DOUGLAS COUNTY, NV Rec:\$40.00

2023-996130

Total:\$40.00

05/02/2023 11:39 AM

DONNA & JOHN O'CONNOR

Pgs=3

When recorded, mail to:

Name

John O'Connor

Address

803 Wheeler Way

City/State/Zip: Gardnerville NV 89460

Parcel# 1220-16-810-067

SHAWNYNE GARREN, RECORDER

E10

Space above this line for Recorders use

BENEFICIARY DEED

(Transfer On Death Deed)

KNOW ALL MEN BY THESE PRESENTS

That I (we), John P. O'Connor and Don	na L. O'Connor.		
he undersigned grantor(s), effective upon i	my(our) death(s), do hereby	convey all of my(our) r	rights, title and interest in
	/ - /	\ \	
and to that certain real property situated in ,and legally described as:	Douglas County, State of	_Nevada	
and legally described as.)	
		/ /	
		/ /	
LOT 1, BLOCK G, AS SHOWN ON THE MAP	OF GARDERNVILLE RANCHO	S UNIT NO. 4,	
FILED IN THE OFFICE OF THE COUNTY REC		TY, NEVADA,	
ON APRIL 10, 1967, AS DOCUMENT NO. 359	314,		
	- / /		

including all improvements thereon, subject however to any and all liens, encumbrances and covenants of record, to primary beneficiary(ies), to wit: Christopher N. Kawaguchi, Ryan P. O'Connor, Kirsten A. Primrose, Shawna K. Bossart, Scott E. Pugh

provided however, that if my primary beneficiary(ies) shall not survive me(us), then said property is conveyed to my secondary beneficiary(ies), to wit: _

Printed Name of Grantor

ACKNOWLEDGMENT

State of Warda)	
County of Daglas	\ \
- 10 1	, 2023, before me, the undersigned
Notary Public, personally appeared Don D' Cornor	and Donna
known to me to be the individual(s) who executed the foregoing-i	nstrument and acknowledged the same to be
his(her)(their) free act and deed.	
My Commission Expires: 09/02/2024	
	Notary Public
	SHANNON RUSSELL Notary Public, State of Nevada Appointment No. 12-9537-5
	My Appt. Expires Sep 2, 2024

STATE OF NEVADA	
DECLARATION OF VALUE 1. Assessor Parcel Number(s)	
a) 1220 - 16 - 810 - 0 67	
b)	()
b)	\ \
d)	\ \
	\ \
2. Type of Property:	\ \
a) Vacant Land b) Single Fam. Res.	~ \ \
c) Condo/Twnhse d) 2-4 Plex	FOR RECORDERS OPTIONAL USE ONLY
e) Apt. Bldg f) Comm'l/Ind'l	BOOK PAGE
	DATE OF RECORDING:
	NOTES:
i) L Other	
- m. 1771 (0.1 p.: cp.	
3. Total Value/Sales Price of Property: Deed in Lieu of Foreclosure Only (value of property)	
Transfer Tax Value:	s
Real Property Transfer Tax Due:	\$
4. If Exemption Claimed:	\ / /
a. Transfer Tax Exemption per NRS 375.090, Sect	ion # <u>//</u>
b. Explain Reason for Exemption:	on death.
T. D. HAYA A. D. A. L. L. A. C. C. C.	
5. Partial Interest: Percentage being transferred:	%
The state of the s	alter of manipum, assessment to NIDS 275 060 and NIDS
The undersigned declares and acknowledges, under pen 375.110, that the information provided is correct to the l	alty of perjury, pursuant to INRS 3/3.000 and INRS
supported by documentation if called upon to substantia	to the information provided berein. 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	
result in a penalty of 1070 of the tax due plus interest at	170 per mondi.
Pursuant to NRS 37\$.030, the Buyer and Seller shall be jointly	and severally liable for any additional amount owed.
Signature Wima (Vonno)	Capacity () Wher
	<u>/</u> /
Signature	Capacity
GELLED (CD ANTOD) INFORMATION	BUYER (GRANTEE) INFORMATION
SELLER (GRANTOR) INFORMATION (REQUIRED)	(REQUIRED)
(REQUIRED)	(RECORED)
Print Name: Donna & John Olonnor Pri	int Name:
Address: 803 Wheeler Way Ad	Idress: 6 M
City: Cardnery, 1/e Ci	
	ate: Zip:
COMPANY/PERSON REQUESTING RECORDING	
(required if not the seller or buyer)	2
	Escrow #
Address: State:	Zip:
City: State: State: (AS A PUBLIC RECORD THIS FORM MA	
(Ab AT OBLIC ICCORD THIS FORM MI)	. LL LLOOMBERT MONIOTIEM /