

DOUGLAS COUNTY, NV

2021-966402

RPTT:\$0.00 Rec:\$40.00

\$40.00 Pgs=3

04/28/2021 10:09 AM

SYNRGO, INC. LA

KAREN ELLISON, RECORDER

E03

MAIL TAX STATEMENTS TO:
711 PAULA PLACE
GARDNERVILLE, NV 89410

RECORDATION REQUESTED BY/RETURN TO:
MR. AND MRS. CIRIELLO
P.O. BOX 218
FALL RIVER MILLS, CA 96028

APN No. 1220-24-601-017

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 4 day of November, 2020, by MICHAEL J. CIRIELLO AND JEANNETTE G. CIRIELLO, TRUSTEES OF THE MICHAEL AND JEANNETTE CIRIELLO REVOCABLE TRUST, DATED APRIL 17, 2004, WHO ERRONEOUSLY ACQUIRED TITLE AS MICHAEL J. CIRIELLO AND JEANNETTE C. CIRIELLO, TRUSTEES OF THE MICHAEL AND JEANNETTE CIRIELLO REVOCABLE TRUST, DATED APRIL 17, 2004, to second party, MICHAEL J. CIRIELLO AND JEANNETTE G. CIRIELLO, TRUSTEES OF THE MICHAEL AND JEANNETTE CIRIELLO REVOCABLE TRUST, DATED APRIL 17, 2004.

WITNESSETH, That the said first party, for good consideration in the amount of Ten Dollars and 00/100 (\$10.00) and good and other valuable consideration paid by the said second party, the receipt whereof is hereby acknowledged, do hereby remise, release and quitclaim unto the said second party(ies), and to their successors and assigns forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the City of GARDNERVILLE, County of DOUGLAS, State of NEVADA, to wit:

ALL THAT CERTAIN LOT, PIECE OR PARCEL OF LAND SITUATE IN SECTION 24, TOWNSHIP 12 NORTH, RANGE 20 EAST, M.D.B. & M., IN THE COUNTY OF DOUGLAS, STATE OF NEVADA, DESCRIBED AS FOLLOWS:

PARCEL 1, AS SET FORTH ON THAT CERTAIN PARCEL MAP FOR EARL R. AND PAULA J. MCKIE, ACCORDING TO THE MAP THEREOF, FILED FOR THE RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA ON DECEMBER 12, 1991, IN BOOK 1291, PAGE 1872, AS DOCUMENT NO. 266952.

Property Address: 711 PAULA PLACE, GARDNERVILLE, NV 89410

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written.

Michael J. Ciriello
MICHAEL J. CIRIELLO, TRUSTEE

Jeannette G. Ciriello
JEANNETTE G. CIRIELLO, TRUSTEE

STATE OF NEVADA)
)
COUNTY OF _____)

SS.

On, _____, 20____, before me, the undersigned, a Notary Public in and for said State, personally appeared **MICHAEL J. CIRIELLO, TRUSTEE AND JEANNETTE G. CIRIELLO, TRUSTEE**, personally known to me (or 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.

WITNESS my hand and official seal.

Notary Public
My Commission Expires: _____

PREPARED BY:
ROBERT "BOB" WINES, ATTORNEY AT LAW
O/B/O BC LAW FIRM, P.A.
687 6TH STREET STE. # 1
ELKO, NV 89801

See attached

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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

County of ~~Siskiyou~~ ^{Shasta} Shasta

On Nov. 4 2020 before me, Terri Mazingo, Notary Public,
(Here insert name and title of the officer)

personally appeared Michael J. Ciriello and Jeannette G. Ciriello,

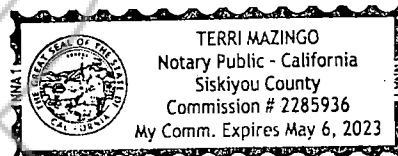
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), 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 California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Terri Mazingo
 Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

Individual (s)

Corporate Officer

(Title)

Partner(s)

Attorney-in-Fact

Trustee(s)

Other _____

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /ese) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

STATE OF NEVADA
DECLARATION OF VALUE

- 1. Assessor Parcel Number(s)
 - a) 1220-24-601-017
 - 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: \$0.00
- Deed in Lieu of Foreclosure Only (value of property) _____
- 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: deed correcting middle initial

5. Partial Interest: Percentage being transferred: 100 %

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 Candy Keller Capacity Agent

Signature _____ Capacity _____

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

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

Print Name: Michael J. Ciriello & Jeannette G. Ciriello, trustees
Address: 711 Paula Place
City: Gardnerville
State: NV Zip: 89410

Print Name: Michael J. Ciriello & Jeannette G. Ciriello, trustees.
Address: 711 Paula Place
City: Gardnerville
State: NV Zip: 89410

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: Sunrad Inc Escrow # NSWREF20271439
Address: 5000 Birch St, Suite 550
City: Newport Beach State: CA Zip: 92660