

The undersigned hereby affirms that this document submitted for recording does not contain a social security number.

Signed: 

Prepared by: Jennifer Montante Vigneri, Esq. – Nevada Bar No.: 11846  
Require Real Estate Solutions, LLC  
5029 Corporate Woods Drive, Suite 225, Virginia Beach, VA 23462

Return to:  
WFG Lender Services, 2625 Townsgate Rd., Suite 101, Westlake Village, CA 91361

Reference Number: 1386493NV

Mail Tax Statement to: Sally A. Giroud, 1475 Harvest Avenue, Gardnerville, NV 89410  
Tax No.: 1320-33-717-018

## QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS THAT:

That I/we, SALLY A. GIROUD, Trustee of THE SALLY A. GIROUD FAMILY TRUST, the undersigned (herein referred to as Grantor, whether one or more), do by these presents, hereby RELEASE, REMISE AND FOREVER QUITCLAIM unto SALLY A. GIROUD, Trustee of THE SALLY A. GIROUD FAMILY TRUST dated January 3rd 2008, in fee simple, (herein referred to collectively as Grantee), all right, title and interest in that certain property situated in the City/Town of Gardnerville, County of Douglas, State of Nevada, to-wit:

LOT 6 IN BLOCK A, OF CHICHESTER ESTATES PHASE 9 FINAL SUBDIVISION MAP #1006-9 ACCORDING TO THE MAP THEREOF, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA ON NOVEMBER 27, 2001 IN BOOK 1101, AT PAGE 7916 AS DOCUMENT NO. 528504.

SITUATE IN THE COUNTY OF DOUGLAS, STATE OF NEVADA

Being all of the same Property conveyed to Grantor by virtue of a Grant, Bargain and Sale Deed recorded January 9, 2008 as Instrument No. 0715972 in the Office of the County Recorder of Douglas County, Nevada.

SUBJECT TO: 1. Current taxes and other assessments:  
2. Covenants, conditions, Reservations, Rights, Right of Way, and Easements now of record.

TOGETHER WITH all and singular tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining.

THIS CONVEYANCE is made subject to all easements, and building or use restrictions of record, including, but not limited to, those for public roads and highways, restrictive covenants, utilities, railroads, and pipelines. The conveyance is also subject to all applicable zoning, ordinances, statutes, rules, or regulations, as amended.

Commonly known as: 1475 Harvest Avenue, Gardnerville, NV 89410

This deed is exempt from the Affidavit and Fee Requirement under N.R.S. §375.090(7).

WITNESS, Grantor's hand, this the 21 day of NOV, 2019.

SALLY A. GIROUD, Trustee of  
THE SALLY A. GIROUD FAMILY TRUST

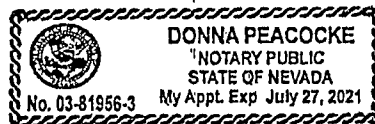
By: Sally A. Giroud, Trustee  
SALLY A. GIROUD, Trustee

ACKNOWLEDGMENT

STATE OF Nevada  
COUNTY OF Douglas to-wit:

I, the undersigned Notary Public, in and for the County and State aforesaid, do hereby certify that SALLY A. GIROUD, Trustee of THE SALLY A. GIROUD FAMILY TRUST, in his/her full and authorized capacity on behalf of said Trust, has acknowledged the same before me in the County and State aforesaid, on this 21 day of NOV, 2019.

Donna Peacocke  
Notary Public  
My Commission Expires: 7-27-21



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) 1320-33-717-018  
 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  
 Other \_\_\_\_\_

**FOR RECORDER'S OPTIONAL USE ONLY**  
 Book. \_\_\_\_\_ Page: \_\_\_\_\_  
 Date of \_\_\_\_\_ Recording: \_\_\_\_\_  
 Notes: Verified Trust - JS

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 or from a 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 *Stacy A. Giroud* Capacity Grantor/Grantee  
Stacy A. Giroud  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
**(REQUIRED)**  
 Print Name: Sally A. Giroud, Trustees of the Sally A. Giroud Family Trust  
 Address: 1475 Harvest Avenue  
 City: Gardnerville State: NV Zip: 89410

