Rec:\$40.00

2021-965466 04/14/2021 11:45 AM

Total:\$40.00 DORIAN J. DILLON



KAREN ELLISON, RECORDER

RECORDING REQUESTED BY:

Dorian J. Dillon 1378 Brooke Way Gardnerville, NV 89410

A.P.N.: 1320-33-817-041

MAIL TAX STATEMENTS AND WHEN **RECORDED, MAIL TO:**

Same

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The undersigned affirms that this document does not contain the social security number of any person or persons. Per NRS 239 B 030

> The undersigned grantor(s) declare(s): Documentary Transfer tax is ____0

THERE IS NO CONSIDERATION FOR THIS TRANSFER

There is no Documentary transfer tax due. This is a Trust Transfer under Section 62(d) of the Revenue and Taxation Code: Transfer to a revocable trust. This conveyance transfers an interest into or out of a Living Trust, R & T 11930.

GRANT DEED

Dorian J. Dillon, a single woman, does hereby grant to Dorian Jeanne Dillon as Trustees of THE DORIAN JEANNE DILLON REVOCABLE TRUST dated April 8, 2021, all the following real property situated in the City of Gardnerville, County of Douglas, State of Nevada, bounded and described as follows:

All that certain real property situate in the County of Douglas, State of Nevada, described as follows:

Lot 41 in Block E, as shown on the Final Subdivision Map #1006-12 of CHICHESTER ESTATES PHASE 12, filed for record in the office of the Douglas County Recorder, State of Nevada, on January 8, 2004, in Book 104, at Page 2012, as Document No. 601490, Official Records

Together with all tenements, hereditaments and appurtenances, if any, thereto belonging or appertaining, and any reversion, remainders, rents, issues or profits thereof.

Dated: April 13, 2021

aria

DORIAN J. DILLON

NOTARY ACKNOWLEDGMENT

State of Nevada)
)
Carson City)

On April 13, 2021, before me, Heather Cooney, a notary public, personally appeared Dorian Jeanne Dillon, 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 is true and correct.

WITNESS my hand and official seal.

Signature of Notary Public

Heather T. Cooney NOTARY PUBLIC STATE OF NEVADA Appt. No. 09-10117-3 Appt. Expires January 6, 2025

THIS NOTARY ACKNOWLEDGMENT FOLLOWS THE GRANT DEED EXECUTED BY DORIAN J. DILLON ON ARIL 13, 2021

STATE OF NEVADA	
DECLARATION OF VALUE	
1. Assessor Parcel Number(s) 3 -817-641	
b)	()
c)	\ \
d)	\ \
<u>-)</u>	\ \
2. Type of Property:	\ \
a) Vacant Land b) Single Fam. Res.	\ \
· · · · · · · · · · · · · · · · · · ·	TOD DEGODDING OWNOVIAL USE ONLY
	FOR RECORDERS OPTIONAL USE ONLY BOOK PAGE
e) Apt. Bldg f) Comm'l/Ind'l	DATE OF RECORDING:
g) Agricultural h) Mobile Home	NOTES: i a final final
i)	Milled This 9
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, Sect	
b. Explain Reason for Exemption: / kg	a file
Wand of Corwin	ta av
5. Partial Interest: Percentage being transferred: / OC	%
5. Fartial interest. Fercentage being transferred.	
The undersigned declares and acknowledges, under pen	alty of perjury pursuant to NRS 375 060 and NRS
375.110, that the information provided is correct to the l	
supported by documentation if called upon to substantia	
parties agree that disallowance of any claimed exemption	
result in a penalty of 10% of the tax due plus interest at	
result in a penalty of 1070 or the tax due plus interest at	170 por monen.
Pursuant to NRS 375.030, the Buyer and Seller shall be jointly	and severally liable for any additional amount owed.
	1 1 1 0 0 1 4 0
Signature And Law W	Capacity
	/ / '
Signature /	Capacity
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Division Day 101 Dill Oct Print	nt Name: 1)/1/62 /MST
	Idress: Sewe
	ate: Zip:
State. 100 Zip. 84770	
COMPANY/PERSON REQUESTING RECORDING	
(required if not the seller or buyer)	
	Escrow #
Address:	
City: State:	Zip:
(AS A PUBLIC RECORD THIS FORM MA	Y BE RECORDED/MICROFILMED)