

APN# 002-742-11  
\_\_\_\_\_  
\_\_\_\_\_

**Recording Requested by/Mail to:**

Name: Heidi Sixt  
Address: 1900 Encina Dr  
City/State/Zip: Concord, CA 94519

**Mail Tax Statements to:**

Name: Heidi Sixt  
Address: 1900 Encina Dr  
City/State/Zip: Concord, CA 94519

Grant Bargain And Sale Deed  
**Title of Document (required)**

Document # \_\_\_\_\_ is being (re-)recorded to correct;  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned hereby affirms that the document submitted for recording  
DOES contain personal information as required by law: (check applicable)

\_\_\_ Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

\_\_\_ Judgment – NRS 17.150(4)

\_\_\_ Military Discharge- NRS 419.020(2)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**DOC # 4962440**

10/14/2019 09:37:40 AM

Requested By  
FOR THE PEOPLE

Washoe County Recorder

Kalie M. Work - Recorder

Fee: \$41.00 RPTT: \$0.00

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APN: 002-742-11

**RECORDING REQUESTED BY:**

Name: FOR THE PEOPLE

Address: 1092 S. Virginia Street, Suite B

City/State/Zip: Reno, NV 89502

**WHEN RECORDED MAIL TO GRANTOR I/C/O:**

Name: HEIDI SIXT

Address: 1900 Encima Drive

City/State/Zip: Concord, CA 94519

**MAIL TAX STATEMENT TO:**

Name: HEIDI SIXT

Address: 1900 Encima Drive

City/State/Zip: Concord, CA 94519

**GRANT BARGAIN AND SALE DEED**

Please complete Affirmation Statement below:

X I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the personal information of any person or persons. (Per NRS 239B.030)

**-OR-**

\_\_\_ I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the personal information of a person or persons as required by law:

\_\_\_\_\_  
(State specific law)

Signature

Title

GRANTOR

HEIDI SIXT  
Print Name

## GRANT BARGAIN AND SALE DEED

For the sum of \$10.00 (Ten Dollars) and other valuable consideration received, receipt of which is hereby acknowledged, **JENNIFER SIXT AS TO HER 50% INTEREST**, does hereby **GRANT, BARGAIN, SELL, REMISE AND RELEASE** to **THE JENNIFER SIXT LIVING TRUST, DATED JUNE 5, 2019, JENNIFER SIXT TRUSTEE**, Grantee, her interest in the real property in the County of Carson City, State of Nevada described as:

Lot 11 in Block C as shown on the map of NORTHRIDGE SUBDIVISION PHASE 11, recorded in the office of the Carson City Recorder, State of Nevada, on December 31, 2002 in Book 9 of Maps at Page 2471 as File No. 289477, Official Records.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

**Exemption:** NRS 375.090(7) This is a transfer without consideration to a living trust.

Commonly known as: 2663 New Ridge Drive, Carson City, NV 89706

Jennifer Sixt  
JENNIFER SIXT

State of California )  
County of Contra Costa <sup>ss.</sup>

*see attached notarial certificate*

This instrument was acknowledged before me on the \_\_\_\_\_ day of \_\_\_\_\_, 2019, by  
**JENNIFER SIXT.**

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\_\_\_\_\_  
Notary Public

**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

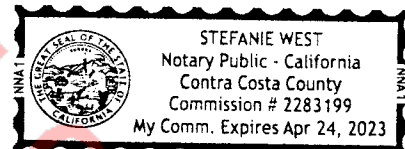
On 8.16.2019 before me, Stefanie West, Notary Public  
(Insert name and title of the officer)

personally appeared Jennifer Sixt  
who 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.

Signature [Signature] (Seal)



## State of Nevada Declaration of Value

FOR RECORDER'S OPTIONAL USE ONLY  
Document/Instrument # \_\_\_\_\_

Date of Recording \_\_\_\_\_

Notes: VIEWED TRUST CERT

## 1. Assessor's Parcel Number:

- a) 002-742-11  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

## 2. Type of Property:

- a) ☐ Vacant Land  
 b) ☒ Single Family Residence  
 c) ☐ Condo/Townhouse  
 d) ☐ 2-4 Plex  
 e) ☐ Apartment Bldg.  
 f) ☐ Commercial/Industrial  
 g) ☐ Agricultural  
 h) ☐ Mobile Home  
 e) ☐ Other \_\_\_\_\_

## 3. Total Value/Sales Price of Property:

\$ \_\_\_\_\_

Deed in Lieu of Foreclosure Only (value of prop.)

\$ \_\_\_\_\_

Transfer Tax Value:

\$ \_\_\_\_\_

Real Property Transfer Tax Due:

\$ \_\_\_\_\_

## 4. If Exemption Claimed:

a) Transfer Tax Exemption, per NRS 375.090, Section: 7b) Explain Reason for Exemption: to or from a trust

## 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 therein. 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 amount owed.

Signature Heidi Sixt Capacity Owner

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

## SELLER (GRANTOR) INFORMATION

REQUIRED

Print Name: Heidi Sixt  
 Address: 1900 Encina Dr  
 City: Concord, CA  
 State & Zip: 94519 CA

## BUYER (GRANTEE) INFORMATION

REQUIRED

Print Name: Heidi Sixt  
 Address: 1900 Encina Dr  
 City: Concord  
 State & Zip: CA 94519

## COMPANY/PERSON REQUESTING RECORDING (Required If Not Seller Or Buyer)

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_