**BUYER (GRANTEE) INFORMATION**  
**(REQUIRED)**  
 Print Name: Sally A. Giroud, Trustees of the Sally A. Giroud Family Trust Dated January 3rd 2008  
 Address: 1475 Harvest Avenue  
 City: Gardnerville State: NV Zip: 89410

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**  
 Print Name: WFG Lender Services Escrow #: 1386493NV  
 Address: 2625 Townsgate Rd, Suite 101  
 City: Westlake Village State: CA Zip: 91361

RECORDING REQUESTED BY:  
WFG LENDER SERVICES  
5000 Legacy Drive, Ste. 190,  
Plano, TX 75024

WHEN RECORDED MAIL TO:  
WFG LENDER SERVICES  
5000 Legacy Drive, Ste. 190,  
Plano, TX 75024

Order No : 1386493NV  
Escrow No.:

SPACE ABOVE THIS LINE FOR RECORDER'S USE

### CERTIFICATION OF TRUST

The undersigned declare(s) under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

1. The Trust known as of THE SALLY A. GIROUD FAMILY TRUST executed on JANUARY 3<sup>RD</sup> 2008, is a valid and existing trust.
2. The name(s) of the settlor(s) of the Trust is (are): SALLY A GIROUD
3. The name(s) of the currently acting trustee(s) is (are): SALLY A. GIROUD
4. The trustee(s) of the Trust have the following powers (initial applicable line(s)):  
pay Power to acquire additional property.  
pay Power to sell and execute deeds.  
pay Power to encumber, and execute deeds of trust.  
Other: \_\_\_\_\_
4. The Trust is (check one):  Revocable  Irrevocable  
The name of the person who may revoke the Trust is: Sally A. Giroud
5. The number of trustees who must sign documents in order to exercise the powers of the Trust is (are):  
1, whose name(s) is (are): SALLY A. GIROUD as above
- 6 Title to Trust assets is to be taken as follows: \_\_\_\_\_
7. The Trust has not been revoked, modified or amended in any manner which would cause the representations contained herein to be incorrect
8. I (we) am (are) all of the currently acting trustees.
9. I (we) understand that I (we) may be required to provide copies of excerpts from the original Trust documents which designate the trustees and confer the power to act in the pending transaction

Dated: 11-21-2019

Sally A. Giroud  
SALLY A. GIROUD

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 Nevada

County of Douglas

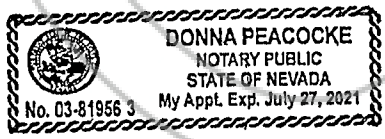
On 11-21-2019 before me, Donna Peacocke, Notary Public, personally appeared  
(here insert name and title of the officer)

Sally A. Giroud

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 Nevada that the foregoing paragraph is true and correct

WITNESS my hand and official seal



Signature Donna Peacocke (Seal)

CERTIFICATION OF TRUST AFFIDAVIT

Declarant(s) Trustee(s) of the SALLY A GIROUD, AS TRUSTEES OF SALLY A. GIROUD FAMILY TRUST DATED JANUARY 3, 2008 UNDER DECLARATION OF TRUST DATED 1/3/2008 (Full Name of the Trust)

named below as the undersigned as an individual(s) being of legal age, certify under penalty of perjury the following. (Complete information and check boxes if applicable)

Name of the Trust: Sally A. Giroud Family Trust

Date of the Trust: Jan. 3, 2008

1. Trustor/Settlor(s). The full name(s) of the settlor(s) of the Trust is/are: a. Sally A. Giroud

2. Trustee(s). the full name(s) of the currently acting trustee(s) is/are: a. Sally A. Giroud

3. Successor Trustee(s). As of today, the persons designated to become successor trustee(s) is/are: a. Crystal M. Smith

4. Number of Trustees (one box must be checked) [X] I am the current and sole Trustee of the Trust. The trust is in full force and has not been revoked, modified or amended in any manner which would cause the representation in this certificate to be incorrect

5. Signature authority (one box must be checked) [X] As sole Trustee, I have all necessary signatures to bind the Trust and take actions specified in Section 7.

6. Revocability (one box must be checked) [X] Revocable. The Trust is a revocable trust. The power to revoke is held by the settlor(s) named below.

[ ] Irrevocable. The Trust is an irrevocable trust

7. Authorization. As Trustee, I/we have the authority and power to (check all that apply) A. [X] Borrow. Borrow from Logix Federal Credit Union (Credit Union) from time to time on such terms



and in such amounts as may be agreed upon with the Credit Union for real estate secured loans where the real property is property/ies that is held in the Trust without consent or approval or any other person(s);

- B.  Execute and deliver promissory notes or loan agreements (collectively, "Notes") on behalf of the Trust which evidences a Loan or Loans
- C.  Execute and deliver to the Credit union all renewals, extensions, increases, modifications, or substitutions for any all the Notes.
- D.  **Collateral.** Mortgage, pledge, grant security interests in, assigns or otherwise encumber and deliver to the Credit Union (collectively, grant a "Security Interest") and real or personal property in which the Trust holds an interest ("Trust Property") as security for repayment of any Loan and the performance of any obligation by the Trust pursuant to a Loan-related document, and execute and deliver to the Credit Union any deed of trust, pledge agreement, security agreement, financing statement and the like (collectively, "Security Instrument")
- E.  **Guaranty.** (If the Trust acts as Guarantor) Execute and deliver a guaranty in form and content available to the Credit Union, whereby the Trust guarantees ("Guaranty") any and all obligations under any Guaranty executed by the Trust.
- F.  **Collateralized Guaranty.** Grant Security Interest in and execute any Security Instrument covering any Trust Property to secure the performance of any and all obligations of \_\_\_\_\_

\_\_\_\_\_ to the Credit Union (Borrowers on the Note securing property held in the trust)

- G.  Draw, endorse, and discount with the Credit Union any drafts, trade acceptances, promissory notes, or other evidences of indebtedness payable to or belonging to the Trust, and either to receive cash for the same or to cause such proceeds to be credited to any of the Trust's Accounts with the Credit Union or to make such other dispositions of the proceeds as I/we may deem advisable
- H.  **Power of Attorney.** Check box and sign if Trustee has authority to and has appointed an attorney-in-fact to be a signer on the Trust's account(s) Only may be used when trustee cannot personally perform the delegated acts:  
As Trustee(s), I/we have the authority and power under the Trust Agreement to appoint attorney(s)-in-fact to be signer(s) on the Trust's Accounts, to deposit funds, sign checks drawn upon the Accounts, withdraw funds from the Accounts, by check or otherwise and made payable to any person including the attorney(s)-in-fact, and take all actions with respect to the Trust's Accounts by the attorney(s)-in-fact's signature(s) alone, as the Trustee(s) could take. I/We (i) desire to appoint the attorney(s)-in-fact name(s) on signature card/membership application, for the Trust's Accounts from time to time, (ii) hereby undertake to supervise the attorney(s)-in-fact.

8. **Co-Trustees.** Where this Certification is signed by Co-Trustees, each Trustee certifies for himself for herself and not for other(s) References to the singular include the plural.

9. **Tax Identification Number.**  
The tax identification number of the Trust \_\_\_\_\_ - 0134  
(The Trustor's tax reporting identification number (TIN/SS#) or a TIN specific to the Trust)

10. **Title.** Title to Trust assets should be taken as follows **SALLY A GIROUD, AS TRUSTEES OF SALLY A. GIROUD FAMILY TRUST DATED JANUARY 3, 2008 UNDER DECLARATION OF TRUST DATED 1/3/2008**  
(Full Name of Trust)



I/WE declare under PENALTY OF PERJURY under the laws of the State of Nevada that the foregoing is true and correct. Where there are Co-Trustees, we are all of the Co-Trustees of the Trust.

Date: 11-21-2019

Trustee *Sally A. Giroud*

SIGNATURE

SALLY A. Giroud  
TYPE OR PRINT NAME

Date \_\_\_\_\_

Trustee \_\_\_\_\_

SIGNATURE

TYPE OR PRINT NAME

Date \_\_\_\_\_

Trustee \_\_\_\_\_

SIGNATURE

TYPE OR PRINT NAME

State of ~~Texas~~ Nevada

County Douglas

This instrument was acknowledged before me on 11-21-2019

by Sally A. Giroud

*Donna Peacocke*

(Signature of notarial officer)

Notary Public

(Title or rank)

(Seal)

