

1420-28-110-020
APN 021-471-190



00139460202109715900030033

KAREN ELLISON, RECORDER

E07

FOR RECORDER'S USE ONLY

QUITCLAIM DEED
TITLE OF DOCUMENT

I, the undersigned, hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (NRS 239B.030)

I, the undersigned, hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the social security number of a person or persons as required by law. State specific law: _____

June Gail Miller Signature JUNE GAIL MILLER Grantor Print Name & Title

June Gail Miller Signature JUNE GAIL MILLER Grantor Print Name & Title

WHEN RECORDED MAIL TO:

JUNE GAIL MILLER
2988 HOT SPRINGS RD.
MINDEN, NV. 89423

1420-28-110-020

APN: 021-471-190

Recording Requested by and after Recordation

Mail this Deed to:

JUNE GAIL MILLER
2988 HOT SPRINGS RD.
MINDEN, NV. 89423

Grantee Address & Tax Statement to:

JUNE GAIL MILLER
2988 HOT SPRINGS RD.
MINDEN, NV. 89423

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

THIS INDENTURE WITNESSETH: JUNE GAIL MILLER, AKA GAIL J. MILLER an unmarried woman, as her sole and separate property, which is hereby acknowledged, does hereby remise, release and forever quitclaim to THE JUNE G. MILLER REVOCABLE LIVING TRUST. JUNE GAIL MILLER, Trustee, ("Grantee"), all that real property situated in the County of Douglas, State of Nevada, bounded and described as follows:

Lot 87, in Block B, as set forth Final Map of SARATOGA SPRINGS ESTATES UNIT No. 3, a Planned Unit Development, filed for record in the Office of the County Recorder of Douglas County, State of Nevada, on June 23, 1998, in Book 698, Page 5063, as Document No. 442616.

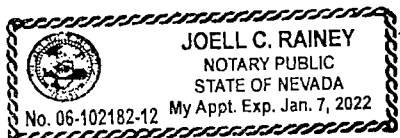
Commonly known as: 2988 HOT SPRINGS RD., MINDEN, NV. 89423

June Gail Miller
JUNE GAIL MILLER

STATE OF NEVADA)
)ss.
COUNTY OF LYON)

On this 14th day of July, 2021, before me, the undersigned Notary Public for the State of Nevada, personally appeared JUNE GAIL MILLER, known to me to be the person(s) subscribed to the within and foregoing instrument, and he/she/they acknowledged to me that he/she/they executed the same.

Joell C. Rainey
NOTARY PUBLIC



**State of Nevada
Declaration of Value**

FOR RECORDER'S OPTIONAL USE ONLY	
Document/Instrument # _____	
Book: _____	Page: _____
Date of Recording: <u>7/28/21</u> <i>Trust OR</i>	
Notes: _____ <i>AB</i>	

- Assessor Parcel Number(s)
 - 021-471-190-1420-28-110-020
 - _____
 - _____
 - _____
- Type of Property:

a) Vacant Land	b) <input checked="" type="checkbox"/> 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 _____	

3. Total Value/Sales Price of Property: \$ -0-
 Deed in Lieu of Foreclosure Only (value of property) \$ N/A
 Transfer Tax Value: \$ -0-
 Real Property Transfer Tax Due: \$ -0-

- If Exemption Claimed:**
 - Transfer Tax Exemption, per NRS 375.090, Section: 7
 - Explain Reason for Exemption: A transfer of title to a trust without consideration with a certificate of trust.

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 therein. 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 June Gail Miller Capacity _____ Grantor _____
 Signature _____ Capacity _____ Grantee _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: June Gail Miller Trustee
 Address: 2988 Hot Springs Rd.
 City: Minden
 State: Nevada Zip: 89423

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: June Gail Miller Trustee
 Address: 2988 Hot Springs Rd.
 City: Minden
 State: Nevada Zip: 89423

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)
 Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State _____ Zip _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)