DOUGLAS COUNTY, NV

RPTT:\$0.00 Rec:\$40.00

2022-981391

\$40.00

Pgs=2

02/18/2022 10:46 AM

FIRST AMERICAN TITLE MINDEN

KAREN ELLISON, RECORDER

E05

A.P.N.:

1419-26-410-005

File No:

143-2645869 (et)

When Recorded Return and Send Tax Statements To: Joanna V. Giargiari PO Box 10473 Zephyr Cove NV 89448

R.P.T.T.: \$0.00 Exempt #5

## QUITCLAIM DEED

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

## Robert P. Giargiari, spouse of grantee

do(es) hereby RELEASE AND FOREVER QUITCLAIM to

## Joanna V. Giargiari a married woman as her sole and separate property

all the right, title, and interest of the undersigned in and to the real property situate in the County of **Douglas**, State of **Nevada**, described as follows:

LOT 27, BLOCK C, OF THE FINAL SUBDIVISION MAP A PLANNED DEVELOPMENT PD 00-16/LDA 02-008 FOR CANYON CREEK MEADOWS PHASE 1, FILED IN THE OFFICE OF THE DOUGLAS COUNTY RECORDER ON FEBRUARY 11, 2004, IN BOOK 204, AT PAGE 4470, AS DOCUMENT NO. 604356.

"It is the express intent of the grantor, being the spouse of the grantee, to convey all right, title and interest of the grantor, community or otherwise, in and to the herein described property to the grantee as his/her sole and separate property."

Robert P. Giargiari Date

| STATE OF  | NEVADA  | )    |
|-----------|---------|------|
|           |         | :SS. |
| COUNTY OF | DOUGLAS | )    |

This instrument was acknowledged before me on this:

By: Robert P. Giargiari

Notary Public
(My commission expires: June 11, 2024)

DENISE JO ARTHUR
Notary Public. State of Nevada
Appointment No. 20-3052-01
My Appt. Expires Jun 11, 2024

## STATE OF NEVADA DECLARATION OF VALUE

| 1.  | Assessor Parcel Number(s)  | \ \   |  |  |
|---|--|---|--|--|
| a)_   | 1419-26-410-005  | \ \   |  |  |
| p)  |  | \ \   |  |  |
| c)_<br>d)_  |  | \ \   |  |  |
| u)_   |  | \ \   |  |  |
| 2.  | Type of Property   |   |  |  |
| a)  | $oxedsymbol{oxed}$ Vacant Land b) $oxedsymbol{oxed}$ Single Fam. Res   | FOR RECORDERS OPTIONAL USE                  |  |  |
| c)  | Condo/Twnhse d) 2-4 Plex   | Book Page:                                  |  |  |
| e)  | Apt. Bldg. f) Comm'l/Ind'l   | Date of Recording:                          |  |  |
| g)  | Agricultural h) Mobile Home  | Notes:                                      |  |  |
| i)  | Other  |   |  |  |
| 3.  | a) Total Value/Sales Price of Property:  | \$0.00                                      |  |  |
|   | b) Deed in Lieu of Foreclosure Only (value of p  | roperty) ( \$ )                             |  |  |
|   | c) Transfer Tax Value:   | \$0.00                                      |  |  |
|   | d) Real Property Transfer Tax Due  | \$0.00                                      |  |  |
| 4.  | If Exemption Claimed:  |   |  |  |
|   | a. Transfer Tax Exemption, per 375.090, Section  | on: #5                                      |  |  |
|   | b. Explain reason for exemption: Deed to rem   | ove spouse not on title with no             |  |  |
| _   | 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 |  |   |  |  |
| info  | rmation and belief, and can be supported by do   | ocumentation if called upon to substantiate |  |  |
| tne   | information provided herein. Furthermore, the med exemption, or other determination of additional and actions. | ne parties agree that disallowance of any   |  |  |
| 10%   | 6 of the tax due plus interest at 1% per month.<br>er shall be jointly and severally liable for any add        | Pursuant to NRS 375.030, the Buyer and      |  |  |
| 796   | 21 71 -  | ditional amount owed.                       |  |  |
| Sign  | nature:  | Capacity: Transe                            |  |  |
| _   | nature:  | Capacity: <u>Frentor</u>                    |  |  |
|   | SELLER (GRANTOR) INFORMATION (REQUIRED)  | BUYER (GRANTEE) INFORMATION<br>(REQUIRED)   |  |  |
| Prin  | t Name: Joanna V. Giargiari  | Print Name: Robert P. Giargiari             |  |  |
| Add   | ress: PO Box 10473   | Address: PO Box 10473                       |  |  |
| City  | : Zephyr Cove  | City: Zephyr Cove                           |  |  |
| Stat  |  | State: NV Zip: 89448                        |  |  |
| COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)   |  |   |  |  |
| Prin  | First American Title Insurance t Name: Company   | File Number: 143-2645869 et/ et             |  |  |
|   | ress 1663 US Highway 395, Suite 101  | THE HAITBELL ITS ZOTSOUS EU EL              |  |  |
| City  | : Minden   | State: <u>NV</u> Zip: <u>89423</u>          |  |  |
| (AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)  |  |   |  |  |