	Prepared By	Rec:\$40.00 Total:\$40.00	10/09/2023 04:16 PM
	Name: William Johnston	WILLIAM JOHNSTON	Pgs=3
	Address: 2263 Cal Lane		
	Gavanerville State: NV Zip Code: 89410	001736612023100129500	30035
	After Recording Return To	SHAWNYNE GARREN, RI	ECORDER E07
	Name: William Johnston Address: 2263 Cal Lanc	\	
	Gardnerville State: NV Zip Code: 89410		7 /
P	aval # 1221-05-001-078		
Space Above This Line for Recorder's Use			
NEVADA QUIT CLAIM DEED			
	STATE OF NEVADA		
	COUNTY OF Douglas		
KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of in hand paid to hand the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever for the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.  Grantor Angela Johnston  Page 1 of 2			UNC, William Elonnston, Sn. Lanc, In in or to levada to- Prings Estato. Whity State K 1006 as documented to the complete to th
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DOUGLAS COUNTY, NV

2023-1001295

aush	WEG			
Grantor's Signature	Grantor's Signature			
Angela Johnston	WILLIAM E JOHNSTON			
Grantor's Name 6052 AShbufon DV	Grantor's Name			
6052 ASNOUTON DV	2263 CAL LANE			
	Address			
San Jose, CA 95173 City, State & Zip	GARDNELVIUE NV 89410			
City, State & Zip	City, State & Zip			
	_ \ \			
STATE OF NEVADAV				
STATE OF NEVADA)				
COUNTY OF Bouglas )				
1 the undersioned a Noton Dublic is and for	anid County in anid State, horsely contify			
I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that William C. a Ovalla D. Schoolson whose names are signed to the foregoing				
instrument, and who is known to me, acknowled	edged before me on this day that, being			
informed of the contents of the instrument, they, executed the same voluntarily on the				
day the same bears date.				
Given under my hand this 9th day of October, 2023.				
	Maly			
NOTARY PUBLIC Notal	y Public /			
STATE OF NEVADA				
	ommission Expires:			
18-1058-5 My Appointment Expires March 2, 2026				
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## STATE OF NEVADA FOR RECORDERS OPTIONAL USE ONLY **DECLARATION OF VALUE** Document/Instrument#: Book: \_\_\_ 1. Assessor Parcel Number (s) (a) 1221-05-001-078 Date of Recording: 2. Type of Property: b) Single Fam Res. a) Vacant Land c) Condo/Twnhse 2-4 Plex e) Apt. Bldg. Comm'l/Ind'l g) Agricultural h) Mobile Home I) 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: 4. If Exemption Claimed: a. Transfer Tax Exemption, per NRS 375.090, Section: \_ b. Explain Reason for Exemption: Quitclaim to a trust 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. Capacity Signature BUYER (GRANTEE) INFORMATION The William EJOHNSHONSHO **SELLER (GRANTOR) INFORMATION** Print Name: and Angela Orsira Johnston Living Trust (REQUIRED) Print Name: N 2263 Cal Lanc Address: Address: Gardnewille City: City: State: State: COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER) Escrow # \_\_\_\_\_ Print Name: Address: State: \_\_\_\_ Zip: \_\_\_\_\_ City:

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)