

APN: 1318-15-611-020

Recording Requested By:
Robert P. Huckaby, Attorney at Law



KAREN ELLISON, RECORDER

E07

When Recorded Mail To:
Barbara J. Smith
PO Box 1476
Zephyr Cove, NV 89448

Mail tax statements to Grantee as above address.

GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That BARBARA J. SMITH, a widow who acquired title as joint tenants with her deceased husband GLEN T. SMITH, as a gift for no consideration, does hereby Grant, Bargain, Sell and Convey

to BARBARA J. SMITH as Trustee of the SMITH FAMILY TRUST (created by a Trust Instrument dated June 15, 2022), and to the heirs and assigns of such Grantee forever,

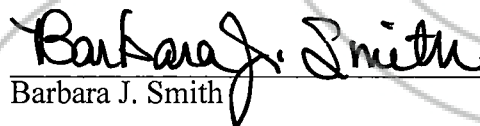
all that real property situated in the County of Douglas, State of Nevada, commonly known as 305 Seminole Way, Zephyr Cove, Nevada, more particularly described as

Lot 1, Block C, as shown on the Map of Round Hill Village Unit No. 4, filed for record in the Office of the Douglas County, Nevada Recorder on April 25, 1966, as Document No. 31837, Assessors Parcel No. 1318-15-611-020

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

I certify this document does not contain the social security number of any person.

Dated: June 15, 2022


Barbara J. Smith

APN: 1318-15-611-020

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA)
COUNTY OF EL DORADO)

SS.

On 06.15.2022 before me, Eric Martinez, Notary Public, personally appeared Barbara J. Smith who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) (s) are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that, by his/her/their signature(s) on the instrument, the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

Witness my hand and official seal.



Notary Public



STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 1318 - 15 - 011 - 020
- b) _____
- c) _____
- d) _____

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	_____
Book: _____	Page: _____
Date of Recording:	_____
Notes:	<u>Verified Trust</u>

2. Type of Property:

- | | | | |
|-----------------------------|--------------|-----------------------------|-----------------|
| a) <input type="checkbox"/> | Vacant Land | b) <input 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

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 7
- b. Explain Reason for Exemption: GIFT TO GRANTOR TRUST FOR 0 CONSIDERATION

5. Partial Interest: Percentage being transferred: _____ %

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 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 Barbara Smith Capacity GRANTOR/GRANTEE
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: BARBARA SMITH
 Address: P.O. BOX 1476
 City: ZEPHYR COVE
 State: NV Zip: 89448

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: BARBARA SMITH
 Address: P.O. BOX 1476
 City: ZEPHYR COVE
 State: NV Zip: 89448

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____
 Address: Robert P. Huckaby
 City: Attorney at Law
3330 Lake Tahoe Blvd. #10 State: _____ Zip: _____
South Lake Tahoe, CA 96150

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)