

APN: 1022-10-002-064

RECORDING REQUESTED BY:

Marshall L. Smith
1320 Limestone Road
Wellington, Nevada 89444



KAREN ELLISON, RECORDER

E10

MAIL TAX STATEMENTS TO:

Marshall L. Smith
1320 Limestone Road
Wellington, Nevada 89444

*Pursuant to NRS 239B.030(4), I affirm that
the instrument contained below does contain
the social security number of any person.*

Deed Upon Death

I, Marshall L. Smith (Grantor), hereby convey to Dawn R. Smith Hammer (Grantee), all my rights, title and interest in the real property commonly known as 1320 Limestone Road, located in the County of Douglas, and more particularly described as follows:

LOT 23 AS SHOWN ON THE MAP OF TOPAZ RANCH ESTATES UNIT NO. 2, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON FEBRUARY 20, 1967, AS DOCUMENT NO. 35464.

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(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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Pursuant to NRS 239B.030, I affirm that this instrument does not contain a social security number or the personal information of any person.

Pursuant to NRS 111.312, this legal description was previously recorded as Document No. 2020-950628 on the 11th day of August, 2020.

DATED this 15th day of March, 2021.


MARSHALL L. SMITH

STATE OF NEVADA)
) ss.
COUNTY OF DOUGLAS)

Subscribed and sworn to on this 15th day of March, 2021, before me personally appeared Marshall L. Smith personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument, and acknowledged that he executed it.

WITNESS my hand and official seal.




NOTARY PUBLIC

STATE OF NEVADA
DECLARATION OF VALUE

- 1. Assessor Parcel Number(s)
 - a) 1022-10-002-064
 - 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: _____	
NOTES: _____	

- 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 # 10
 - b. Explain Reason for Exemption: A conveyance of real property by deed which becomes effective upon death of Grantor

5. Partial Interest: Percentage being transferred: 100.00 %

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 Marshall L. Smith Capacity Representative

Signature _____ Capacity _____

**SELLER (GRANTOR) INFORMATION
(REQUIRED)**

**BUYER (GRANTEE) INFORMATION
(REQUIRED)**

Print Name: Marshall L. Smith
 Address: 1320 Limestone Road
 City: Wellington
 State: Nevada Zip: 89444

Print Name: Marshall L. Smith
 Address: 1320 Limestone Road
 City: Wellington
 State: Nevada Zip: 89444

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: Law Office of Michael S. Rowe, Esq. Escrow # _____

Address: P.O. Box 2080

City: Minden State: Nevada Zip: 89410

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