

DOUGLAS COUNTY, NV 2021-977043
Rec:\$40.00
Total:\$40.00 11/15/2021 02:22 PM
ROBBINS & HOLDAWAY Pgs=3

RECORDING REQUESTED BY
DIANE E. ROBBINS

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:



KAREN ELLISON, RECORDER E07

Name Joyce A. Reed
Street Address 814 East La Denev Ct.
Ontario, CA 91764
City & State Zip

Title Order No. Escrow No.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Grant Deed

THE UNDERSIGNED GRANTOR (S) DECLARE (S)

APN: 1320-30-211-021

DOCUMENTARY TRANSFER TAX IS \$ NONE-R&T 11930 - Transfer into Trust

unincorporated area City of Minden

computed on full value of interest or property conveyed, or

computed on full value less value of liens or encumbrances remaining at time of sale, and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

JOYCE A. REED, an unmarried woman,

hereby GRANT(S) to

JOYCE A. REED, CRAIG B. REED, and TAMMIE A. GRACIANO, Trustees of THE REED FAMILY 2006 REVOCABLE TRUST, dated April 17, 2006

the following described real property in the City of Minden

County of ~~Douglas~~ Douglas, state of ~~California~~ Nevada

Lot 18, in Block E as shown on the Official Map of WESTWOOD VILLAGE UNIT 1, filed for record in the office of the County Recorder of Douglas County, Nevada, on October 5, 1979, in Book 1079, Page 440, as Document No. 37417, and Certificate of Amendment recorded July 14, 1980, in Book 780, Page 783, as Document No. 46166.

Commonly known as 840 Mahogany Drive, Minden, NV 89423.

Joyce A. Reed
JOYCE A. REED

Dated June 15, 2021

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 SAN BERNARDINO

SEE ATTACHED

On June 15, 2021 before me, BRENDA TEPICH
(here insert name and title of the officer)

, notary public, personally appeared JOYCE A. REED, 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

Signature [Signature]



(This area for official notarial seal)

MAIL TAX STATEMENTS TO PARTY SHOWN ON FOLLOWING LINE; IF NO PARTY SHOWN, MAIL AS DIRECTED ABOVE

Name

Street Address

City, State & Zip

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 1320-30-211-021
 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
 Other _____

FOR RECORDER'S OPTIONAL USE ONLY	
Book: _____	Page: _____
Date of Recording: _____	
Notes: <u>Trust DK 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 \$ _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 7
 b. Explain Reason for Exemption: Transfer to a trust without consideration

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 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 *Craig B. Reed* Capacity *Attorney*

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Joyce A. Reed
 Address: 814 East La Deney Ct.
 City: Ontario
 State: California Zip: 91764

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Joyce A. Reed, Craig B. Reed, and Tammie A. Graciano
 Address: 814 East La Deney Ct.
 City: Ontario
 State: California Zip: 91764

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: Diane E. Robbins Escrow #: _____
 Address: 201 West F Street
 City: Ontario State: California Zip: 91762