

DOC # 0221447

09/13/2012 01:19 PM

Official Record

Recording requested By
ROBERT MCKINNEY

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 of 1

RPTT:

Recorded By: FES

Book- 538 Page- 0170

QUIT CLAIM DEED

APN: 005-030-09, 005-500-03

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: MCKINNEY FAMILY TRUST THE 0221447

Address: 26035 BOUQUET CANYON RD ANT 114

City/State/Zip: SANTA CRUZ CA 91750-2512



THIS INDENTURE WITNESS That the GRANTOR(S): _____

_____ for and in consideration of
Gift to my son Dollars (\$ 0) 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): Robert A. McKinney whose
address is (if applicable): 5305 ABILENE DR. situate in the
City of SILVER SPRINGS, County of LYON, State of NEVADA, All

that certain property in the County of Eureka, State of Nevada bounded and described as follows:
(Set forth legal description)

005-030-09 T 31 N, R 49 E SEC 9 NW 4 LOT 3
005-500-03 T 29 N R 49 E SEC 7 SW 4 SW 4 NW 4

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 _____

John McKinney
Signature of Grantor

Signature of Grantor

STATE OF NEVADA)
CALIFORNIA)
COUNTY OF EUREKA)
LOS ANGELES)
This instrument was acknowledged before me on (date) SEPT. 4, 2012
By (person(s) appearing before notary public) JOAN E MCKINNEY
Ellie Zimmerman
Notary Public)
My Commission expires: MAY 20, 2014

(Notary Stamp)
ELLIE ZIMMERMAN
Commission # 1886656
Notary Public - California
Los Angeles County
My Comm. Expires May 20, 2014

STATE OF NEVADA
DECLARATION OF VALUE

Recording requested By
ROBERT MCKINNEY

FOR RECORDERS

Document/Instrument

Book: _____

Date of Recording: _____

Notes: _____

Eureka County - NV

Mike Rebaleati - Recorder

Page 1 of 1 Fee: \$14.00

Recorded By: FES RPTT:

Book- 538 Page- 0170

1. Assessor Parcel Number (s)

- a) 005-030-13
- b) _____
- c) _____
- d) _____

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:

Deed in Lieu of Foreclosure Only (value of property) \$ 1.334

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 MOTHER TO SON

5. Partial Interest: Percentage being transferred: 100 %

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: Robert A. McKinney Capacity: Buyer

Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: KATHLEEN OBERST

Address: 5305 ABILENE DR

City: SILVER SPRINGS

State: NV Zip: 89429

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: ROBERT A. MCKINNEY

Address: 5305 ABILENE DR.

City: SILVER SPRINGS

State: NV Zip: 89429

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)