

QUIT CLAIM DEED

DOC # 0211315

12/10/2007 02:12 PM

Official Record

Recording requested By  
MARY C MILLER

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 of 1

RPTT

Recorded By: FES

Book- 0467 Page- 0194

APN: 003-024-06

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Mary C Miller  
Address: 1020 Chippewa Trl  
City/State/Zip: Volusia, FL 32117



THIS INDENTURE WITNESS That the GRANTOR(S): TROY LANCE SORRELL

for and in consideration of

FIVE THOUSAND Dollars (\$ 5000 )

do hereby QUIT CLAIM the right, title and interest, if any, which GRANTOR(S) may have in all that real property, the receipt of which is hereby acknowledged, to the GRANTEE(S): MARY CATHERINE MILLER

whose address

is (if applicable): 1020 CHIPPEWA TRL, situate in the City of HOLLY HILL, County of VOLUSIA, State of FLORIDA.

All that certain property in the County of Eureka, State of Nevada bounded and described as follows:

(Set forth legal description)

**372 PEBBLE LANE [LOT 7, BLOCK 8, CRESCENT VALLEY RANCH & FARM, UNIT 3, SECTION 17, TOWNSHIP 29 N., RANGE 48 E. AS RECORDED IN EUREKA COUNTY, NEVADA].**

Together with all and singular hereditament and appurtenances thereunto belonging or in any way appertaining to. In Witness Whereof, I/We have hereunto set my hand/our hands on \_\_\_\_\_.

Troy L. Sorrell  
Signature of Grantor

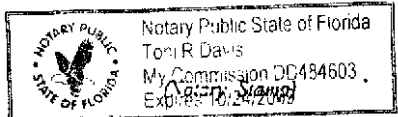
Mary Catherine Miller  
Signature of Grantor

STATE OF **FLORIDA** )  
COUNTY OF **VOLUSIA** )

This instrument was acknowledged before me on (date) Dec 6, 2007

By (person(s) appearing before notary public) Troy Lance Sorrell and Mary Catherine Miller

Toni R Davis  
Notary Public  
My Commission expires: 10/24/2009



STATE OF NEVADA  
DECLARATION OF VALUE

DOC # DV-211315

12/10/2007 02:12 PM

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FC  
D  
B  
D  
N

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Page 1 of 1 Fee: \$14.00  
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1. Assessor Parcel Number (s)

- a) 003-024-06
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

2. Type of Property:

- |  |              |                             |                 |
|--|--------------|-----------------------------|-----------------|
| a) <input checked="" type="checkbox"/> | Vacant Land  | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/>            | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex        |
| e) <input type="checkbox"/>            | Apt. Bldg.   | f) <input type="checkbox"/> | Comm'l/Ind'l    |
| g) <input type="checkbox"/>            | Agricultural | h) <input type="checkbox"/> | Mobile Home     |
| i) <input type="checkbox"/>            | Other        |                             |                 |

3. Total Value/Sales Price of Property:

\$ 5000  
 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: 6
- b. Explain Reason for Exemption: A TRANSFER OF TITLE BETWEEN FORMER SPOUSES IN COMPLIANCE WITH A DECREE OF DIVORCE

5. Partial Interest: Percentage being transferred: 50 %

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 amount owed.

Signature Troy L. Sorrell Capacity Grantor  
 Signature Mary Catherine Miller Capacity Grantee

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)  
 Print Name: TROY L. SORRELL  
 Address: 1160 SAN JOSE BLVD  
 City: HOLLY HILL  
 State: FL Zip: 32117

(REQUIRED)  
 Print Name: MARY CATHERINE MILLER  
 Address: 1020 CHIPPEWA TRAIL  
 City: HOLLY HILL  
 State: FL Zip: 32117

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_