

THE UNDERSIGNED HEREBY AFFIRMS THAT
THIS DOCUMENT DOES NOT CONTAIN A
SOCIAL SECURITY NUMBER PER NRS 239B.030.
APN: 1220-21-810-011



KAREN ELLISON, RECORDER E07

Recording Requested by:
Grantors, David M. Kirby & Lynda Moritz Kirby

When Recorded Mail Document and tax statements to:
KIRBY FAMILY TRUST
620 Joette Drive
Gardnerville, NV 89460

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY
QUIT CLAIM DEED

We, DAVID M. KIRBY and LYNDA MORITZ KIRBY, husband and wife, as joint tenants with right of survivorship, without consideration, do hereby remise, release and forever quitclaim all right, title and interest to the KIRBY FAMILY TRUST, DAVID MICHAEL KIRBY and LYNDA MORITZ-KIRBY, as Trustees, the following described real property situated in Douglas County, State of Nevada, bounded and described as:

Lot 112, as shown on the map of GARDNERVILLE RANCHOS UNIT NO. 7, filed for record in the office of the county Recorder of Douglas County, Nevada on March 27, 1974, as Document No. 72456.

Which has the address of: 620 Joette Drive.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and any reversions, remainders, rents, issues or profits thereof.

WITNESS my hand this 22nd day of August 2022

David M. Kirby
DAVID M. KIRBY as Grantor

David Michael Kirby
DAVID MICHAEL KIRBY as Trustee of the Kirby Family Trust

Lynda Moritz Kirby
LYNDA MORITZ KIRBY as Grantor

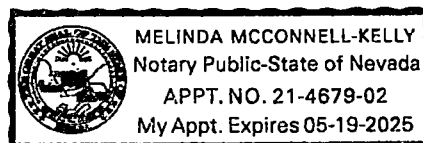
Lynda Moritz Kirby
LYNDA MORITZ-KIRBY as Trustee of the Kirby Family Trust

STATE OF NEVADA)
CARSON CITY)

On this 22nd day of August, 2022 before me, a Notary Public, personally appeared DAVID MICHAEL KIRBY and LYNDA MORITZ-KIRBY personally 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 capacity, 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.

Melinda McConnell-Kelly
Notary Public



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessors Parcel Number(s)
 a) 1220-21-810-011
 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	
DOCUMENT/INSTRUMENT #:	_____
BOOK _____	PAGE _____
DATE OF RECORDING: _____	
NOTES: <u>Verified Trust</u>	

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: A transfer of title to or from a trust without consideration if a Certificate of trust is presented at the time of transfer

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 David Kirby Capacity grantor-trustee _____

Signature Lynda Moritz Kirby Capacity grantor-trustee _____

**SELLER (GRANTOR) INFORMATION
(REQUIRED)**

Print Name: David Kirby & Lynda Moritz Kirby
 Address: 620 Joette Drive
 City: Gardnerville
 State: NV Zip: 89704

**BUYER (GRANTEE) INFORMATION
(REQUIRED)**

Print Name: David Kirby & Lynda Moritz-Kirby-Trustees
 Address: 620 Joette Drive
 City: Gardnerville
 State: NV Zip: 89704

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: A+ Documents, Inc. Escrow # _____

Address: 411 W. Fourth Street, Suite 1

City: Carson City State: NV Zip: 89703

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)