

APN: 1022-10-001-051

Recording requested by and mail documents and tax statements to:

DOUGLAS COUNTY, NV
RPTT:\$187.20 Rec:\$40.00
Total:\$227.20
MICHAEL F FERRE
2024-1006920
04/22/2024 11:44 AM
Pgs=3

Name: MICHAEL FERRE AND PAULA FERRE
Address: 1785 FARM BUREAU ROAD
City/State/Zip: CONCORD, CA 94519



SHAWNYNE GARREN, RECORDER

DED113
Nevada Legal Forms & Tax Services, Inc.
www.nevadalegalforms.com

RPTT: **DEED OF GIFT**

FOR AND IN CONSIDERATION FOR THE LOVE AND AFFECTION which the Grantor, whose name(s) is/are: JOELAYNE JOHNSON and FRANK L. JOHNSON, husband and wife

has given to the Grantee, whose name(s) is/are: MICHAEL FERRE and/or PAULA FERRE, husband and wife

and also for the better support, maintenance, protection, and livelihood of the Grantee, do/does Grantor does hereby grant to Grantee, and to the heirs and assigns the real property situate in the County of Douglas, State of Nevada, described as follows

property whose address is:
1282 Sandstone Drive, Wellington, NV 89444 (Topaz Ranch
GID)

Whose legal description is as follows:

Lot 104, as shown on the map of Topaz Ranch Estates Unit No. 2, filed in the office of the Recorder of Douglas County, Nevada on February 20, 1967.

In Witness Whereof, I/We have hereunto set my hand/our hands on this 11 day of April, 20 24.

JoElayne Johnson
Signature of Grantor
JoElayne Johnson

Frank L. Johnson
Signature of Grantor
Frank L. Johnson

ACKNOWLEDGMENT

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
)
County of Contra Costa)

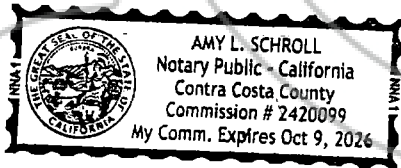
On April 11th, 2024, before me, AMY L. SCHROLL, Notary Public, personally appeared

Jo Elayne Johnson and Frank L. Johnson

proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY of PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Amy L. Schroll
AMY L. SCHROLL, NOTARY PUBLIC
For the State of California
Contra Costa County Commission: 2420099
Commission Expiration: October 9, 2026

OPTIONAL INFORMATION

Title or Type of Document: Deed of Gift

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1022-10-001-51
 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: *Per Telephone Conversation with Michael Ferre, Consideration Amt is based on Property Value of \$48,000. Transfer Tax Due \$187.20*

3. Total Value/Sales Price of Property: \$ _____
~~Deed in Lieu of Foreclosure Only (value of property)~~ _____
 Transfer Tax Value: \$ 187.20
 Real Property Transfer Tax Due: \$ _____

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 Jo Elaine and Frank L Johnson Capacity _____ Grantor
 Signature Michael Ferre Capacity _____ Grantee

SELLER (GRANTOR) INFORMATION (REQUIRED)

Print Name: Jo Elaine and Frank L Johnson
 Address: 68 Terrace Drive
 City: Concord
 State: California Zip: 94518

BUYER (GRANTEE) INFORMATION (REQUIRED)

Print Name: Michael and/or Paula Ferre
 Address: 1785 Farm Bureau Road
 City: Concord
 State: California Zip: 94519

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

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

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)