

APN #005-480-18, 005-480-32, 005-480-33

Recording Requested By:

Name Soul Harvest Church, INC

Address 14 Comwinds Dr.

City/State/Zip Clarendon IN 46120

Quit claim Deed
(Title of Document)

DOC # 0230774

12/14/2015

08:26 AM

Official Record

Recording requested By
SOUL HARVEST CHURCH INC

Eureka County - NV

Sara Simmons - Recorder

Fee: \$41.00

Page 1 of 3

RPTT: \$62.40

Recorded By: LH

Book- 587 Page- 0306



0230774

APN: 005-480-18, 005-480-32, 005-480-33

Return document to:

Soul Harvest Church, INC
14 Crosswinds Dr.
Cloverdale IN
46120

Mail tax statements to:

Soul Harvest Church, INC
14 Crosswinds Dr.
Cloverdale IN
46120

QUITCLAIM DEED

This quitclaim deed, executed this 10 day of November, 2015, by the grantor,
Johnny Mohler, Married, as his sole and separate property
1373 S Co. Rd. 400 W
Greencastle In
46135

for the consideration of \$3.00

Three Dollars and other valuable consideration
in hand paid, does hereby remise, release and quitclaim forever to the grantee,

Soul Harvest Church, INC
14 Crosswinds Dr.
Cloverdale IN
46120

all right, title, and interest in and to the following real property situated in the County of
Eureka, State of Nevada, legally described as:

005-480-18; NE 1/4 of SE 1/4 of Sec 7, T 29 N, Range 49 East MDB&M as per government
survey

005-480-32; W 1/2 SE 1/4 of SE 1/4 of Sec 7, T 29 N, Range 49 East MDB&M as per
government survey

005-480-33; E 1/2 of SE 1/4 of SE 1/4 of Sec 7, T 29 N, Range 49 East MDB&M as per
government survey



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Deeds.com Uniform Conveyancing Blanks

In witness whereof, the grantor has signed and sealed these presents on the day first above written.

Matt Nichols
Signature
MATT NICHOLS
Print name
GRANTEE
Capacity

Signature

Print name

Capacity

Johnny M Mahler
Signature
Johnny M Mahler
Print name
GRANTOR
Capacity

Signature

Print name

Capacity

Construe all terms with the gender and quantity required by the sense of this deed.

STATE OF Indiana }
COUNTY OF Putnam }

This instrument was acknowledged before me on this 10th day of November, 2015 by

Matt Nichols and Johnny Mahler

Cheryl J Thomas
Signature
Notary Public
Title

Commission Expires:
9/29/2022



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Page: 3 of 3

Deeds.com Uniform Conveyancing Blanks

DOC # DV-230774

12/14/2015

08:26 AM

Official Record

STATE OF NEVADA
DECLARATION OF VALUE FORM

Recording requested By
SOUL HARVEST CHURCH INC

Eureka County - NV

Sara Simmons - Recorder

Page 1 of 1 Fee \$41.00
Recorded By: LH RPTT: \$62.40

Book- 587 Page- 0306

Hook: _____ Page: _____
Date of Recording: _____
Notes: _____

1. Assessor Parcel Number(s)

a) 005-480-18
b) 005-480-32
c) 005-480-33
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
Other _____

3. Total Value/Sales Price of Property

\$ 15,840

Deed in Lieu of Foreclosure Only (value of property) _____

Transfer Tax Value:

\$ 62.40

Real Property Transfer Tax Due

\$ 62.40

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 parties agree that 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 GRANTEE

Signature _____

Capacity Grantor

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Johnny Mohler
Address: 1373 S. Co. Rd. 400w
City: Greencliffe
State: NV Zip: 46135

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Mathew Nichols
Address: 14 Crosswinds Dr
City: Overdale
State: NV Zip: 46120

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

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

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED