



0212467

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[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

# Quitclaim Deed

Date of this Document: \_\_\_\_\_

Reference Number of Any Related Documents: \_\_\_\_\_

002-037-10

Grantor:

Name Marica A. Moran  
Street Address Po 211213 / Rte 306 & Arabian Rd  
City/State/Zip Crescent Valley NV 89821

Grantee:

Name Lisabeth mae Parker  
Street Address P.O. Box 211281  
City/State/Zip Crescent Valley Nevada 89821

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Crescent Valley Ranch + Farms Unit #1 Block #21 Lot #3

Assessor's Property Tax Parcel/Account Number(s): 002-037-10

**THIS QUITCLAIM DEED**, executed this Sept Fourth day of September 20 08, by first party, Grantor, Marica Moran whose mailing address is Po 211213 Crescent Valley Nevada 89821, to second party, Grantee, Lisabeth Mae PARKER whose mailing address is Po 211281

**WITNESSETH** that the said first party, for good consideration and for the sum of Eight thousand dollars Dollars (\$ 8000.00 ) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim,

which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Eureka, State of Nevada to wit: \_\_\_\_\_

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first written above. Signed, sealed and delivered in the presence of:

Signature of Witness \_\_\_\_\_

Print Name of Witness \_\_\_\_\_

Signature of Witness \_\_\_\_\_

Print Name of Witness \_\_\_\_\_

Signature of Grantor Maura

Print Name of Grantor MARIA A. MORAN

State of NEVADA )

County of EUREKA )

On Sept 4, 2008, before me, VICKI Drenon, appeared Maria A. Moran, personally known to me (or 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.

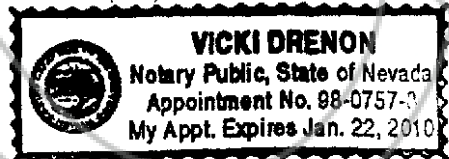
WITNESS my hand and official seal.

Vicki Drenon  
Signature of Notary

Affiant        Known  Produced ID

Type of ID NDL

(Seal)



**STATE OF NEVADA  
DECLARATION OF VALUE**

**DOC # DV-212467**

09/19/2008 03:48 PM

**Official Record**

FOR RE  
Docume  
Book:  
Date of  
Notes:

Recording requested By  
LISABETH PARKER

**Eureka County - NV  
Mike Rebaleati - Recorder**

Page 1 of 1 Fee: \$48.00  
Recorded By: FS RPTT: \$31.20  
Book-0477 Page-0056

**1. Assessor Parcel Number (s)**

- a) 002-037-10
- 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:**

Deed in Lieu of Foreclosure Only (value of property) \$ 8000.00  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 31.20

**4. If Exemption Claimed:**

- a. Transfer Tax Exemption, per NRS 375.090, Section: \_\_\_\_\_
- b. Explain Reason for Exemption: \_\_\_\_\_

5. Partial Interest: Percentage being transferred: 0 %

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 [Signature] Capacity Buyer  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**

**BUYER (GRANTEE) INFORMATION**

(REQUIRED)  
 Print Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

(REQUIRED)  
 Print Name: Lisabeth maq Parker  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

**COMPANY/PERSON REQUESTING RECORDING**

(REQUIRED IF NOT THE SELLER OR BUYER)

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