DOUGLAS COUNTY, NV

RPTT:\$0.00 Rec:\$40.00

2020-948392

\$40.00 Pgs=3

06/30/2020 08:53 AM

FIDELITY NATIONAL TITLE CLACKAMAS OOS

KAREN ELLISON, RECORDER

E03

When recorded return to:

Joseph A. Whitacre 932 Rain Shadow Way Gardnerville, NV 89460

mai.1 tax statements to: Same as above

APN: 1220-17-617-016

QUIT CLAIM DEED

THE GRANTOR(S), JOSEPH A. WHITACRE, AN UNMARRIED MAN, WHO ACQUIRED TITLE AS JOSEPH WHITACRE, A MARRIED MAN AS HIS SOLE AND SEPARATE PROPERTY

for and in consideration of 0.00

in hand paid, conveys and quit claims to JOSEPH A. WHITACRE, AN UNMARRIED MAN the following described real estate, situated in the County of DOUGLAS, State of NEVADA

together with all after acquired title of the grantor(s) herein:

SEE ATTACHED EXHIBIT A

PARCEL: 1220-17-617-016

LPB 12-05(r) rev 12/2006 Page 1 of 2 JOSEPH A WHITACRE

6/33/20 (Seal)

STATE OF JEVARA

COUNTY OF DOUGLAS

SS.

I certify that I know or have satisfactory evidence that JOSEPH A. WHITACRE (is/are) the person(s) who appeared before me, and said person(s) acknowledged that signed this instrument, on oath stated to execute the instrument and acknowledge it to be the free and voluntary act of such party(ies) for the uses and purposes mentioned in this instrument.

Dated: 06 (23) 2020

WILDEN F. JOHNSON

Notary name printed or typed:

Notary Public in and for the State of

Residing at 1289 Dowles Dr.

My appointment expires: 04/20/2024

m HDEN, W/ 89413



LEGAL DESCRIPTION

EXHIBIT "A"

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE COUNTY OF DOUGLAS, STATE OF NEVADA, AND IS DESCRIBED AS FOLLOWS:

LOT 46 AS SET FORTH ON THE FINAL MAP LDA 16-004 AND PD 04-002-2 FOR RAIN SHADOW RANCH PHASE 3, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON JUNE 17, 2018, AS DOCUMENT NO. 2018-916804.

Parcel ID: 1220-17-617-016

Commonly known as 932 Rain Shadow Way, Gardnerville, NV 89460 However, by showing this address no additional coverage is provided



STATE OF NEVADA	
DECLARATION OF VALUE	
1. Assessor Parcel Number(s)	
a) 1220-17-617-614	
c)	
d)	
<u> </u>	(
2. Type of Property:	
a) Vacant Land b) Single Fam. Res.	
c) Condo/Twnhse d) 2-4 Plex	EOD DECORDEDS OPTIONAL TICE ONLY
e) Apt. Bldg f) Comm'l/Ind'l	FOR RECORDERS OPTIONAL USE ONLY BOOK PAGE
g) Agricultural h) Mobile Home	DATE OF RECORDING:
i) Other	NOTES:
i) La Other	
3. Total Value/Sales Price of Property:	
Deed in Lieu of Foreclosure Only (value of property)	
Transfer Tax Value:	\$
Real Property Transfer Tax Due:	\$
4 700	7
 If Exemption Claimed: a. Transfer Tax Exemption per NRS 375.090, Sec 	
b. Explain Reason for Exemption:	ation #
Change way -	itle is held
* 1 3 1/1/1	
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	
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.	
and a Miller	Capacity ESCVOW agent
Signature \(\tag{\tag{\tag{W}}	Capacity CSCVOW UGCht
Signature	Capacity
oignature_	Cupacity
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: Joseph Awhtacre Pr	int Name: SCSEPH A Whitacre
	ddress: 027 Karologdou) (1204)
	ity: Guid Nen A Me
	ate: 20 Zip: 994100
COMPANY/PERSON REQUESTING RECORDING	
(required if not the seller or buyer) Print Name: File Life Wat OW IT TESCROW# 45 142011542	
· · · · · · · · · · · · · · · · · · ·	
Address 2809 SE 93rd City: CACACO NOCO State: DR Zip: 97015	
(AS A PIRT IC DECORP THIS FORM MAY BE RECORDED MICROSIT MED)	