RPTT:

APN:

1420-34-201-023

MAIL RECORDED DOCUMENT TO: Cy and Dolores Clarkson

2728 Gordon Avenue Minden, NV 89423

MAIL TAX STATEMENT TO: Cy and Dolores Clarkson 2728 Gordon Avenue Minden, NV 89423 DOUGLAS COUNTY, NV Rec:\$40.00

2020-951744

08/31/2020 03:40 PM

CY H. CLARKSON

Total:\$40.00

Pgs=3



KAREN ELLISON, RECORDER

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DEED UPON DEATH

For valuable consideration, receipt of which is hereby acknowledged, CY H. CLARKSON and DOLORES CLARKSON do hereby Grant, Sell, Bargain and Convey to CY H. CLARKSON and DOLORES CLARKSON, husband and wife as joint tenants with right of survivorship, and then upon the death of the survivor to JAMIE RONALD CLARKSON, all right, title and interest in the real property commonly known as 2728 Gordon Avenue, City of Minden, County of Douglas, State of Nevada, and more particularly described as:

A portion of the Southwest Quarter of the Northwest Quarter of Section 34, Township 14 North, Range 20 East, M.D.B.&M., more particularly described as follows:

Parcel 2, as set forth on Parcel Map for Carlos V. Ward filed for record in the Office of the County Recorder of Douglas County, State of Nevada, on April 24, 1990, in Book 490, Page 3709, Document No. 224468.

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

JASON MICHAEL CLARKSON shall have a life estate in said property and shall pay all utilities. Said life estate shall terminate upon the sale of the residence, in the event Jason moves from the residence, or in the event of Jason's death. Jason shall maintain the residence in a habitable condition.

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR(S). THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR(S) 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 GRANTOR(S) IN THE SAME REAL PROPERTY.

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

Dated this 31 day of Ausust, 2020.

y H. Clarkson

Dolores Clarkson

STATE OF NEVADA

CARSON CITY

SS.

On this <u>31</u> day of <u>August</u>, 2020, before the undersigned, a Notary Public, personally appeared Cy H. Clarkson and Dolores Clarkson, personally known to me, or proved to me on the basis of satisfactory evidence, to be the persons whose names are subscribed to this instrument, and acknowledged that they executed it.

LORA E. MYLES
Notary Public - State of Nevada
Appointment Recorded in Washoe County
No: 94-5469-2 - Expires October 30, 2022

Notary Public

STATE OF NEVADA **DECLARATION OF VALUE** 1. Assessor Parcel Number(s) a) 34 1420 34 201 023 c) d) 2. Type of Property: a) Vacant Land b) $\boldsymbol{\mathcal{U}}$ Single Fam. Res. 2-4 Plex c) Condo/Twnhse d) FOR RECORDERS OPTIONAL USE ONLY BOOK e) Apt. Bldg f) Comm'l/Ind'l DATE OF RECORDING: h) Mobile Home Agricultural NOTES: 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. If Exemption Claimed: a. Transfer Tax Exemption per NRS 375.090, Section #_ b. Explain Reason for Exemption: DEED 12 on Death 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. Capacity Grantor Signature Capacity _____ Signature SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION (REQUIRED) (REQUIRED) Print Name: (1, H. (LAN) City: MUDEN State: COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer) Escrow # Print Name: Address: State: City:

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