

Official Record

Recording requested By  
FLORENCE DOZAR

Eureka County - NV  
Mike Rebaleati - Recorder

Fee: \$15.00

Page 1 of 2

RPTT: \$46.80

Recorded By: FES

Book- 499

Page- 0298

APN: #2-042-08

Send tax statement to:

Florence R. DOZAR  
PO Box 211056  
Crescent Valley NV  
89821



**Quit Claim Deed** 0214996

THIS INDENTURE, made and entered into as of this 14 day of May,

2010, by and between David D. Richardson and Elizabeth A. Richardson, husband and wife, Grantors; and Florence Robin Dozar, a married woman, Grantee;

**WITNESSETH:**

That the Grantors, for and in consideration of the sum of TEN DOLLARS (\$10.00) lawful, current money of the United States of America, to them paid by the said Grantee, the receipt whereof is hereby acknowledged, do by these presents grant, bargain, sell, convey and confirm unto the said Grantee, forever, all that certain real property situate, lying and being the County of Eureka, State of Nevada, and more particularly described as follows:

Lot 5, Block 25, CRESCENT VALLEY RANCH & FARMS Unit I

SUBJECT TO taxes for the present fiscal year, and subsequently, covenants, conditions, restrictions, exceptions and reservations, easements, encumbrances, leases or licenses, rights and right of way of record, if any.

TOGETHER WITH the tenements, hereditaments and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

**TO HAVE AND TO HOLD**, all and singular, the premises, together with the  
appurtenances unto the said Grantee, her heirs and assigns forever.

IN WITNESS WHEREOF, the said Grantors have hereunto set their hands as of  
the day and year first hereinabove written.

*David D. Richardson*

Printed: David D. Richardson

*Elizabeth A. Richardson*

Printed: Elizabeth A. Richardson

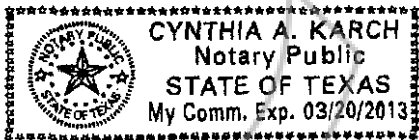
STATE OF TEXAS )  
 )SS.

COUNTY OF WOOD )

On this 5th day of MAY, 2010, personally appeared before me, a

Notary Public, DAVID RICHARDSON and ELIZABETH RICHARDSON  
known or proved to me to be said persons, who acknowledged that they executed the  
foregoing instrument.

*Cynthia A. Karch*  
NOTARY PUBLIC



STATE OF NEVADA  
DECLARATION OF VALUE

DOC # DV-214996

05/17/2010

11:24 AM

Official Record

1. Assessor Parcel Number (s)

- a) # 2-042-03
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

FOR RECOF

Document/Tr  
Book: \_\_\_\_\_  
Date of Rec  
Notes: \_\_\_\_\_

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2. Type of Property:

- a)  Vacant Land
- b)  Single Fam Res.
- c)  Condo/Twnhse
- d)  2-4 Plex
- e)  Apt. Bldg.
- f)  Comm'l/Ind'l
- g)  Agricultural
- h)  Mobile Home
- i)  Other

3. Total Value/Sales Price of Property:

\$ 12,000.

Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_

Transfer Tax Value: \$ \_\_\_\_\_

Real Property Transfer Tax Due: \$ 46.80

4. If Exemption Claimed:

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

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 [Signature] Capacity Buyer

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

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: David Richardson

Address: 1025 Sycamore St

City: Minneapolis

State: TX Zip: \_\_\_\_\_

(REQUIRED)

Print Name: Florence R Dozar

Address: PO Box 211056

City: Crescent Valley

State: NV Zip: 89821

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

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

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

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