

QUIT CLAIM DEED

APN: 002-023-29 4083 Eureka Ave

DOC # **0220760**

07/13/2012 09:58 AM
Official Record
Recording requested By
PAUL D OWENS

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO
Name: Christine M. Bingham
Address: P.O. Box 211060
City/State/Zip: Crescent Valley, NV 89821

Eureka County - NV
Mike Rebaleati - Recorder
Fee: \$14.00 Page 1 of 1
RPTT: Recorded By: FES
Book- 533 Page- 0383



THIS INDENTURE WITNESS That the GRANTOR(S): Paul D. Owens

_____ for and in consideration of

Ten Dollars (\$ 10.00) 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): Christine M. Bingham

_____ whose address

is (if applicable): P.O. Box 211060, situate

in the City of Crescent Valley, County of Eureka, State of NV.

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

(Set forth legal description) Lot 9 Block A CVRA F

Unit 1

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 _____.

Paul D. Owens
Signature of Grantor

Signature of Grantor


STATE OF NEVADA)
COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) July 13th, 2012

By (person(s) appearing before notary public) Paul D. Owens

[Signature]
Notary Public

My Commission expires: 7/17/2012

 SARA G SINGER
NOTARY PUBLIC, STATE OF
EUREKA COUNTY • NEVADA
CERTIFICATE # 97-0349-8
APPT. EXP. JULY 17, 2012 *(Stamp)*

**STATE OF NEVADA
DECLARATION OF VALUE**

FOR RECOR
Document/lt
Book: _____
Date of Rec
Notes: _____

DOC # DV-220760
07/13/2012 09:58 AM
Official Record

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PAUL D OWENS

Eureka County - NV
Mike Rebaleati - Recorder

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

- a) 002 - 023 - 29
- b) _____
- c) _____
- d) _____

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'l/Ind'l |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input checked="" type="checkbox"/> | Other | | |

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ 68,666
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: # 5
- b. Explain Reason for Exemption: Transfer from on owner to the other

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: Paul D. Owens Capacity: Grantor
 Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)
 Print Name: Paul D Owens
 Address: P.O. Box 21026
 City: Crescent Valley
 State: NV Zip: 89821

(REQUIRED)
 Print Name: Christine M. Bingham
 Address: P.O. Box 21060
 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: _____