



00149155202209802520040044

KAREN ELLISON, RECORDER

E07

APN: 1022-02-000-002

Recorded at the Request of:
HERITAGE LAW
1625 Highway 88, Suite 304
Minden, Nevada 89423

Mail Future Tax Statements To:
JOHN W. COGHLAN, Trustee
1011 Bald Mountain Avenue
Wellington, NV 89444

The undersigned hereby affirms that this document submitted for recording does not contain any personal information and/or social security number of any person.

QUITCLAIM DEED

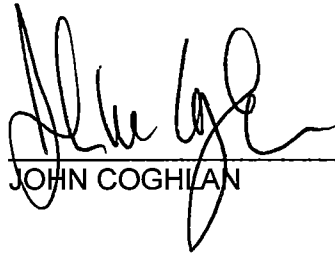
FOR NO CONSIDERATION, JOHN COGHLAN, a single man, does hereby remise, release, and forever quitclaim and transfer all interest in 1011 Bald Mountain Avenue, Wellington, Douglas County, Nevada, APN 1022-02-000-002, to JOHN W. COGHLAN, Trustee of the *John Coghlan Living Trust, dated January 14, 2022*, and any amendments thereto, the real property situated in the County of Douglas, State of Nevada, more precisely described as:

**SEE LEGAL DESCRIPTION ATTACHED HERETO AS EXHIBIT "A" AND MADE A PART
HEREOF**

Pursuant to NRS 111.312, the above legal description previously appeared in a Grant, Bargain and Sale Deed recorded on April 13, 2016, as Document No. 2016-879339.

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


Dated: January 14, 2022.



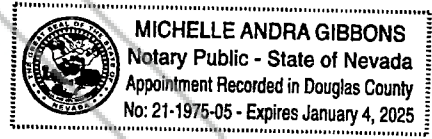
JOHN COGHLAN

STATE OF NEVADA)
 : ss.
COUNTY OF DOUGLAS)

On January 14, 2022, before me, a Notary Public, personally appeared JOHN COGHLAN, personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to this instrument, and acknowledged that he and she executed it.



