

APN:

1320-29-115-006

Return to:

Celeste E. Pierini

1814 Crockett Ln

Gardnerville, NV 89410

Mail tax statements to:

Celeste E. Pierini

1814 Crockett Ln

Gardnerville, NV 89410



SHAWNYNE GARREN, RECORDER

E10

Space above this line for recorder's use only

NEVADA DEED UPON DEATH

Effective on my (our) death, I (We) William R Souligny and Gail E Souligny, the Grantors, hereby convey to Celeste E Pierini and Cheryl L Winslow jointly, the Grantees, with the address, 1814 Crockett Ln, Gardnerville NV 89410 all right, title and interest in the real property located at: 1129 Wisteria Drive, City of Minden, County of Douglas, State of Nevada, and more particularly described as:

A complete legal description of the real property being conveyed by this instrument is attached hereto on page 4 as ~~EXHIBITS A1 through A6~~ WRS

Together with all improvements, 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(S). THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR(S) WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTOR(S) IN THE SAME REAL PROPERTY. THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

Grantor Signature William R Souigny Date 3/25/2024
Printed Name William R. Souigny

If more than one owner:

Grantor Signature Gail E. Souigny Date 3/25/2024
Printed Name Gail E. Souigny

COPY



NOTARY ACKNOWLEDGMENT

STATE OF Nevada
COUNTY OF Douglas

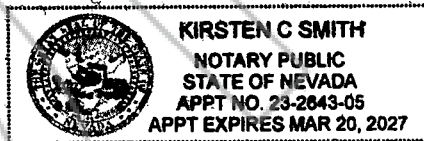
On this 25th day of March, in the year 2024, before me,
Kirsten C. Smith, personally appeared William R. Souligay and Bail E. Souligay
personally known to me or proved to me on the basis of satisfactory evidence to be the person
whose name is subscribed to this instrument, and acknowledged that he or she executed it.

Kim C. Gira

Notary Public

My Commission Expires: March 20, 2027

NOTARY SEAL



CORPORATION GRANT DEED

THIS INDENTURE WITNESSETH: That

Western Nevada Properties, Inc., a Nevada Corporation

in consideration of the sum of TEN DOLLARS (\$10.00) lawful money of the United States, and other good and valuable consideration, the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell and Convey to

William R. Souligny and Gail E. Souligny, husband and wife as joint tenants with right of survivorship

and to the heirs and assigns of such Grantee forever, all that real property situated in the County of Douglas, State of Nevada, bounded and described as follows:

Lot 248, as set forth on the Official Plat of Winhaven Unit No. 4, Phase A, a Planned Unit Development filed for record in the office of the County Recorder of Douglas County, State of Nevada, on August 19, 1993, as Document No. 315526.

Assessment Parcel No. 25-694-04

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and any reversions, remainders, rents, issues or profits thereof.

Witness my hand this 5th day of August, 1994.

Western Nevada Properties, Inc. a Nevada Corporation

Andrew W. Mitchell
Andrew W. Mitchell
Vice President

STATE OF CALIFORNIA)
COUNTY OF SANTA BARBARA) :SS

On August 5, 1994, personally appeared before me, a Notary Public, Andrew W. Mitchell who is the Vice President of Western Nevada Properties Inc., a Nevada corporation, personally known or proved to me to be the person who executed the above instrument on behalf of said corporation, and acknowledged to me that he executed the same for the purposes therein stated.

Debbie L. McComb
Notary Public



WHEN RECORDED MAIL TO:
William R. Souligny
P.O. Box 541
Minden, NV 89423

The Grantor(s) declare(s):
Document Transfer Tax is \$261.30
(X) computed on full value of property conveyed

MAIL TAX STATEMENTS TO:
(As shown above)

REQUESTED BY
STEWART TITLE OF DOUGLAS COUNTY
IN OFFICIAL RECORDS OF DOUGLAS CO., NEVADA

95 JAN -9 P3:53

LINDA SLATER
RECORDER
PAID K8 DEPUTY

353995

BK0195PG1093

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

1. Assessor Parcel Number (s)

- (a) 1320-29-115-006
 (b) _____
 (c) _____
 (d) _____

2. Type of Property:

- a) Vacant Land
 c) Condo/Twnhse
 e) Apt. Bldg.
 g) Agricultural
 i) Other
 b) Single Fam Res.
 d) 2-4 Plex
 f) Comm'l/Ind'l
 h) Mobile Home

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: PROP W POW PRATH

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 William R. Souigny Capacity GRANTOR
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)
 Print Name: William R. Souigny
 Address: 1129 WISTRIA DR
 City: Minden
 State: NV Zip: 89423

BUYER (GRANTEE) INFORMATION

(REQUIRED)
 Print Name: Coloste E. Pirini
 Address: 1814 CROCKET LN
 City: GARDNERVILLE NV 89410
 State: NV Zip: 89410

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

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