

DOC # 0224631

07/22/2013

09:13 AM

Official Record

Recording requested By
ROBIN HOOPER

Eureka County - NV
Mike Rebaleati - Recorder

Fee: \$15.00

Page 1 of 2

RPTT: \$19.50

Recorded By: FES

Book- 552 Page-

0077



0224631

Recording requested by: Robin Hooper

When recorded, mail to:

Name: Robin Hooper

Address: 2775 Buckbrush Cir

City: Twin Falls,

State/Zip: ID 83301

Space above reserved for use by Recorder's Office

Document prepared by:

Name Von E. Clappitt

Address PO Box 965

City/State/Zip Carson City, NV 89702

Property Tax Parcel/Account Number: 001-085-01 Dist. 1.0 Roll # 001278

Quitclaim Deed

This Quitclaim Deed is made on September 10, 2012, between Von E. Clappitt, Grantor, of 3001 Baker Dr. (P.O. Box 965), City of Carson City, State of Nevada, and Robin Hooper, Grantee, of 2775 Buckbrush Cir., City of Twin Falls, State of Idaho.

For valuable consideration, the Grantor hereby quitclaims and transfers all right, title, and interest held by the Grantor in the following described real estate and improvements to the Grantee, and his or her heirs and assigns, to have and hold forever, located at 60 Smith St., City of Eureka, State of Nevada:

LOT 1 BLOCK 101 TOWNSITE

Subject to all easements, rights of way, protective covenants, and mineral reservations of record, if any.

Taxes for the tax year of 2012 shall be prorated between the Grantor and Grantee as of the date of recording of this deed.

Dated: 9-10-12

Von E. Clappitt by Cynthia L. Clappitt
Signature of Grantor

Von E. Clappitt
Name of Grantor

Signature of Witness #1

Printed Name of Witness #1

Signature of Witness #2

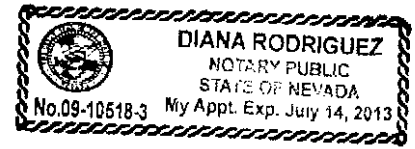
Printed Name of Witness #2

State of Nevada County of Carson
On Sept. 10, 2012, the Grantor, Cynthia L. Clappitt
personally came before me and, being duly sworn, did state and prove that he/she is the person described
in the above document and that he/she signed the above document in my presence.

Diana Rodriguez
Notary Signature

Notary Public,
In and for the County of Carson State of Nevada
My commission expires: July 14, 2013 Seal

Send all tax statements to Grantee.



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 701-085-01
- b) _____
- c) _____
- d) _____

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'/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:

\$ 5000.00
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 19.50

4. If Exemption Claimed:

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

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 [Signature] Capacity Trustee
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Von E. Clamping
 Address: 3001 RAVES DR
 City: CARSON CITY, NV
 State: NV Zip: 89702

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: ROB HOOPER
 Address: 2775 BUCKBUSH CIR.
 City: TWIN FALLS
 State: ID Zip: 83301

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)

FOR RE:
 Docume
 Book:
 Date of
 Notes:

DOC # DV-224631

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Power of Attorney presented
 Recording requested by
 ROBIN HOOPER *FES*

Eureka County - NV

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