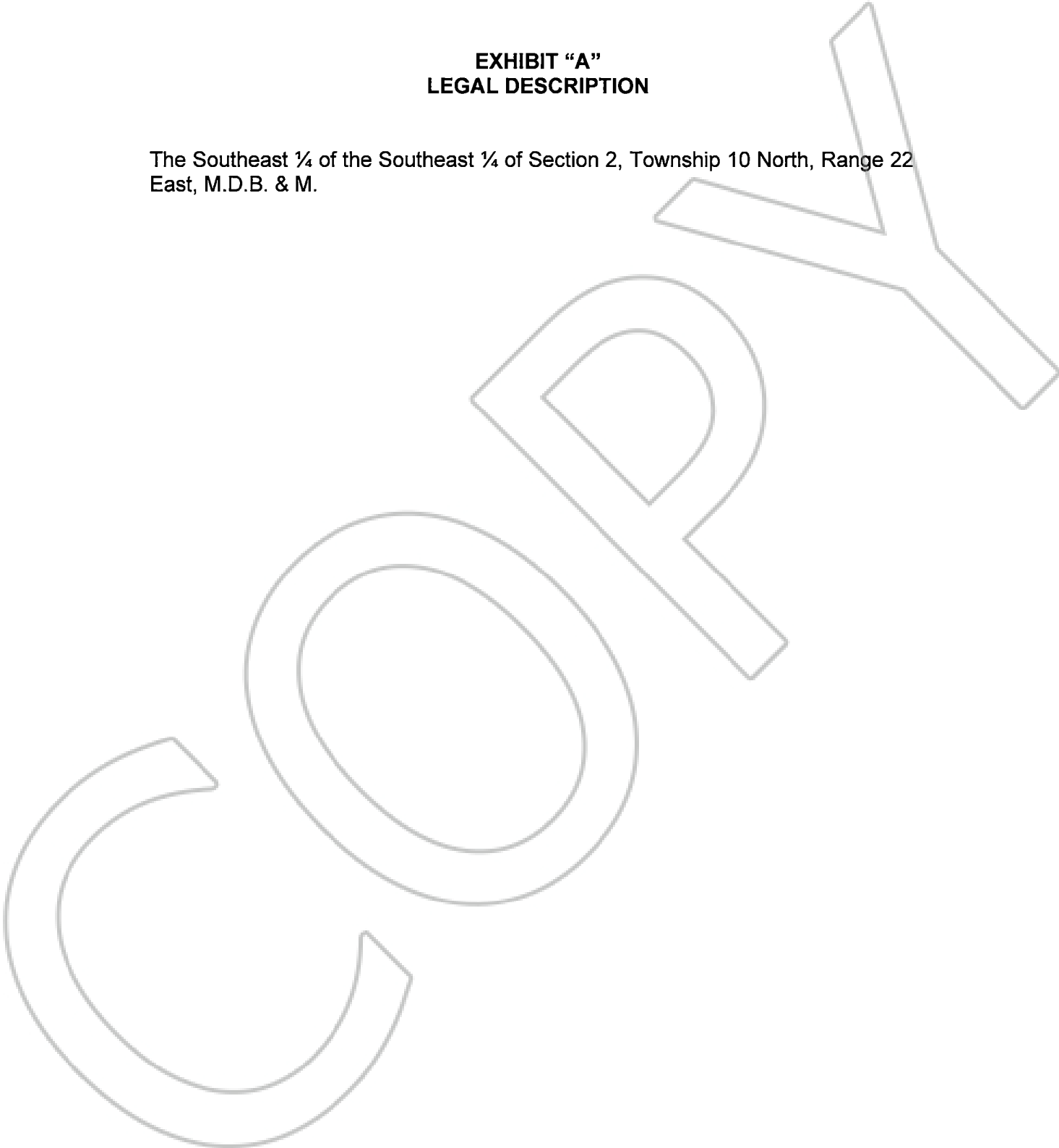
Notary Public



APN: 1022-02-000-002

**EXHIBIT "A"
LEGAL DESCRIPTION**

The Southeast ¼ of the Southeast ¼ of Section 2, Township 10 North, Range 22 East, M.D.B. & M.



**State of Nevada
Declaration of Value**

FOR RECORDER'S OPTIONAL USE ONLY	
Document/Instrument #	_____
Book: _____	Page: _____
Date of Recording:	_____
Notes:	<i>Trust OK - J</i>

1. Assessor Parcel Number(s)
a) 1022-02-000-002
b) _____
c) _____
d) _____

- 2 Type of Property:
- | | |
|--|---|
| a) <input type="checkbox"/> Vacant Land | b) <input checked="" type="checkbox"/> Single Fam. Res. |
| c) <input type="checkbox"/> Condo/Twnhse | d) <input type="checkbox"/> 2-4 Plex |
| e) <input type="checkbox"/> Apt. Bldg. | f) <input type="checkbox"/> Comm'l/Ind'l |
| g) <input type="checkbox"/> Agricultural | h) <input type="checkbox"/> Mobile Home |
| i) <input type="checkbox"/> Other _____ | |

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: Transfer to Trust without consideration
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 therein. Furthermore, the 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: *John W Coghlan* Capacity: Grantor
Signature: *John W Coghlan* Capacity: Grantee

SELLER (GRANTOR) INFORMATION - REQUIRED
Name: John Coghlan
Address: 1101 Bald Mountain Avenue
City, State, ZIP: Wellington, NV 89444

BUYER (GRANTEE) INFORMATION - REQUIRED
Name: John W. Coghlan, TTEE of the John Coghlan Living Trust U/D/T 1/14/2022
Address: 1101 Bald Mountain Avenue
City, State, ZIP: Wellington, NV 89444

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)
Print Name: HERITAGE LAW Escrow # _____
Address: 1625 Highway 88, Suite 304
City, State, ZIP: Minden, NV 89423
(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)