DOUGLAS COUNTY, NV

Rec:\$40.00 Total:\$40.00 KATHY WATERS 2020-951308

08/25/2020 10:12 AM

Pas=3

APN: 142007616041

WHEN RECORDED MAIL TO AND TAX STATEMENTS TO:

KATHY LEE WATERS 963 OPALITE DR. CARSON CITY, NV 89705 (775)350-9888



KAREN ELLISON, RECORDER

E10

DEED UPON DEATH

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

I, KATHY LEE WATERS, a single woman, do hereby convey to my sister, KAROLE LOU LEWIS, effective upon our death, all right, title and interest in the real property commonly described as 963 OPALITE DR., CARSON CITY, NV 89705, and more particularly described as:

LOT 91 IN BLOCK 8 OF HIGHLAND ESTATES, UNIT NO. 2, ACCORDING TO THE MAP THEREOF, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON JANUARY 27, 1978, IN BOOK 179, PAGE 1633, AS FILE NO. 17090 AND BY A CERTIFICATE OF AMENDMENT RECORDED ON NOVEMBER 14, 2007, DOCUMENT 713047.

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

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR. THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTORS WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTORS IN THE SAME REAL PROPERTY.

KATHYLEE WATERS

Date

4/4/2020

State of Nevada)
) ss. County of County Occioa
Subscribed and sworn to on this day of, in the year 2020,
before me, Rotary Public, by KATHY LEE WATERS
TERESA OHL Notary Public, State of Nevada Appointment No. 99-22054-3 My Appt. Expires May 11, 2023
My Appt. Expires may 11, asset

STATE OF NEVADA	
DECLARATION OF VALUE	
1. Assessor Parcel Number(s)	^
a) 142007616041	
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:
	NOTES:
i)	
3. Total Value/Sales Price of Property:	\$
Deed in Lieu of Foreclosure Only (value of property	⁽¹⁾
Transfer Tax Value:	\$
Real Property Transfer Tax Due:	3/
4 100 (01 1	
4. <u>If Exemption Claimed:</u> a. Transfer Tax Exemption per NRS 375.090,	Seation # 10
a. Transfer Tax Exemption per NRS 375.090, b. Explain Reason for Exemption: Deed	WOON DEATH
b. Explain Reason for Exemption. VEC	wpon vertice
5. Partial Interest: Percentage being transferred:	%
3. I artial interest. I electriage being transferred.	
The undersianed declares and columnial date and an	nonalty of notional management to NDS 275 060 and NDS
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	
	antiate the information provided herein. Furthermore, the aption, or other determination of additional tax due, may
result in a penalty of 10% of the tax due plus interes	
result in a penalty of 10% of the tax due plus interes	st at 1% per month.
Pursuant to NRS 375 030, the Ruyer and Seller shall be in	intly and severally liable for any additional amount owed.
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Signature Kathy Lwatus	Capacity Arantor
135.1	
Signature	Capacity
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
1/ 1/ 1/ 1/10	
Print Name: KAthy L. WAKS	Print Name:
Address: 963 OPALLE Ur.	Address:
City: CASON City	City: $\subseteq \subseteq \subseteq \subseteq$
State:	State: Zip:
\	
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)