

APN: 1320-29-212-004



KAREN ELLISON, RECORDER E10

**Prepared By:**  
Carole Jean Ojanpera  
1725 Lantana Drive  
Minden, Nevada 89423-5103

**After Recording Return To:**  
Carole Jean Ojanpera  
1725 Lantana Drive  
Minden, Nevada 89423-5103

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**DEED UPON DEATH**

I, Carole Jean Ojanpera, a single person and **GRANTOR**, hereby convey to my friend Philip John Bump, NDL# [REDACTED] 3309, effective upon my death, all my interest in and with first right of purchase of my real property listed below [currently in a Reverse Mortgage through AAG] commonly known as 1725 Lantana Drive, Town of Minden, County of Douglas, State of Nevada and more particularly described as:

Lot 101, Block D, as set forth in the Map of WINHAVEN, UNIT NO. 1, a planned Unit Development, filed in the Office of the County Recorder of Douglas County, State of Nevada, on January 13, 1989, as Document No. 194373. APN: 1320-29-212-04, together with all improvements, tenements, hereditaments, and appurtenances, including easements and water rights, in any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR AND THE FULL AMOUNT OF THE MORTGAGE WITH AAG IS PAID IN FULL. THIS DEED REVOKES ALL PRIOR DEED UPON DEATH FILINGS WHICH CONVEY THE SAME REAL PROPERTY,

REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTOR IN THE SAME REAL PROPERTY.

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

Tax Parcel Number: APN: 132-29-212-004

**Mail Tax Statement to:**

Carole J. Ojanpera  
1725 Lantana Drive  
Minden, Nevada 89423-5103

Grantor Signature and Notary for quit Claim Deed regarding 1725 Lantana Drive, Minden, Nevada.

Grantor Signature: Carole Jean Ojanpera (Carole Jean Ojanpera)

Dated: 11/28, 2022

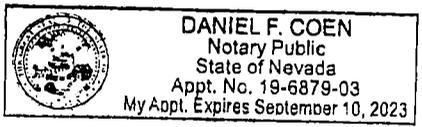
STATE OF NEVADA, County of Douglas, ss:

This instrument was acknowledged before me on this 28 day of JAN, 2022, by Carole Jean Ojanpera.

[Signature]

Notary Public

My commission expires 09/10/2023



STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)  
 a) 1320-29-212-004  
 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 # 10  
 b. Explain Reason for Exemption: Deed Upon Death

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 Carole Jean Ojanpera Capacity Grantor

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

**SELLER (GRANTOR) INFORMATION (REQUIRED)**  
 Print Name: Carole Jean Ojanpera  
 Address: 1725 Lantana Dr  
 City: Minden  
 State: NV Zip: 89423

**BUYER (GRANTEE) INFORMATION (REQUIRED)**  
 Print Name: Same  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

**COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer)**  
 Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_