

**Grantor**

Carl N Faris and Bonnie A Bolle

**Grantee**

Carl Faris and  
Bonnie Annette Bolle , Trustees  
P O Box 195  
Lakeside, OR 97449

LINCOLN COUNTY NV      **2019-155832**  
Rec \$35 00  
Total \$35 00      **02/11/2019 02 39 PM**  
MILTON E GIFFORD PC      Pgs=2 KE



OFFICIAL RECORD  
AMY ELMER, RECORDER

E07

**After recording, return to**

Milton E Gifford  
P O Box 247  
Cottage Grove, OR 97424

**Mail tax statements to**

The Grantee at above address  
The undersigned Grantors declare  
Documentary transfer tax is none, transfer to a trust

**GRANT DEED**

CARL N FARIS and BONNIE A BOLLE , P O Box 195, Lakeside, OR 97449, Grantors, convey and warrant to CARL FARIS and BONNIE ANNETTE BOLLE , trustees or their successors in trust under the CARL FARIS & BONNIE ANNETTE BOLLE LIVING TRUST, dated January 25, 2019, the following described property in the County of Lincoln, State of Nevada, described as follows

Lot No 18, Highland Knolls, as shown by map thereof on file in Book "A" of Plats, Page 100, Lincoln County, Nevada, records said Highland Knolls being a subdivision of North 1/2 of Section 3, Township 3 South, Range 67 East, Mount Diablo Meridian, Nevada (Parcel #013-041-16, Roll #001502)

Subject to all liens, encumbrances of record, and any transfer fees which Grantee shall pay

The true and actual consideration for this conveyance is pursuant to

**THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS, BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN NEVADA LAW**

Dated January 25, 2019

\_\_\_\_\_  
CARL N FARIS

\_\_\_\_\_  
BONNIE A BOLLE

STATE OF OREGON, County of Lane ) ss

Personally appeared the above named CARL N FARIS and BONNIE A BOLLE , and acknowledged the foregoing instrument to be their voluntary act and deed this January 25, 2019

Before me   
\_\_\_\_\_  
Notary Public for Oregon



**STATE OF NEVADA  
DECLARATION OF VALUE**

1 Assessor Parcel Number(s)  
 a 013-041-16  
 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  
 Other

FOR RECORDERS OPTIONAL USE ONLY	
Book _____	Page _____
Date of Recording _____	
Notes <u>Trust on all 100</u>	

3 a Total Value/Sales Price of Property \$ \_\_\_\_\_  
 b Deed in Lieu of Foreclosure Only (value of property ( \_\_\_\_\_ )  
 c Transfer Tax Value \$ \_\_\_\_\_  
 d Real Property Transfer Tax Due \$ \_\_\_\_\_

**4 If Exemption Claimed**

a Transfer Tax Exemption per NRS 375 090, Section 7  
 b Explain Reason for Exemption Transfer of title from individuals to trustees of a trust without consideration with a cert of trust at time of transfer

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 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 Carl N. Faris Capacity \_\_\_\_\_  
 Signature Bonnie A. Bolle Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
**(REQUIRED)**  
 Print Name Carl N Faris & Bonnie A Bolle'  
 Address P O Box 195  
 City Lakeside  
 State OR Zip 97449

**BUYER (GRANTEE) INFORMATION**  
**(REQUIRED)**  
 Print Name Carl Faris & Bonnie Annette  
 Address P O Box 195 Bolle', Trustees  
 City Lakeside  
 State OR Zip 97449

**COMPANY/PERSON REQUESTING RECORDING (Required if not seller or buyer)**  
 Print Name Milton E Gifford, PC Escrow # \_\_\_\_\_  
 Address P O Box 247  
 City Cottage Grove State OR Zip 97424