

APN: 1320-29-410-030

PREPARED BY
BOBBIE R. WILLIAMS
DOUGLAS COUNTY DISTRICT COURT CLERK
NINTH JUDICIAL DISTRICT COURT
PO BOX 218
MINDEN NV 89423



KAREN ELLISON, RECORDER

E03

AFTER RECORDING RETURN TO:
DENISE L. CASTLE
1640 ESMEERALDA AVE
MINDEN NV 89423

QUITCLAIM (CLERK'S) DEED

FOR NO VALUABLE CONSIDERATION,

Denise Castle and Stephen Castle, wife and husband as Joint Tenants hereinafter referred to as the "Grantor", does hereby convey, release and quitclaim to

Denise Lynn Castle, a single woman as her sole and separate property, hereinafter the "Grantee", all the right, title and interest of the undersigned in and to the real property situated in the City of Minden, County of Douglas, State of Nevada, legally described as follows:

Lots 7 and 8, in Block H, of WEST ADDITION TO THE TOWN OF MINDEN, according to the Official Map thereof, entitled, "AMENDED MAP OF WEST ADDITION TO THE TOWN OF MINDEN," filed in the office of the County Recorder of Douglas County, State of Nevada, on April 16, 1915, in Book B of Miscellaneous Records, Page 406, as Document No. 952.

Together with all and singular the tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or in anywise appertaining, and any reversions, remainders, rents, issues or profits thereof.

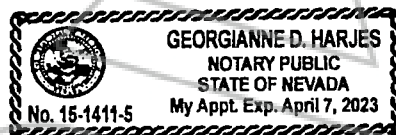
Witness my hand this 11 day of May, 2021.

Bobbie R. Williams
Douglas County Clerk of Court

STATE OF NEVADA
COUNTY OF DOUGLAS

On this 11th day of May, 2021 appeared before me, a Notary Public,
Bobbie R. Williams personally known or proven to me to be the person whose name is
subscribed to the above instrument, who acknowledged that he executed the instrument for the
purposes therein contained.

Georgianne D. Harjes
Notary Public
My commission expires: April 7, 2023



COPY

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

1. Assessor Parcel Number (s)
 (a) 1320-29-410-030
 (b) _____
 (c) _____
 (d) _____

2. Type of Property:

a) <input type="checkbox"/> Vacant Land	b) <input checked="" type="checkbox"/> Single Fam Res.
c) <input type="checkbox"/> Condo/Twnhse	d) <input type="checkbox"/> 2-4 Plex
e) <input type="checkbox"/> Apt. Bldg.	f) <input type="checkbox"/> Comm'l/Ind'l
g) <input type="checkbox"/> Agricultural	h) <input type="checkbox"/> Mobile Home
i) <input type="checkbox"/> 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: 3

b. Explain Reason for Exemption: per court order

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 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 Denise L. Castle Capacity Grantee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
 (REQUIRED)

Print Name: DC District Court

Address: PO Box 218

City: Minden

State: NV Zip: 89423

BUYER (GRANTEE) INFORMATION
 (REQUIRED)

Print Name: Denise L. Castle

Address: 1640 ESMEERALDA AVE

City: Minden

State: NV Zip: 89423

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____