Grant, Bargain, Sale Deed

The undersigned grantor(s) declare(s):					
Documentary transfer tax is \$13000					
(XX computed on full value of property conveyed, or					
() computed on full value less value of tiens and encumbrance	es remaining at time of sale.				
() Unincorporated area: () City of	, and				
() Realty not sold.					
THIS INDENTURE WITNESSETH: That KJELL H.	THIS INDENTURE WITNESSETH: That KJELL H. QVALE and KATHRYN C. QVALE, trustees of the				
Kjell and Kathryn Ovale Family Trust UTA a	nd first amendment dated June 2, 1983.				
in consideration of 8 _10_00, the receipt of wh	in consideration of \$ _10_00, the receipt of which is hereby acknowledged, do hereby Grant, Bargain, Sell and				
Convey to RICK L. DURANTE and JANET A. DURAN	TE, husband and wife as joint tenants				
all that real property situate in the	County of Carson City				
office of the Recorder of Carson City, Neva as Parcel 3 of Parcel Map for Sigurd and Re in book 3, page 791, of official records of	ni Frohlich, recorded on December 18, 1979.				
Together with all and singular the tenements, hereditame appertaining.	*Y 2				
Witnesshandthis//	- Sulf & Suele .19 43				
COUNTY OF	Kjell il. Qvale, Trustee Kathryn C. Qvale, Trustee				
On	1/				
personally appeared before me, a Nortry Public,	Kathryn C. Svale.				
- Jol					
	WHEN RECORDED MAIL TO:				
who acknowletted thathe executed the above instrument.	Rt 1_Box_11				
Signature					
(Notary Public)					
(Notaria) Scal)					

State of CALIFORNIA County of SAN FRANCISCO On 1-11-93 before me, NANLY POLSLEY, NOTARY personally appeared KIELL H. QVALE AND KATHKIN CAVALE NAME(S) OF SECREB(S) personally known to me - OR - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) k/are subscribed to the within instrument and ac- knowledged to me that he/she/their authorized capacity(les), 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. Witness my hand and official seal. ATTENTION NOTARY: Abbough the information requested below is OPTIONAL, is corded prevent insudulent attachment of this certificate MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT: Signer(s) Other Than Named Above CAPACITY CLAIMED BY SIGNER INDIVIDUAL(S) CAPACITY CLAIMED BY SIGNER INDIVIDUAL(S) INDIVIDUAL(S) CAPACITY CLAIMED BY SIGNER CAPACITY CLAIMED BY SIGNER CAPACITY CLAIMED BY SIGNER CORPORATE OFFICERS TRUES(S) ATTORNEY-IN-FACT TRUSTE(S) SUBSCRIBING WITNESS GUARDIAN/CONSERVATOR OTHER: SIGNER IS REPRESENTING: NAME OF PERSONS OF ENTITY (ES) VALUE FAMILY TRUST	rangelieran (f. 1814). De transport de la companya de la c		
County of SAN FRANCISCO On 1-11-93 before me, NANLY POLSLEY NOTARY DATE NAME, TITLE OF OFFICER - E.G., UNREDOE MOTART PUBLIC PERSONALLY AND KATHRIN C. QVALE NAME, TITLE OF OFFICER - E.G., UNREDOE MOTART PUBLIC NAME, TITLE OF OFFICER - E.G., UNREDOE MOTART PUBLIC NAME, TITLE OF OFFICER - E.G., UNREDOE MOTART PUBLIC NAME, TITLE OF OFFICER - E.G., UNREDOE MOTART PUBLIC NAME, TITLE OF OFFICER - E.G., UNREDOE MOTART PUBLIC NAME, TITLE OF OFFICER - E.G., UNREDOE MOTART PUBLIC NAME, TITLE OF SKONER(S) PARTNER(S) TRUSTEE(S) SUBSCRIBING WITNESS GUARDIAN/CONSERVATOR OTHER: OTHER: SIGNER IS REPRESENTING: NAME OF PERSON(S) ON ENTITY(ES) SIGNER IS REPRESENTING: NAME OF PERSON(S) ON ENTITY(ES) SIGNER IS REPRESENTING: NAME OF PERSON(S) ON ENTITY(ES) ATTENTION HOTARY: Although the information requested below is OPTIONAL, is could prevent fraudulent attachment of this certificate to unauthorized document. THIS CERTIFICATE MUST BE ATTACHED To THE DOCUMENT Number of Pages Date of Document Date of Document	LL-PURPOSE ACKNOW	LEDGMENT	MOCONTRACTOR NO.
THIS CERTIFICATE Title or Type of Document	County of SAN FRAIVE On 1-11-93 before personally appeared KSELL	PANLY POLSLEY NOTARY NAME, TITLE OF OFFICER- E.G., TANE DOE FROTARY PUBLIC: H. QVALE AND KATHRYN C. QVALE NAME(S) OF SIGNER(S) Disproved to me on the basis of satisfactory evidence to be the person(s) whose name(s) le/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.	☐ INDIVIDUAL(S) ☐ CORPORATE OFFICER(S) ☐ TITLE(S) ☐ PARTNER(S) ☐ ATTORNEY-IN-FACT M TRUSTEE(S) ☐ SUBSCRIBING WITNESS ☐ GUARDIAN/CONSERVATOR ☐ OTHER: ☐ OTHER: SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(IES) KIELL & KATHRYN
MUST BE ATTACHED TO THE DOCUMENT Number of Pages Date of Document			this certificate to unauthorized document.
	MUST BE ATTACHED TO THE DOCUMENT	Number of Pages Date of Docume	nt

NORTHERN NEVADA TITLE COMPANY 193 JAN 29 P2:50

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KIYUSHI NISHIKAWA CARSON CII Y RECORDER FEE S. D. DEP. C