



SHAWNYNE GARREN, RECORDER E05

APN: 1420-32-002-002

RECORDING REQUESTED BY:

Bruce L. Bertram & Patti A. Bertram
1025 Nobles Ct.
Minden, NV 89423

AFTER RECORDATION, RETURN BY MAIL TO:

Bruce L. Bertram & Patti A. Bertram
1025 Nobles Ct.
Minden, NV 89423

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUIT CLAIM DEED

THIS QUITCLAIM DEED, executed this 31st day of May, 2023, by first party, Grantor, James D. Morris, whose post office address is 1025 Nobles Court, Minden, NV 89423, hereby grants an undivided 50% interest to second party, Grantees, Bruce L. Bertram and Patti A. Bertram, husband and wife as joint tenants with right of survivorship, whose post office address is 1025 Nobles Court, Minden, NV 89423.

WITNESSETH, that the said first party, for good consideration and for the sum of Ten Dollars (\$10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Douglas, State of Nevada to wit:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF.

Subject to Restrictions, Conditions, Covenants, Rights, Rights of Way, and Easements now of record, if any. TOGETHER with all and singular the tenements, hereditaments and appurtenances now of record, if any.

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first above written.

James D. Morris

STATE OF NEVADA)
) ss.
COUNTY OF DOUGLAS)

This instrument was acknowledged before me on the 31st day of May, 2023 James D. Morris.

Notary Public

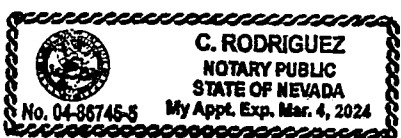


EXHIBIT "A"

Parcel 2B as shown on Parcel Map #2 for MARTIN W. & SUSAN D. JOHNSON, Located in the West 1/2 of Section 32, Township 14 North, Range 20 East, FILED FOR RECORD IN THE OFFICE OF THE County Recorder of Douglas County, filed August 7, 1985, in Book 885, page 789, as Document No. 121205.

TOGETHER WITH all river surface water rights, as per Federal Water Master.

Per NRS 111.312, this legal description was previously recorded at Document No. 229830 in Book 790, Page 993, on 07/10/1990.

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STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1420-32-002-002
 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 _____

FOR RECORDERS OPTIONAL USE ONLY	
BOOK _____	PAGE _____
DATE OF RECORDING: _____	
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 # 15
 b. Explain Reason for Exemption: TRANSFER DEED FROM SON TO PARENTS

5. Partial Interest: Percentage being transferred: 50%

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: Bruce Beekman Capacity: OWNER

Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: JAMES MORRIS
 Address: 1055 Noble Ct
 City: Minden
 State: NV Zip: 89423

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Bruce Beekman
 Address: 1055 Noble Ct
 City: Minden
 State: NV Zip: 89423

COMPANY/PERSON REQUESTING RECORDING (required if not the seller or buyer)
 Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____