



OFFICIAL RECORD E07
AMY ELMER, RECORDER

APN: 013-042-01

Recorded at the request of
Donna M. Mc Intyre

Mail Tax Statement to address below:
WHEN RECORDED RETURN TO:

Donna M. Mc Intyre
3614 Lost Hills Dr.
Las Vegas, Nevada 89122

_____ Above space reserved for recording information _____

GRANT, BARGAIN, SALE DEED CREATING TRUST

KNOW ALL MEN BY THESE PRESENTS: That I, Donna M. Mc Intyre, the undersigned Grantor who is the Creator under that certain DECLARATION OF TRUST hereinafter referred to as The Mc Intyre Family Trust, dated NOV 23 2020, for no consideration, do by these presents, hereby Grant, Bargain, Sell and Convey IN TRUST unto Donna M. Mc Intyre as Trustee(s) under The Mc Intyre Family Trust, dated NOV 23 2020, all of my right, title and interest in and to that certain real property situated in Lincoln County, State of Nevada, and described as:

SEE EXHIBIT "A" ATTACHED HERETO

IN WITNESS WHEREOF, I, sign this deed this NOV 23 2020 day of NOV 23 2020, 20 .

Donna M Mc Intyre

Donna M. Mc Intyre
Grantor

STATE OF NEVADA)

ACKNOWLEDGMENT

ss.

County of Clark)

On this NOV 23 2020 day of NOV 23 2020, 20 , before me, the undersigned Notary Public, personally appeared Donna M. Mc Intyre, known to me to be the individuals described in and who executed the foregoing Grant Deed Creating Trust, and acknowledged that said document was executed as his/her free act and deed.

[Signature]

Notary Public

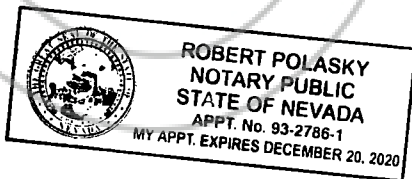


EXHIBIT "A"

Attached to and made a part of that certain Grant Bargain Sale Deed dated
NOV 23 2020, wherein Donna M. Mc Intyre, as Trustee(s) of The Mc Intyre
Family Trust, dated NOV 23 2020, is/are the Grantee(s) of property described
as:

Lot Thirty-three (33) in HIGHLAND KNOLLS, situate in Section 3, Township 3 South,
Range 67 East, M. D. B. & M., as shown on Map filed in Book "A" of Plats, at Page 100,
Lincoln County, Nevada Records.

SUBJECT TO AND TOGETHER WITH rights of way, all gas, oil, metals, water and mineral
rights, reservations, restrictions, exceptions, easements, covenants, conditions of record,
encumbrances and current taxes.

**THIS IS AN EXEMPT TRANSACTION WITH NO CONSIDERATION FROM
GRANTEE TO GRANTOR.**

NRS 375.090, Section 7

**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)

a) 013-042-01

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'/Ind'l

g) Agricultural h) 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 7

b. Explain Reason for Exemption: _____

Transfer is to a living trust with no consideration

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 Donna M. Mc Intyre

Capacity GRANTOR

Signature _____

Capacity _____

SELLER (GRANTOR) INFORMATION

Print Name:

Donna M. Mc Intyre

Address: 3619 Lost Hills Dr.

City: Las Vegas

State: Nevada Zip: 89122

BUYER (GRANTEE) INFORMATION

Print Name:

The Mc Intyre Family Trust

Address: 3619 Lost Hills Dr.

City: Las Vegas

State: Nevada Zip: 89122

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

Print Name: _____ Escrow #: _____

Address: ROBERT POLASKY AGENCY

6250 MOUNTAIN VISTA #L-2

City: HENDERSON, NV 89014 State: _____

Zip: _____

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