

APN# 1420-06-410-028

Recording Requested by/Mail to:

Name: WINSON H. HO

Address: 3645 Shawnee Dr

City/State/Zip: Carson City, NV 89705

Mail Tax Statements to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_



00142560202109743330070075

KAREN ELLISON, RECORDER

E03

Count Order

Title of Document (required)

----- (Only use if applicable) -----

The undersigned hereby affirms that the document submitted for recording  
DOES contain personal information as required by law: (check applicable)

Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

This document is being (re-)recorded to correct document # \_\_\_\_\_, and is correcting

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



1 Petition, the Court now finds as follows:

2 1. That said account is in all respects true and correct and that all acts and transactions  
3 of the Administrator of the Estate of MARY SUE INWOOD, and his attorney  
4 during the period of the account are accurately shown and should be approved. The  
5 account is complete and correct and should be approved as filed;

6 2. That MARY SUE INWOOD, died with a valid Last Will and Testament on 3<sup>rd</sup> day  
7 of June, 2014, in Douglas County, Nevada and that the Will was admitted into  
8 probate on the 3<sup>rd</sup> day of March, 2015, and that Letters Testamentary were also  
9 issued;

10 3. That on 3<sup>rd</sup> day of March, 2015, WINSON HO, was appointed by this Court as the  
11 Executor of the Estate of MARY SUE INWOOD herein and continues in such  
12 capacity;

13 4. That the *Notice of Hearing* was duly published on January 9, 16 and 23<sup>rd</sup> of 2015 as  
14 prescribed by law *Affidavits of Publication* setting forth such facts are on file in these  
15 proceedings. On July 22, 2015, a *Notice to Creditors*, by certified return receipt  
16 requested United States mail, was sent to all known interested persons or entities and  
17 filed with the Court herein on July 24, 2015. Further, that the *Notice to Creditors*  
18 was published on May 6<sup>th</sup>, 13<sup>th</sup> and 20<sup>th</sup>, 2015 as prescribed by law. The time for  
19 filing or presenting claims has expired and the estate is now in a condition to be  
20 closed.

21 5. That a final federal income tax return was filed on behalf of the estate by the  
22 Executor. The Estate received a refund of FIFTY DOLLARS and NO CENTS  
23 (\$50.00) that was deposited into the Estate's Greater Nevada checking account  
24 ending in xx8974.

25 ///

26 ///

27 ///

28



1 which are proper and submitted to the Executor.

2 B) WINSON HO, Executor, hereby waives any right to a commission,  
3 mileage costs, and/or expenses in this matter; and,

4 C) The residual of the Estate of MARY SUE INWOOD, shall be  
5 distributed by the Executor as follows:  
6

7 **I. PERSONAL PROPERTY TO BE DISTRIBUTED AS FOLLOWS:**

8 **A. CASH AND CASH EQUIVALENTS:**

- 9 1. **TO: WINSON HO:** United Federal Credit Union Platinum  
10 Plus Checking Account #....6027 at 100%. Approx. Bal.: \$201,141.52  
11 2. **TO: WINSON HO:** Greater Nevada Credit Union Account  
12 #....8974 at 100%. Approx. Bal.: \$210,039.99

13 **Coins**

14 **TO: WINSON H. HO:** No coins of collector value and no coins  
15 other loose change in the approximate value of various coins. \$ 40.00

16 **B. ITEMS OF PERSONAL PROPERTY TO WINSON HO:**

- 17 1. 1992 Chevrolet Pickup, VIN #2GCEC19KXN1104014,  
18 NV Title. Pursuant to NADA value.  
19 2. 1993 Nissan 240SX, VIN #JN1MS36P5PW302458,  
20 NV Title. Vehicle sold and money deposited into  
21 Greater Nevada Credit Union Account #....8974.  
22 Value \$2,209.00.  
23 3. 1960 ASVE Utility Trailer, VIN #2057NV72, NV.  
24 Value unknown.  
25 4. 1966 O'Day Sailboat, VIN #CFZ3992E0066H, NV.  
26 5. 1996 Boat Trailer, VIN #4FBBS118T1001306, CA.

27 **D. FUNDS TO BE DISTRIBUTED FOR ATTORNEYS FEES AND COSTS:**

- 28 1. **TO: MARK A. MARSH, ESQ.,** for attorney's fees and  
costs. \$ 12,244.00

**E. STATUTORY COMMISSION TO THE EXECUTOR:**

1. THE EXECUTOR, **WINSON HO,** WAIVES ANY RIGHT TO  
COMMISSIONS, MILEAGE COSTS AND EXPENSES. -\$ 0.00

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1 **II. REAL PROPERTY TO BE DISTRIBUTED AS FOLLOWS:**

2  
3 **MARITAL RESIDENCE LOCATED AT 3645 Shawnee Drive, Carson City, NV**  
4 **89705:**

5 a. It is hereby ordered, authorized and allowed that the Decedent's real property  
6 residence located in Douglas County, Nevada, with a mailing address of 3645  
7 Shawnee Dr, Carson City, Nevada, 89705, APN 1420-06-410-028, its  
8 attachments and appurtenances and encumbrances, loans or mortgages thereto,  
9 together with any right, title and interest, shall be transferred, conveyed or  
10 otherwise deeded 100% in its entirety subject to any legal encumbrances to  
11 **WINSON H. HO**. The Court finds that this conveyance to WINSON H. HO is  
12 not a "sale" within the meaning of NRS 148.220 and is not subject to the notice  
13 and public sale provisions therein.


14 **NOTE:** The Executor must file a certified copy of this Order with the county  
15 recorder of this county and with the county recorder of the county in which the  
16 real property, or any portion thereof, is located within TEN DAYS (10) after the  
17 entry of this order. The real property is identified as APN 1420-06-410-028  
18 located in Douglas County, Nevada.

19 5. That this Court retains jurisdiction over this Estate until the same shall be  
20 distributed and closed; that upon said Executor's filing of a supplemental  
21 accounting and report of distribution showing payment of all sums of money due from the  
22 Estate, and the delivery and Distribution of the monies, items and real property of the Estate  
23 in accordance with this *Order*, that a *Decree of Discharge* shall be entered and filed,  
24 discharging said Executor WINSON H. HO from all liability thereafter to be  
25 incurred.

26 DATED this 21 day of September, 2021.

27   
28 **DISTRICT COURT JUDGE**  
**CERTIFIED COPY**

The document to which this certificate is attached is a full, true and correct copy of the original in file and of record in my office.

5 DATE 09/21/2021  
BOBBIE R. WILLIAMS Clerk of Court  
of the State of Nevada, in and for the County of Douglas,  
By  Deputy

STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)  
 a) APN 1420-06-410-028  
 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'/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: \$ \_\_\_\_\_  
 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: 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 Winston H. Ho Capacity Grantor

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION  
(REQUIRED)

BUYER (GRANTEE) INFORMATION  
(REQUIRED)

Print Name: Winston H. Ho  
 Address: 2645 Shannon Dr  
 City: Carson City  
 State: NV Zip: 89705

Print Name: Sam  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

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/MICROFILMED)