

APN: 1318-03-212-048

WHEN RECORDED RETURN TO:
Walter R. Griffeth & Collette G. Griffeth
Trustees, The Griffeth Family Trust,
dated April 26, 2002
109 Ponderosa Drive
P.O. Box 12094
Zephyr Cove, Nevada 89448

DOUGLAS COUNTY, NV **2020-949560**
Rec:\$40.00
Total:\$40.00 **07/22/2020 12:03 PM**
KENZY FAMILY TRUST Pgs=3



KAREN ELLISON, RECORDER E07

TRUST TRANSFER DEED

Collette Gay Griffeth, a married woman, as her sole and separate property

do(es) hereby Grant, Bargain, Sell and Convey to

Walter R. Griffeth, Jr. and Collette G. Griffeth, trustees of The Griffeth Family Trust dated April 26, 2002

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

Lot 160, as shown on the map of SKYLAND SUBDIVISION UNIT NO. 3, filed in the office of the County Recorder of Douglas County, Nevada, on February 24, 1960, in Book 1 of Maps, page 450, as Document No. 15653.

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

Witness my/our hand(s) this 24 day of June, 2020.


Collette Gay Griffeth

**SEE ATTACHMENT
FOR NOTARY SEAL**

ACKNOWLEDGMENT

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.

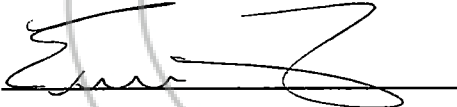
State of California
County of El Dorado

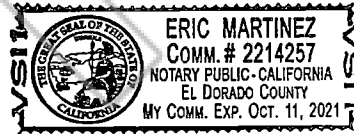
On 06.24.2020 before me, Eric Martinez, Notary Public
(insert name and title of the officer)

personally appeared Collette Gay Griffeth
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 the 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.

Signature  (Seal)



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1318-03-212-048
 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: <u>7/22/20</u>	
NOTES: <u>Surf on</u>	
<u>AB</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 # 7
 b. Explain Reason for Exemption: Transfer to Grantor's Revocable Living Trust
Without Consideration

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.

Signature Collette Gay Griffeth Capacity Grantor/Grantee

Signature Walter R. Griffeth Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Collette Gay Griffeth
 Address: 109 Ponderosa Dr PO Box 12094
 City: Zephyr Cove
 State: NV Zip: 89448

Print Name: Walter R. Griffeth & Collette G. Griffeth, Trustees
 Address: 109 Ponderosa Dr PO Box 12094
 City: Zephyr Cove
 State: NV Zip: 89448

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)