

DOC # 0223627

01/02/2013

01:59 PM

Official Record

Recording requested By
DONALD MASSOW

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

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RPTT:

Recorded By: FES

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QUIT CLAIM DEED

APN: 005-020-27

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Donald MASSOW

Address: PO Box 2626

City/State/Zip: CARLSON CITY, NV 89701



THIS INDENTURE WITNESS That the GRANTOR(S): NORMAN W. MASSOW for and in consideration of ZERO Dollars (\$ 00.00) 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): DONALD MASSOW whose address is (if applicable): PO BOX 2626 & 1584 Rollins Hills Dr CARLSON CITY, NV 89706, situate in the City of CARLSON CITY, County of CARLSON, State of NEVADA. All

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

T31N, R48E, SECTION 33, N2NE4NW4
PARCEL # 005-020-27
DISTRICT 4.0
ROLL # 003135

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 _____

Norman W. Massow 12-3-12

Signature of Grantor

Signature of Grantor

STATE OF NEVADA - Arizona
 COUNTY OF EUREKA - Maricopa)

This instrument was acknowledged before me on (date) 12/3/2012
 By (person(s) appearing before notary public) Norman William Massow

[Signature]
 Notary Public
 My Commission expires: 07/22/2014

STATE OF NEVADA
DECLARATION OF VALUE

DOC # DV-223627

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Official Record

1. Assessor Parcel Number (s)
 a) 005-020-27
 b) _____
 c) _____
 d) _____

FOR REC
 Docume:
 Book:
 Date of f
 Notes:

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 DONALD MASSOW
 Eureka County - NV
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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 | | |

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3. Total Value/Sales Price of Property: \$ \$ 3960.00
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 0

4. If Exemption Claimed:
 a. Transfer Tax Exemption, per NRS 375.090, Section: # 5
 b. Explain Reason for Exemption: TRANSFER OF PROPERTY FROM FATHER TO SON WITHOUT CONSIDERATION.

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: Norman P. Massow Capacity: GRANTEE
 Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)
 Print Name: NORMAN MASSOW
 Address: 9806 N. BALBOA DR.
 City: SUN CITY
 State: AZ Zip: 85351

(REQUIRED)
 Print Name: DONALD MASSOW
 Address: 1584 ROLLING HILLS DR.
 City: CARSON CITY
 State: NV Zip: 85351

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)