

DOUGLAS COUNTY, NV

2022-991735

RPTT:\$3.90 Rec:\$40.00

\$43.90 Pgs=4

11/18/2022 10:43 AM

TIMESHARE CLOSING SERVICES

KAREN ELLISON, RECORDER

APN: 1319.30-644-016 ptn

Recording requested by:
Irvine Dwain Oliver, Trustee
and when recorded mail to:
Timeshare Closing Services, LLC.
8545 Commodity Circle
Orlando, FL 32819
www.timeshareclosingservices.com
Escrow # 42072122001

Mail Tax Statements To: Shaynese Bowie, 95 - 390 Kuahelani Ave, 1041, Mililani, Hawaii
96789

Consideration: \$1000.00

Grant, Bargain, Sale Deed

THIS INDENTURE WITNESSETH: That for a valuable consideration, receipt of which is hereby acknowledged, Irvine Dwain Oliver, Trustee and Debra Dellasanta Oliver, Trustee of the Oliver 1987 Trust, dated 1/26/87, whose address is 215 Killdeer Ct., Foster City, California 94404, "Grantor"

Does hereby GRANT, BARGAIN, SELL AND CONVEY to: Shaynese Bowie, a Single Woman, whose address is 95 - 390 Kuahelani Ave, 1041, Mililani, Hawaii 96789, "Grantee"

The following real property located in the State of Nevada, County of Douglas, known as Ridge Tahoe, which is more particularly described in Exhibit "A" attached hereto and by this reference made a part hereof.

TO HAVE AND TO HOLD all and singular the premises, together with the appurtenances, unto the said Grantee and Grantee's assignees forever.

Document Date: 11-11-22

IN WITNESS WHEREOF, the Grantor has executed this conveyance the day and year first below written.

Kathleen T. Messing
Witness #1 Sign & Print Name:
Kathleen T. Messing

Irvine Dwain Oliver Trustee
Irvine Dwain Oliver, Trustee

Carlos Ronquillo-Ponce
Witness #2 Sign & Print Name:
Carlos Ronquillo-Ponce

Debra Dellasant Oliver Trustee
Debra Dellasant Oliver, Trustee

STATE OF _____) SS
COUNTY OF _____)

The foregoing instrument was acknowledged before me, undersigned notary by means of _____ physical presence or _____ Online Notarization

On this _____ day of _____, 20____ by Irvine Dwain Oliver, Trustee and Debra Dellasant Oliver, Trustee of the Oliver 1987 Trust, dated 1/26/87, personally known to me (or who has produced _____ as identification to be the person(s) whose name(s) is/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.

WITNESS my hand and official seal.

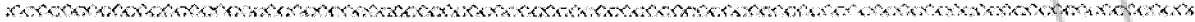
SIGNATURE: _____

My Commission Expires:

0007
know
11/11
20

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189



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 SAN MATEO)

On 11/11/2022 before me, SHALINI KALRA, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer

personally appeared IRVINE DWAIN OLIVER
Name(s) of Signer(s)
DEBRA DELLASANTA OLIVER

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/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.



Signature Shalini Kalra
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document
Title or Type of Document: GRANT, BARGAIN, SALE DEED
Document Date: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)
Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

2022
EAL

Exhibit "A"

File number: 42072122001

TOGETHER with the tenants, hereditaments and appurtenances thereunto belonging or appertaining and the reversion and reversions, remainder and remainders, rents, issues, and profits thereof;

SUBJECT TO any and all matters of record, including taxes, assessments, easements, oil and mineral reservations and leases, if any, rights of way, agreements and the Fourth Amended and Restated Declaration of Timeshare Covenants, Conditions and Restrictions dated January 30, 1984 and recorded February 14, 1984, as Document No. 96758, Book 284, Page 5202, Official Records of Douglas County, Nevada, as amended from time to time, and which Declaration is incorporated herein by this reference as if the same were fully set forth herein;

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements and improvements as follows:

(A) An undivided 1/106th interest in and to Lot 37 as shown on Tahoe Village Unit No. 3-13th Amended Map, recorded December 31, 1991, as Document No. 268097, rerecorded as Document No 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 39 through 80 (inclusive) and Units 141 through 204 (inclusive) as shown on that certain Condominium Plan recorded 7/14/88 as document no. 182057; and (B) Unit No. 053 as shown and defined on said Condominium Plan; together with those easements appurtenant thereto and such easements described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions, and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded 8/18/88, as Document No. 184461, as amended as described in the Recitation of Easements Affecting the Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest in Lot 37 only, for one week every other year in PRIME "Season" as defined in and in accordance with said Declarations.

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a. 1319-30-644-016 PTN
 b. _____
 c. _____
 d. _____

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'/Ind'l |
| g. <input type="checkbox"/> Agricultural | h. <input type="checkbox"/> Mobile Home |
| <input checked="" type="checkbox"/> Other <u>TIMESHARE</u> | |

FOR RECORDER'S OPTIONAL USE ONLY	
Book: _____	Page: _____
Date of Recording: _____	
Notes: _____	

3. a. Total Value/Sales Price of Property \$ 1,000.00
 b. Deed in Lieu of Foreclosure Only (value of property) (0.00)
 c. Transfer Tax Value: \$ 1,000.00
 d. Real Property Transfer Tax Due \$ 3.90

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section _____
 b. Explain Reason for Exemption: _____

5. Partial Interest: Percentage being transferred: 100.00 %

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 [Signature] Capacity AGENT

Signature [Signature] Capacity AGENT

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Oliver 1987 Trust
 Address: 215 Killdeer Ct
 City: Foster City
 State: CA Zip: 94404

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Shaynese Bowie
 Address: 95 - 390 Kuahelani Ave, 1041
 City: Mililani
 State: HI Zip: 96789

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: TIMESHARE CLOSING SERVICES Escrow #: 42072122001
 Address: 8545 COMMODITY CIRCLE
 City: ORLANDO State: FL Zip: 32819

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED