

## Official Record

Recording requested By  
LAVERNIA RASMUSSEN

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$78.00

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RPTT:

Recorded By: FS

Book- 0473 Page- 0170



WHEN RECORDED MAIL TO:

Gary L. Hall  
P.O. Box 1156  
Zephyr Cove, NV 89448

MAIL TAX STATEMENTS TO:

(SAME AS ABOVE)

## QUITCLAIM DEED

The undersigned declare(s):

Documentary transfer tax is \$ NA

- ( ) computed on full value of property conveyed, or
- ( ) computed on full value less value of liens and encumbrances remaining at time of sale.
- ( ) Unincorporated area: ( ) Eureka County, Nevada, and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, the undersigned, Jonilynn Siepert-Hall (245 N. Fayette Dr, Fayetteville GA 30214) does hereby Remise, Release and Forever Quitclaim to Gary L. Hall (P.O. Box 1156, Zephyr Cove NV 89448-1156) the following described real property in the County of Eureka, State of Nevada.

Legal Description - Parcel E as shown on that certain Parcel Map for Gary and Jonilynn Hall filed in the office of the County Recorder of Eureka County, State of Nevada, on August 19, 1988, as File No. 120755, being a portion of Parcel "D" of Parcel Map, document No. 118810, E1/2 Section 17, Township 20 North, range 53 East, M.D.B.&M.

(Parcel Number 007-396-24 / District 5.0 / Roll Number 002291 / Property Location 564 Third Street)



Jonilynn Siepert-Hall



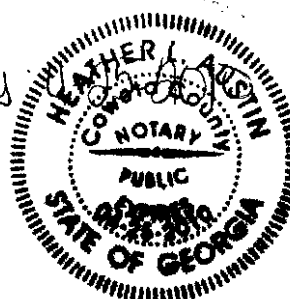
Date

STATE OF GEORGIA:  
COUNTY OF FAYETTE:

On this 5th day of May 2008, before me, the undersigned, a Notary Public in and for said County and State, personally appeared Jonilynn Siepert-Hall Known to me to be the person described in and who executed the foregoing instrument, who acknowledged to me that he/she executed the same freely and voluntarily and for the uses and purposes therein mentioned.

NOTARY:

*Heather R. Austin*  
My Commission Expires



STATE OF NEVADA  
DECLARATION OF VALUE

DOC # DV-211906

06/03/2008

11:33 AM

Official Record

1. Assessor Parcel Number (s)

- a) 007-242-224  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

FOR RECORD

Document#

Book:

Date of Rec:

Notes:

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2. Type of Property:

- |  |              |                             |                 |
|--|--------------|-----------------------------|-----------------|
| a) <input 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/Indi       |
| g) <input checked="" type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home     |
| i) <input type="checkbox"/>            | 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: L4

b. Explain Reason for Exemption: Transfer from one joint tenant to another

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 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 Greg L Hall Capacity Buyer  
Signature NA Capacity NA

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: \_\_\_\_\_  
Address: NA  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Greg L Hall  
Address: PO Box 1156  
City: Springdale  
State: NV Zip: 89448

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

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

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)