		Total:\$40.00	08/07/2024	02:52 PM
		CAROLYN K KILPATRIC	K	Pgs=3
Assessor's Parcel Number: 1419-01-801-032 RECORDING REQUESTED AND RETURN TO: Carolyn K. Kilpatrick 3606 Cherokee Dr.)))	0018468820241010805 SHAWNYNE GARREN,		E10
Carson City, NV 89705 MAIL TAX STATEMENTS TO: Carolyn K. Kilpatrick)))	\		
3606 Cherokee Dr. Carson City, NV 89705)))		7/	

(SPACE ABOVE THIS LINE FOR RECORDER'S USE)

DOUGLAS COUNTY, NV

Rec:\$40.00

2024-1010805

DEED UPON DEATH

I, CAROLYN K. KILPATRICK, a single woman, hereinafter referred to as "Grantor," do hereby convey unto, KRISTI MURKOVICH and KIMBERLY KILPATRICK MCQUEARY, hereinafter referred to as "Grantees", right of survivorship, effective upon my death, all right, title and interest in:

Assessor's Parcel Number 1419-01-801-032, commonly known as 3606 Cherokee Dr., Carson City, NV 89705, or all that certain real property located in the County of Douglas, State of Nevada, and more particularly described as:

All that certain real property situated within a portion of the Southeast Quarter (SE1/4) of the Southeast Quarter (SE1/4) of Section 1, Township 14 North, Range 19 East, Mount Diablo Meridian, Douglas County, Nevada, more particularly being Parcel 1 of Parcel Map (DP 21-0049) for Carolyn K. Kilpatrick, recorded February 18, 2022, as File No. 2022-981415, Official Records of Douglas County, Nevada.

Containing: 48,435 square feet of land, more or less.

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.

Grantor Lelpother Date State of Nevada County of Douglas	3/6/24
Subscribed and sworn to on this Leth day of 7 Rebute Smokey, by Carolyn K. Ki	August, in the year 2024, before me,
On this day of August in the year 202 personally appeared Avolung K. Kilmannogramally of satisfactory evidence) to be the person whose na acknowledged that he/she executed it. NOTARY PUBLIC	4, before me, Leberry Smoker, known to me (or proved to me on the basis
REBECCA C. SMOKEY NOTARY PUBLIC STATE OF NEVADA APPT. No. 04-91776-5 MY APPT. EXPIRES APRIL 4, 2026	
Grantor's Name, Address, Phone:	Grantees' Name and Address:
Carolyn K. Kilpatrick 3606 Cherokee Drive Carson City NV 89705	Kristi Murkovich and Kimberly Kilpatrick McQueary 3600 Cherokee Dr Carson City NV 89705
/	

DECLARATION OF VALUE Document/Instrument#: Page: Date of Recording: Notes: 2. Type of Property: b) Single Fam Res. a) Vacant Land c) Condo/Twnhse d) 2-4 Plex e) Apt. Bldg. Comm'l/Ind'l g) Agricultural Mobile Home I) Other 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: 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 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 Capacity Capacity Signature SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION Print Name: _ Address: Address: City: Citv: State: State: COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER) Escrow # _____ Print Name: Address: _____ State: _____ Zip: _____ City:

FOR RECORDERS OPTIONAL USE ONLY

STATE OF NEVADA

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)