

1420-37-002-002

APN# 21-020-43

Recording Requested by/Mail to:

Name: Bertram

Address: 1025 Nobles Ct.

City/State/Zip: Minden NV 89423



00146863202109781990040041

KAREN ELLISON, RECORDER

E05

Mail Tax Statements to:

Name: BERTRAM

Address: 1025 Nobles Ct.

City/State/Zip: Minden NV 89423

NEVADA QUIT CLAIM DEED

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

This Document Was Prepared by:
PATTI BERTRAM

After Recording Please Return to:
PATTI BERTRAM
1025 Nobles Ct
Minden NV 89423

Reserved for Recording Purposes Only

NEVADA QUIT CLAIM DEED

This QUIT CLAIM DEED, made this 9th day of DECEMBER, 2021, by
BERTRAM, BRUCE L & PATTI A. whose address is
1025 Nobles Ct, MINDEN NV 89423 hereinafter called the "Grantor(s)", to
JAMES D. MORRIS, whose address is
26389 VIA CANON hereinafter called the "Grantee(s):"
CADISTRANO BEACH CA 92624

Witnesseth: That the Grantor, for and in consideration of the sum of 0 NONE
(\$ 0) and other valuable considerations, receipt whereof is hereby
acknowledged, hereby grants, bargains, sells, aliens, remises, releases, and quitclaims unto
the Grantee(s), all that certain land situated in Douglas County, Nevada, described as
follows (enter legal description of property):

PARCEL 2B PARCEL MAP#2
WEST 1/2 OF SECTION 32 TOWNSHIP 14 NORTH
RANGE 20 EAST DOC 121205
TOGETHER WITH ALL SURFACE WATER RIGHTS

Also known as street name and number: 1025 Nobles Ct.



Bruce L Bertram
Grantor

BRUCE L BERTRAM
Printed Name

1025 Nobles Ct MINDEN
Address (City, State, and ZIP) 89423

775) 790-0411
Phone Number

Patti A Bertram
Grantor

PATTI A BERTRAM
Printed Name

1025 Nobles Ct MINDEN
Address (City, State, and ZIP) 89423

775) 267-7295
Phone Number

IN WITNESS THEREOF,

Witness

Address (City, State, and ZIP)

Printed Name

Phone Number

[Can be signed by either Witness or Notary Public – per NRS 111.115]

STATE OF NEVADA)

COUNTY OF Douglas) ss:

The foregoing instrument was acknowledged before me, Donna S Kruger, a
notary public in and for the state of Nevada by Bruce L + Patti A on
the 9th day of December, 2021. Bertram

Donna S Kruger
NOTARY PUBLIC

My commission expires 9-17-2024



[NOTARY SEAL]



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1420 32-002-002
 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 _____

| 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 # 5
 b. Explain Reason for Exemption: TRANSFER TO SON

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 Kath Bertran Capacity grantor

Signature g Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: PATTI A BERTRAN
 Address: 1025 Nobles Ct
 City: Minden
 State: NV Zip: 89403

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: JAMES D MORRIS
 Address: 26389 Via Canon
 City: Capistrano Beach
 State: CA Zip: 92624

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)