

**MAIL TAX STATEMENTS  
& RETURN TO:**

Janet E. Kent  
1429 Sugar Maple Avenue  
Gardnerville, Nevada 89410

APN: 1220 03 212 029



SHAWNYNE GARREN, RECORDER E10

**DEED UPON DEATH**

This document does not contain the personal information of any person as defined by NRS 603A.040.

JANET E. KENT as GRANTOR, hereby conveys to KATIE KENT STORKE, effective on my death, all right, title and interest in the real property commonly known as 1429 Sugar Maple Avenue, City of Gardnerville, County of Douglass, State of Nevada, more particularly described as:

**LOT 29 IN BLOCK E, AS SET FORTH ON FINAL SUBDIVISION MAP LDA 01-047, PLANNED UNIT DEVELOPMENT FOR ARBOR GARDENS, PHASE 3 FILED FOR RECORD IN THE OFFICE OF COUNTY RECORDER OF DOUGLASS, STATE OF NEVADA ON NOVEMBER 19, 2004 BOOK 1104, PAGE 9523, AS DOCUMENT NO. 629883.**

APN: 1220-03-212-029

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

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR. THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR THAT CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE,

REGARDELESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTOR IN THE SAME REAL PROPERTY.

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

IN WITNESS WHEREOF, GRANTOR has executed this Conveyance this

23 day of Sept 2023.

*Janet E. Kent*  
JANET E. KENT

STATE OF NEVADA            )  
  )ss.  
COUNTY OF DOUGLASS    )

On the 23 day of Sept 2023 before me, the undersigned Notary Public in and for said State, personally appeared JANET E. KENT, proven to me to be the person whose name is subscribed to the within Deed Upon Death and acknowledged to me that she executed the same.

*Maritza Espinoza*  
NOTARY PUBLIC



# STATE OF NEVADA DECLARATION OF VALUE

**1. Assessor Parcel Number (s)**

- a) 1220-03-212-029
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

**2. Type of Property:**

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

**FOR RECORDERS OPTIONAL USE ONLY**

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**3. Total Value/Sales Price of Property:**

\$ \_\_\_\_\_  
 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: 10
- b. Explain Reason for Exemption:  
DEED UPON DEATH TO GRANDDAUGHTER WITHOUT 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 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 *Janet E. Kent* Capacity OWNER  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION      BUYER (GRANTEE) INFORMATION**

(REQUIRED)	(REQUIRED)
Print Name: <u>JANET E. KENT</u>	Print Name: <u>KATIE KENT STORKE</u>
Address: <u>1429 Sugar Maple Ave.</u>	Address: <u>1240 Lasso Lane</u>
City: <u>Gardnerville</u>	City: <u>Gardnerville</u>
State: <u>NV</u> Zip: <u>89410</u>	State: <u>NV</u> Zip: <u>89410</u>

**COMPANY/PERSON REQUESTING RECORDING**

(REQUIRED IF NOT THE SELLER OR BUYER)  
 Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_