

APN # \_\_\_\_\_

**Recording Requested By:**

Name Patricia Calhoun

Address 5826 42nd St.

City/State/Zip Sacramento, CA 95824

**DOC # 0232013**

10/13/2016

02:11 PM

**Official Record**

Recording requested By  
PATRICIA CALHOUN

**Eureka County - NV**

**Lisa Hoehne - Recorder**

Fee: \$39.00

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RPTT:

Recorded By: LH

Book- 596 Page- 0164



0232013

Quitclaim  
(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fees applies)

# QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 15 day of September, 20 16, by the Grantor,  
Patricia Louise Calhoun whose mailing address is  
5826 42nd Street Sacramento Ca 95824 to the Grantee,  
Scott Alexander Calhoun whose mailing address is  
5826 42nd Street Sacramento Ca 95824

WITNESSETH, That the said Grantor, for good consideration and for the sum of \$ \_\_\_\_\_ paid by the said Grantee, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said Grantee forever, all the right, title, interest and claim which the said Grantor has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Eureka, State of Nevada to wit: Property located at 3109 Crescent Ave Crescent Valley Nevada  
parcel number 002-022-12 District 2  
block 5, lot 2 Crescent Valley Ranch & Farms, Unit 1 Also a 1975  
Titan Mobile Home 14 X 56 Serial # 4057631857

IN WITNESS WHEREOF, The said Grantee has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

Patricia L. Calhoun  
Grantor  
Patricia L. Calhoun

Grantor

STATE OF  
COUNTY OF

On 9/15/2016 before me, Sandra R. Black, Notary Public, personally appeared Patricia Louise Calhoun, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature

Affiant: Known ☒ Unknown

ID Produced: CA ID C4607219

[Seal]



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STATE OF NEVADA  
DECLARATION OF VALUE FORM

DOC # DV-232013

10/13/2016

02:11 PM

Official Record

1. Assessor Parcel Number(s)

a) 002-022-12  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

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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 \_\_\_\_\_

Page 1 of 1 Fee: \$39.00  
Recorded By: LH RPTT:  
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Date of Recording: \_\_\_\_\_

Notes: \_\_\_\_\_

3. Total Value/Sales Price of Property

Deed in Lieu of Foreclosure Only (value of property) \_\_\_\_\_

Transfer Tax Value: \_\_\_\_\_

Real Property Transfer Tax Due \_\_\_\_\_

\$ 7,840  
\_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section 5

b. Explain Reason for Exemption: giving from one spouse to another

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 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 Patricia L. Calhoun Capacity wife

Signature Scott Calhoun Capacity husband

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Patricia L. Calhoun  
Address: 5826 42nd St  
City: Sacramento  
State: Ca Zip: 95824

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Scott Calhoun  
Address: 5826 42nd St  
City: Sacramento  
State: Ca Zip: 95824

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