

APN# A portion of 1319-15-000-025

**Recording Requested by/Mail to:**

Name: Law Office of Kathleen Bock Stewart

Address: 1300 Oliver Road, Suite 107

City/State/Zip: Fairfield, CA 94534

**Mail Tax Statements to:**

Name: Sophia P. Maillard

Address: 7507 Paddon Rd

City/State/Zip: Vacaville, CA 95688



00132377202109651930050054

KAREN ELLISON, RECORDER

E03

**Grant Deed**

**Title of Document** (required)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording  
DOES contain personal information as required by law: (check applicable)

Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

This document is being (re-)recorded to correct document # 2021-963222, and is correcting  
The date of the trust as February 17, 2021.

Recording Requested By and  
When Recorded Mail To:

LAW OFFICE OF  
KATHLEEN BOCK STEWART  
1300 Oliver Road, Suite 107  
Fairfield, CA 94534

[REDACTED]  
KAREN ELLISON, RECORDER

E07

**GRANT DEED**

A TIMESHARE ESTATE  
Douglas County, Nevada

Real Property Transfer Tax \$0

APN: A portion of 1319-15-000-025

The Grantor, SOPHIA MAILLARD, hereby declares:

NOW THEREFORE, SOPHIA MAILLARD, hereby grants to SOPHIA P. MAILLARD, as Trustee of THE SOPHIA P. MAILLARD FAMILY TRUST, under Declaration of Trust dated February 17, 2021; that certain real property, in the County of Douglas, Nevada, commonly known as a Timeshare Estate, and more particularly described as follows:

See attached Exhibit A.

Dated: February 17, 2021

*Sophia Maillard*  
\_\_\_\_\_  
SOPHIA MAILLARD

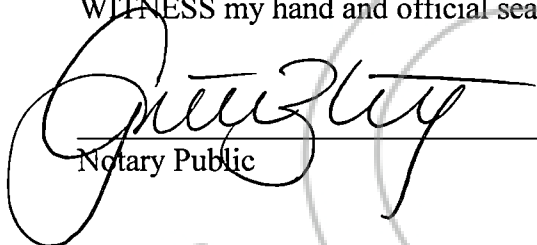
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA    )  
  ) ss.  
COUNTY OF SOLANO    )

On February 17, 2021, before me, Cynthia Zuniga-Martinez, Notary Public, personally appeared SOPHIA P. MAILLARD, 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 persons(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.

  
\_\_\_\_\_  
Notary Public



## EXHIBIT A

An undivided fee simple ownership interest in and to the following described Time Share Interest that has been created at David Walley's Hot Springs Resort and Spa located in Douglas County, Nevada and more fully described within that certain Fifth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for David Walley's Resort that has been filed of record on August 27, 2001 with the Recorder in and for Douglas County, Nevada in Book 0801 Page 6980, as amended:

**Unit Type: 2bd Phase: 1 Inventory Control No: 36021005450  
Alternate Year Time Share: Annual First Year Use: 2013**

If acquiring a Time Share Interest in Phase I, BUYER will receive fee title to a 1/1071th undivided interest (if annually occurring) or a 1/2142th undivided interest (if biennially occurring) in said Phase. If acquiring a Time Share Interest in Phase II, BUYER will receive fee title to a 1/1989th undivided interest (if annually occurring) or a 1/3978th undivided interest (if biennially occurring) in said Phase. If acquiring a Time Share Interest in Phase III, BUYER will receive fee title to a 1/1224th undivided interest (if annually occurring) or a 1/2448th undivided interest (if biennially occurring) in said Phase. If acquiring a Time Share Interest in the Dillon Phase, BUYER will receive fee title to a 1/1224th undivided interest (if annually occurring) or a 1/2448th undivided interest (if biennially occurring) in said Phase.

**TO HAVE AND TO HOLD THE SAME**, along with all appurtenances related thereto, forever and in fee simple but subject to the usage limitations as contained in the Declaration, all restrictions imposed by the Walley's Property Owners Association, Inc., all other restrictions reserved unto the Grantor, all other easements and restrictions of every nature of record, and state and county ad valorem and other taxes, if any.

STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)  
a) 1319-15-000-025  
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 TIMESHARE

**FOR RECORDERS OPTIONAL USE ONLY**  
BOOK \_\_\_\_\_ PAGE \_\_\_\_\_  
DATE OF RECORDING: \_\_\_\_\_  
NOTES: \_\_\_\_\_

3. Total Value/Sales Price of Property: \$ \$0.00  
Deed in Lieu of Foreclosure Only (value of property) (\$0.00)  
Transfer Tax Value: \$ \$0.00  
Real Property Transfer Tax Due: \$ \$0.00

4. If Exemption Claimed:  
a. Transfer Tax Exemption per NRS 375.090, Section # 3  
b. Explain Reason for Exemption: RECORDING DOCUMENT 2021-963222 TO INCLUDE THE TRUST DATE AS FEBRUARY 21, 2021.

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: *Sophia Maillard* Capacity: AGENT  
Signature: \_\_\_\_\_ Capacity: \_\_\_\_\_

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

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

Print Name: SOPHIA MAILLARD  
Address: 7507 PADDON ROAD  
City: VACAVILLE  
State: CA Zip: 95688

Print Name: SOPHIA P. MAILLARD, TRUSTEE  
Address: 7507 PADDON ROAD  
City: VACAVILLE  
State: CA Zip: 95688

**COMPANY/PERSON REQUESTING RECORDING**

(required if not the seller or buyer)  
Print Name: LAW OFFICE OF KATHLEEN BOCK STEWART Escrow # \_\_\_\_\_  
Address: 1300 OLIVER ROAD, SUITE 107  
City: FAIRFIELD State: CA Zip: 94534

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