
_	Butter in Both in the control of the	100	
5.	Partial Interest: Percentage being transferred:	<u>//// </u>	
The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS			
		the best of their information and belief, and can be	
		antiate the information provided herein. Furthermore, the	
		option, or other determination of additional tax due, may	
res	ult in a penalty of 10% of the tax due plus interes	st at 1% per month.	
_		\ \	
Pursua	nt to NRS 378.030, the Buyer/and Seller shall be jo	intly and severally liable for any additional amount owed.	
Simon and		Canacity Scantor	
Signati	ire	Capacity OF ANTOF	
CIT MANAGEMENT		A	
Signati	ire	Capacity	
	SELLER (GRANTOR) INFORMATION	DI IVED (CD A NITED) INICODM ATION	
	(REQUIRED)	BUYER (GRANTEE) INFORMATION (REQUIRED)	
	(Margorna)	(REQUIRED)	
Print N	ame: DUY /Garson	Print Name: Tear Con IVUSA	
Addres		Address: CAnno	
	Galdener Ville	City:	
State:		State: Zip:	
V	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Д.р	
COMP.	ANY/PERSON REQUESTING RECORDING		
	required if not the seller or buyer)		
Print N	AF	Escrow #	
Addres			
City:	State:	Zip:	
,	(AS A PUBLIC RECORD THIS FORM	MAY BE RECORDED/MICROFILMED)	