

APN: N/A

Recording Requested by:

Robert Heindl
3588 Harvard Dr.
Carson City, NV 89703

After Recordation, return to and mail

Tax statements to:

Robert Heindl
3588 Harvard Dr.
Carson City, NV 89703



00175266202310026740030034

SHAWNYNE GARREN, RECORDER

SPACE ABOVE THIS LINE FOR RECORDER'S USE

WATER RIGHTS GRANT, BARGAIN, SALE DEED

THIS INDENTURE made and entered into this 28 day of November, 2023, between **ALEXANDER R. WAGNER AND MICHELE M. WAGNER CO-TRUSTEES of THE MAK FAMILY TRUST** dated the 7th day of October 199~~4~~, (hereinafter referred to collectively as "GRANTOR"), to **ROBERT J. HEINDL**, (hereinafter referred to as "GRANTEES"), does hereby grant, bargain and sell to Grantee, and to the heirs and assigns of such Grantee forever, as follows:

Releases all rights, title, and interest in and to any water rights appurtenant to Douglas County, Nevada parcel Number 1420-32-002-013 [Formerly identified as Parcel Number 21-020-31], which includes but is not limited to portions of the Nevada Division of Water Resources Permit Number 24696 / Certificate 8284, and portions of the Carson River Claim 127.

TOGETHER WITH, all singular, the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD, all and singular, the said water rights with the appurtenances, unto the said Grantee, and its successors and assigns forever.

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IN WITNESS WHEREOF, the Grantor has hereto executed this Water Rights Quitclaim Deed the day and year first above written.

The undersigned hereby affirms that this document submitted for recording does not contain the social security number of any person or persons (Per NRS 239B.303)

Michele M. Wagner

MICHELE M. WAGNER CO-TRUSTEE of THE MAK FAMILY TRUST

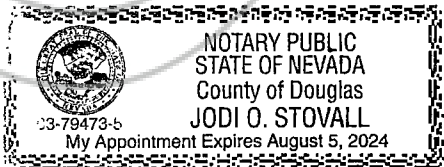
Alexander R. Wagner

ALEXANDER R. WAGNER CO-TRUSTEE of THE MAK FAMILY TRUST

STATE OF NEVADA)

COUNTY OF DOUGLAS) ss.

On this 28 day of November, 2023, *Michele M WAGNER* ~~Alexander R. Wagner~~ personally appeared before me, a Notary Public, and personally known (or proved) to me to be the persons whose names are subscribed to the foregoing instrument and who acknowledged to me that they executed the foregoing Water Rights Quitclaim Deed.



Jodi O. Stovall

NOTARY PUBLIC

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) _____
 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 Water Rights

FOR RECORDERS OPTIONAL USE ONLY	
BOOK _____	PAGE _____
DATE OF RECORDING: _____	
NOTES: _____	

3. Total Value/Sales Price of Property: \$ 60,000.00
 Deed in Lieu of Foreclosure Only (value of property) _____
 Transfer Tax Value: \$ 60,000.00
 Real Property Transfer Tax Due: \$ 234.00

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # _____
 b. Explain Reason for Exemption: _____

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 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 Macheli N Wagner Capacity Seller
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Alexander Wagner
 Address: 1283 RANCHO RD
 City: GARDNERVILLE
 State: NV Zip: 89460

Print Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____

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

Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____