DOUGLAS COUNTY, NV

2021-978544

RPTT:\$0.00 Rec:\$40.00 \$40.00

Pgs=2

12/17/2021 09:20 AM

FIRST CENTENNIAL - RENO (MAIN OFFICE)

KAREN ELLISON, RECORDER

E05

APN: 1418-34-211-034

R.P.T.T.: \$0.00

Escrow No.: 21023010-DR When Recorded Return To:

Jillian Grace Murray and Trevor John Murray

P O Box 10031

Zephyr Cove, NV 89448

Mail Tax Statements to: Jillian Grace Murray and Trevor John Murray P O Box 10031 Zephyr Cove, NV 89448

SPACE ABOVE FOR RECORDER'S USE

## DEED

THIS INDENTURE WITNESSETH: That for valuable consideration, the receipt of which is hereby acknowledged, Trevor John Murray, a Married Man, spouse of the grantee herein, do(es) hereby Grant, Bargain Sell and convey to Jillian Grace Murray , A Married woman as her sole and separate property all that real property situate in the County of Douglas, State of Nevada, described as follows:

Lot 29, of Lakeridge Estates, Phase 2, according to the map thereof, filed in the Office of the County Recorder of Douglas County, Nevada, on June 13th, 1957, as Document No. 12301.

Assessors Parcel No.: 1418-34-211-034

It is the intent of Grantor herein to divest Himself of any right, title and interest in and to the above described real property including any community property interest.

TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging to in anywise appertaining.



| Page 2 of the Deed (signature page). Escrow No.: 21023010-DR  | ^                       |
|---|-------------------------|
| Dated this 13 day of December, 2021.  |                         |
|   | \ \                     |
| Trevor John Murray  | \ \                     |
|   |                         |
|   |                         |
| STATE OF NEVADA   |                         |
| COUNTY OF Douglas   |                         |
| This instrument was acknowledged before me on this Biday of December TVEVOY John Mulway                     | , 20 <u>21</u> , by<br> |
| GusaVocelle   |                         |
| Notary Public   |                         |
|   |                         |
| LISA VOCELKA  Notary Public-State of Nevada  Appointment No. 10-2014-5  My Appointment Expires May 31, 2022 |                         |
|   |                         |
|   |                         |
|   |                         |

| 1.   | Assesso                                   | ON OF VA<br>or Parcel Nur<br>-211-034          | mber(s                            |   |  |  |  |   |
|--|---|--|-----------------------------------|---|--|--|--|---|
| 2.   | Type of                                   | Property:                                      |                                   |   |  | FOR RE   | CORDER'S OPT   | IONAL USE ONLY  |
| a)   | ☐ Vaca                                    | ent Land                                       | b)                                | Sgl. Fam. R   | esidence                                     |  |  | / /   |
| c)   | ☐ Cond                                    | do/Twnhse                                      | d)                                | ☐ 2-4 Plex  |  | Docume   | ent/Instrument No  | ).i   |
| e)   | ☐ Apt.                                    | Bldg.  | f)                                | ☐ Comm'l/Ind'l  |  | Book _   |  | Page  |
| g)   |   |  | h)                                | ☐ Mobile Hom  | е  | Date of  | Recording:   |   |
|  | ☐ Othe                                    | er:  | <del></del>                       |   |  | Notes:   |  |   |
| 3. a   | a. Total                                  | Value/Sale F                                   | ⊃rice c                           | of Property:  |  |  | \$   |   |
|  |   |  |                                   | sure Only (value o  | f property)                                  |  | \$   |   |
| c  | . Transi                                  | fer Tax Value                                  | 2:                                |   |  |  | \$   |   |
| C  | l. Real l                                 | Property Tra                                   | nsfer '                           | Tax Due:  | 1  |  | \$0  |   |
| 4.   | IF EXEN                                   | IPTION CLA                                     | IMED                              | :   |  |  | / /  |   |
|  | a. Trans                                  | sfer Tax Exe                                   | mption                            | n, per NRS 375.09   | 00, Section:                                 | 5  | / /  |   |
|  | b. Expla                                  | ain Reason f                                   | or Exe                            | mption: 1st degre   | e consang                                    | uinity or a                                      | affinity - spouses   |   |
|  |   |  |                                   | e Being Transferr   | 1796   | 7  |  |   |
| 375.1<br>suppo<br>partie<br>result                 | 10, that orted by as agree tin a per      | the information the disallow                   | ation prion if or<br>vance of the | provided is correct<br>called upon to subtool<br>of any claimed eat<br>tax due plus inter | ot to the be<br>estantiate the<br>estat 1% p | est of the<br>e informa<br>r other d<br>er month | eir information a<br>ation provided he<br>etermination of a<br>. Pursuant to NI                                    | IRS 375.060 and NRS and belief, and can be rein. Furthermore, the additional tax due, may RS 375.030, the Buyer |
|  |   |  | y and                             | severally liable t  | or any addi                                  | tional ar  | nount owed.  |   |
| Sign   | ature: 💄                                  |  | y and                             | severally liable f  | or any add                                   | tional ar  |  | Grantor   |
| •  | nature: _<br>nature                       |  | y and                             | severally liable f  | or any add                                   | tional ar  | ~ /  |   |
| Sign   | nature<br>ER (GR                          | ANTOR) INFREQUIRED)                            |                                   |   | $\rightarrow$                                | YER (GR  | Capacity:  | Grantee   |
| Sign   | nature<br>ER (GR                          |  |                                   |   | $\rightarrow$                                | YER (GR  | Capacity:  Capacity:  ANTEE) INFORM  | Grantee<br>IATION   |
| Sigr<br>SELL                                       | ER (GR<br>(F                              |  | ORM                               | ATION   | BUY  | YER (GR  | Capacity:  Capacity:  ANTEE) INFORM REQUIRED)  | Grantee<br>IATION   |
| Sigr<br>SELL<br>Prin                               | ER (GR<br>(F                              | REQUIRED)                                      | ORM.                              | ATION   | BU'  | YER (GR.   | Capacity:  Capacity:  ANTEE) INFORM REQUIRED)  | Grantee<br>IATION   |
| Sigr<br>SELL<br>Prin                               | ER (GR<br>(F<br>t Name:<br>ress:          | REQUIRED)  Trevor John                         | FORM.                             | ATION   | BU'  | YER (GR.   | Capacity:  Capacity:  ANTEE) INFORM (REQUIRED)  Jillian Grace Mun  | Grantee<br>IATION<br>rray   |
| Sigr<br>SELL<br>Prin<br>Add                        | ER (GR.<br>(F<br>t Name:<br>ress:         | Trevor Johr P O Box 10                         | FORM.                             | ATION   | BU'<br>Prin<br>Add                           | YER (GR.) t Name:                                | Capacity:  Capacity:  ANTEE) INFORM REQUIRED)  Jillian Grace Multiple P O Box 10031                                | Grantee<br>IATION   |
| Sigr<br>SELL<br>Prin<br>Add<br>City<br>Stat        | t Name: ress:                             | Trevor John P O Box 10 Zephyr Cov              | ORM. O Murr                       | ATION ay  | BUY<br>Prin<br>Add<br>City<br>Stat           | t Name:  | Capacity:  Capacity:  ANTEE) INFORM REQUIRED)  Jillian Grace Mun P O Box 10031 Zephyr Cove NV                      | Grantee<br>IATION<br>rray   |
| Sigr<br>SELI<br>Prin<br>Add<br>City<br>Stat        | t Name: ress:                             | Trevor John P O Box 10 Zephyr Cov NV PERSON RE | ORM. OMUTT                        | ATION  ay  Zip: 89448   | BUY Prin Add City Stat                       | t Name:<br>ress:<br>:<br>ee:                     | Capacity:  Capacity:  ANTEE) INFORM REQUIRED)  Jillian Grace Mun P O Box 10031 Zephyr Cove NV                      | Grantee<br>IATION<br>rray   |
| Sigr<br>SELI<br>Prin<br>Add<br>City<br>Stat<br>COI | ER (GR. (F<br>t Name:<br>ress:<br>:<br>e: | Trevor John P O Box 10 Zephyr Cov NV PERSON RE | OMUTT<br>031<br>/e                | ATION  ATION  Zip: 89448  STING RECORDING  II Title Company of                            | BUY Prin Add City Stat                       | t Name:<br>ress:<br>:<br>ee:                     | Capacity:  Capacity:  ANTEE) INFORM (REQUIRED)  Jillian Grace Mun P O Box 10031  Zephyr Cove  NV  seller or buyer) | Grantee<br>IATION<br>rray   |

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED