

DOC # 0216922

04/08/2011

03:42 PM

Official Record

Recording requested By
GRANT MILLER

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By: FES

Book- 513 Page- 0247



0216922

APN: 05-470-40

Recording requested by and mail documents and
tax statements to:

Name: GRANT MILLER

Address: 619 SHADYBROOK DRIVE

City/State/Zip: SPRING CREEK, NV 89815

DED115

Nevada Legal Forms & Books, Inc. (702) 870-8977

www.legalformsrus.com

RPTT: _____

QUITCLAIM DEED CORRECTED

Dated this 8TH day of APRIL, 20 11

For valuable consideration, the sum of TEN THOUSAND

Dollars (\$ 10,000) I/We, the undersigned, Alice Baughn

who acquired title to that certain property described below, and who is the Grantor(s) herein, does
hereby Quitclaim to: GRANT MILLER

Grantee(s) all that real property situated in the City of CRESCENT VALLEY

County of EUREKA, State of NEVADA

described as: (set forth legal description and commonly known address)

NE4NW4, NE4NW4NW4, S2NW4NW4, N2SW4NW4, SW4SW4NW4
SECTION 33, TOWNSHIP 29 NORTH, RANGE 48 EAST MDBM

**WARNING: THE COUNTY RECORDER MAY CHARGE AN ADDITIONAL FEE IF YOU
WRITE WITHIN THE 1" MARGINS OF THIS DOCUMENT OR VIOLATE ANY OTHER
RECORDING REQUIREMENTS IMPOSED BY YOUR COUNTY RECORDER.**

In Witness Whereof, I/We hereunto set my hand/our hands this 8TH day of APRIL, 2011

Alice Baughn
Signature

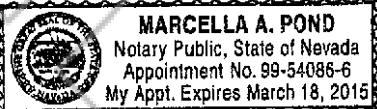
Alice Baughn
Print or type name here

Grant Miller
Signature

GRANT MILLER
Print or type name here

STATE OF _____)
COUNTY OF _____)
On this 8th day of APRIL, 2011, ALICE BAUGHN AND GRANT MILLER personally appeared before me, a Notary Public, ALICE BAUGHN AND GRANT MILLER
☒ personally known to me OR ☐ proved to me on the basis of satisfactory evidence to be the person(s) described in and who executed the foregoing instrument in the capacity set forth therein, who acknowledged to me that they executed the same freely and voluntarily and for the uses and purposes therein mentioned. Witness my hand and official seal.

Marcella A. Pond
Notary Public
My commission expires: March 18, 2015
Consult an attorney if you doubt this forms fitness for your purpose.

 **MARCELLA A. POND**
Notary Public, State of Nevada
Appointment No. 99-54086-6
My Appt. Expires March 18, 2015

STATE OF NEVADA
DECLARATION OF VALUE

DOC # DV-216922

04/08/2011 03:42 PM

Official Record

1. Assessor Parcel Number (s)

- a) 05-470-40
b) _____
c) _____
d) _____

FOR RE
Docu
Book:
Date of
Notes:

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Page 1 of 1 Fee: \$15.00
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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) \$ PREVIOUSLY PAID # 0214953
Transfer Tax Value: \$ _____
Real Property Transfer Tax Due: \$ _____

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 _____ Capacity Buyer
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: ALICE BAUGHN
Address: 6341 N. SAN PABLO
City: FRESNO
State: CA Zip: 93710

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: GRANT MILLER
Address: 619 SHADY BROOK DR
City: SPRING CREEK
State: NV Zip: 89915

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____
Address: _____
City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)