

APN: 005-090-65

DOC # 0231327

05/18/2016

02:40 PM

Official Record

Recording requested By
PHILLIPS BALLENGER LLC

Eureka County - NV

Sara Simmons - Recorder

Fee: \$16.00

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RPTT:

Recorded By: SGS

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0231327

**TRANSFERRED WITHOUT
CONSIDERATION**

Recorded At The Request Of:
When Recorded Return To:
Gerald W. Minnis, Trustee
The Minnis Family Trust
P.O. Box 50 PMB 333
Lake Arrowhead, CA 92352

Send Tax Statements to:
Gerald W. Minnis and Ruth E.
Minnis, Trustees of
The Minnis Family Trust
P.O. Box 50 PMB 333
Lake Arrowhead, CA 92352

QUITCLAIM DEED

Gerald W. Minnis and Ruth E. Minnis, hereby quitclaim one-hundred percent (100%) of right, title, and interest to Gerald W. Minnis and Ruth E. Minnis as co-trustees of the Minnis Family Trust, U/A dated August 21, 2008 in and to the following described real estate in Eureka County, State of Nevada, and legally described as follows in Exhibit "A".

Dated this 6th day of May, 2016


Gerald W. Minnis


Ruth E. Minnis

State of California

County of _____

)
) SS.
)

SEE ATTACHED

Notary Public

My commission expires _____

On the _____ day of _____, 2016, personally appeared before me, a Notary Public in and for said County and State, Gerald W. Minnis and Ruth E. Minnis, personally known (or proved) to me to be the person whose name is subscribed to the above instrument who acknowledged that he executed the instrument.

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)

County of Riverside)

On MAY 6, 2016 before me, Ami J. Flori, a Notary Public, personally appeared Gerald W. Minnis and Ruth E. Minnis, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

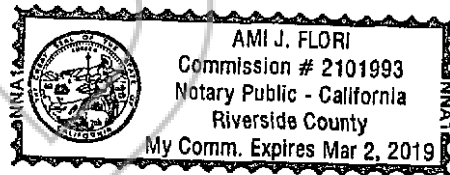
I certify under PENALTY of PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Ami J. Flori
Ami J. Flori, Notary Public

My Commission Expires: March 2, 2019



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NOTE: The attorneys preparing this instrument have not examined the title to the real property described herein, and have expressed no opinion regarding the title to said real property.

Exhibit A

LEGAL DESCRIPTION:

**E1/2 OF SW1/4 OF SE1/4 AND SW1/4 OF SW1/4 OF SE1/4, SECTION 25, T31N, R49E,
M.D.B.&M SUBJECT TO ALL MATTERS OF RECORD. TOGETHER WITH ALL
MINERAL RIGHTS THAT MAY BE HELD BY SELLER.**

APN: 005-090-65

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

- a. 005-090-65
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
Other

3.a. Total Value/Sales Price of Property

\$

b. Deed in Lieu of Foreclosure Only (value of property ())

c. Transfer Tax Value: \$

d. Real Property Transfer Tax Due \$ 0

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section 07

b. Explain Reason for Exemption: Transfer without consideration to or from a Trust

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 [Signature]

Capacity: Grantor

Signature _____

Capacity: _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Gerald W. Minnis
Address: PO Box 50 PMB 333
City: Lake Arrowhead
State: CA Zip: 92352

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Gerald Minnis, Trustee
Address: PO Box 50 PMB 333
City: Lake Arrowhead
State: CA Zip: 92352

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

Print Name: PHILLIPS BALLENGER
Address: 3605 S. Town Center Dr., Suite B
City: Las Vegas

Escrow # _____
State: NV Zip: 89135

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AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED