

DOUGLAS COUNTY, NV

Rec:\$40.00

Total:\$40.00

A+ DOCUMENTS

2021-973747

09/09/2021 10:22 AM

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THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT DOES NOT CONTAIN A SOCIAL SECURITY NUMBER PER NRS 239B.030. APN: 1419-26-412-012

Recording Requested by: Grantors, Timothy and Judith Farrell

When Recorded Mail Document and tax statements to: FARRELL FAMILY TRUST P.O. Box 1011 Genoa, NV 89411



KAREN ELLISON, RECORDER

E07

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

QUIT CLAIM DEED

TIMOTHY D. FARRELL & JUDITH R. FARRELL, without consideration, do hereby remise, release and forever quitclaim all right, title and interest to the FARRELL FAMILY TRUST, TIMOTHY D. FARRELL and JUDITH R. FARRELL, as Trustees, the following described real property situated in Douglas County, State of Nevada, bounded and described as:

LOT 11 IN BLOCK B, AS SHOWN ON THE FINAL SUBDIVISION MAP, PLANNED UNIT DEVELOPMENT PD 05-001, MONTANA, PHASE 2C, 2D AND 2E, FILED FOR RECORD IN THE OFFICE OF THE DOUGLAS COUNTY RECORDER, STATE OF NEVADA, ON DECEMBER 17, 2007, IN BOOK 1207, PAGE 3697, AS DOCUMENT NO. 714941, OFFICIAL RECORDS.

Which has the address of: 437 Big Sky Trail.

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

WITNESS my hand this 7th day of September 2021.

[Signature of Timothy D. Farrell]
TIMOTHY D. FARRELL as Grantor

[Signature of Timothy D. Farrell]
TIMOTHY D. FARRELL as Trustee of the FARRELL FAMILY TRUST

[Signature of Judith R. Farrell]
JUDITH R. FARRELL as Grantor

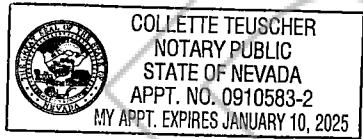
[Signature of Judith R. Farrell]
JUDITH R. FARRELL as Trustee of the FARRELL FAMILY TRUST

STATE OF NEVADA     )  
CARSON CITY         )

On this 7<sup>th</sup> day of September 2021 before me, a Notary Public, personally appeared TIMOTHY D. FARRELL and JUDITH R. FARRELL personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.

Collette Teuscher  
Notary Public



THIS ACKNOWLEDGMENT IS ATTACHED TO A QUIT CLAIM DEED  
DATED September 7, 2021

STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessors Parcel Number(s)  
 a) 1419-26-412-012  
 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 \_\_\_\_\_

<b>FOR RECORDERS OPTIONAL USE ONLY</b>	
DOCUMENT/INSTRUMENT #:	_____
BOOK _____	PAGE _____
DATE OF RECORDING:	_____
NOTES:	<u>Trust OK BC</u>

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

4. If Exemption Claimed:  
 a. Transfer Tax Exemption per NRS 375.090, Section # 7  
 b. Explain Reason for Exemption: A transfer of title to or from a trust without consideration if a Certificate of trust is presented at the time of transfer

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 [Signature] Capacity grantor-trustee \_\_\_\_\_  
 Signature Judith R. Farrell Capacity grantor-trustee \_\_\_\_\_

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

Print Name: Timothy and Judith Farrell  
 Address: P.O. Box 1011  
 City: Genoa  
 State: NV Zip: 89411

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

Print Name: Timothy and Judith Farrell-Trustees  
 Address: P.O. Box 1011  
 City: Genoa  
 State: NV Zip: 89411

**COMPANY/PERSON REQUESTING RECORDING**

(required if not the seller or buyer)

Print Name: A+ Documents Escrow # \_\_\_\_\_  
 Address: 411 W. Fourth Street, Suite 1  
 City: Carson City State: NV Zip: 89703