



KAREN ELLISON, RECORDER

E03

Quitclaim Deed

RECORDING REQUESTED BY Sheryl Marie Wing

AND WHEN RECORDED MAIL TO:

711 Paula PL, Grantee(s)
Gardnerville, NV 89410

Consideration: \$ 0.00

Property Transfer Tax: \$ _____

Assessor's Parcel No.: 1220-24-601-017

PREPARED BY: Sheryl Marie Wing certifies herein that he or she has prepared this Deed.

Sheryl Christian
Signature of Preparer

4/25/2022
Date of Preparation

Sheryl Christian
Printed Name of Preparer

THIS QUITCLAIM DEED, executed on _____ in the County of Douglas, State of Nevada

by Grantor(s), Sheryl Marie Christian,
whose post office address is PO Box 424, Minden Nevada 89423,

to Grantee(s), Sheryl Marie Wing,
whose post office address is 711 Paula PL, Gardnerville Nevada 89410,

WITNESSETH, that the said Grantor(s), Sheryl Marie Christian,
for good consideration and for the sum of 0.00

(\$0.00) paid by the said Grantee(s), the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said Grantee(s) forever, all the right, title interest

and claim which the said Grantor(s) have in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Douglas , State of Nevada and more specifically described as set forth in EXHIBIT "A" to this Quitclaim Deed, which is attached hereto and incorporated herein by reference.

IN WITNESS WHEREOF, the said Grantor(s) has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

GRANTOR(S):

Sheryl Wing _____
Signature of Grantor *FRA - Sheryl Christian* Signature of Second Grantor (if applicable)
Sheryl Wing _____
Print Name of Grantor Print Name of Second Grantor (if applicable)

Signature of First Witness to Grantor(s) Signature of Second Witness to Grantor(s)

Print Name of First Witness to Grantor(s) Print Name of Second Witness to Grantor(s)

GRANTEE(S):

Signature of Grantee Signature of Second Grantee (if applicable)

Print Name of Grantee Print Name of Second Grantee (if applicable)

Signature of First Witness to Grantee(s) Signature of Second Witness to Grantee(s)

Print Name of First Witness to Grantee(s) Print Name of Second Witness to Grantee(s)

NOTARY ACKNOWLEDGMENT

State of Nevada

County of Douglas

On APRIL 25, 2022, before me, Jodi O Stovall, a notary public in and for said state, personally appeared, SHERYL MARIE WING - FKA SHERYL MARIE CHRISTIAN who are known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.

Jodi O Stovall
Signature of Notary

Affiant Known _____ Produced ID X

Type of ID DL

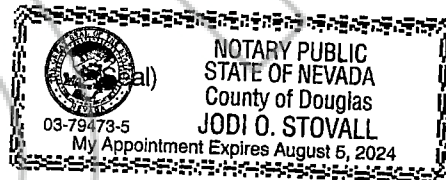


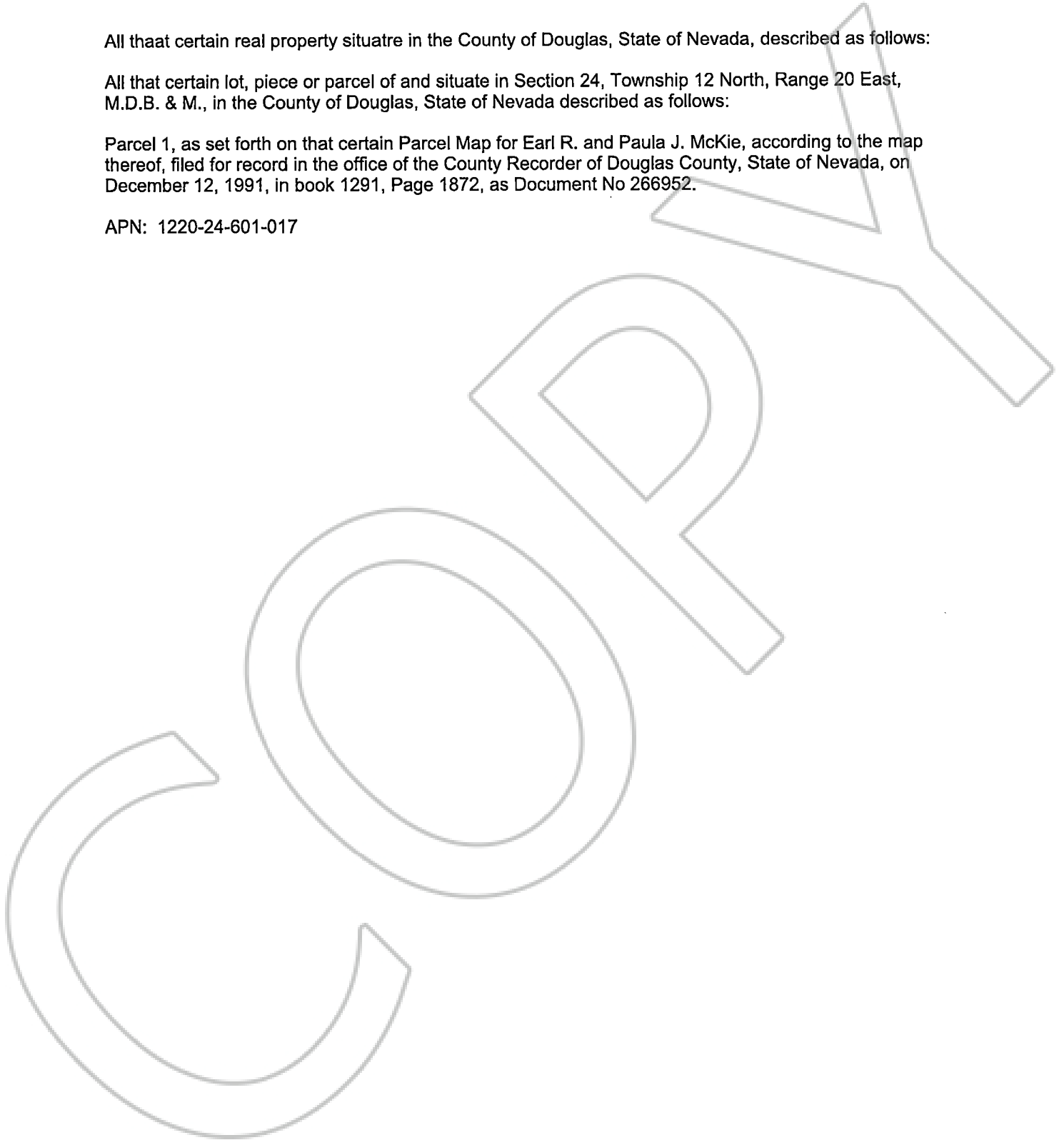
Exhibit "A"

All that certain real property situate in the County of Douglas, State of Nevada, described as follows:

All that certain lot, piece or parcel of and situate in Section 24, Township 12 North, Range 20 East, M.D.B. & M., in the County of Douglas, State of Nevada described as follows:

Parcel 1, as set forth on that certain Parcel Map for Earl R. and Paula J. McKie, according to the map thereof, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on December 12, 1991, in book 1291, Page 1872, as Document No 266952.

APN: 1220-24-601-017



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1220-24-601-017
 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: \$ 705,000.00
 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 # 3
 b. Explain Reason for Exemption: change to Madam name

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 Sheryl Wing Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Sheryl Christian
 Address: 711 Paula Pl
 City: Gardnerville
 State: NV Zip: 89410

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Sheryl Wing
 Address: 711 Paula Pl
 City: Gardnerville
 State: NV Zip: 89410

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)