

DOC # 0233283

06/23/2017 09:49 AM

Official Record

Recording requested By
JIM DAVIDS

Eureka County - NV

Lisa Hoehne - Recorder

Fee: \$15.00 Page 1 of 2

RPTT: \$35.10 Recorded By: CH

Book- 602 Page- 0215



0233283

Recording requested by: Jim Davids

When recorded, mail to:

Jim Davids
238 Second Street
Crescent Valley
NV. 89821

Space above for Recorder's Use Only

Title Order # _____

Escrow # _____

Document Prepared by: _____

Quitclaim Deed

The undersigned Grantor(s) declare:

The Document Transfer Tax is \$ 5.85

Assessor's Parcel # 002-022-08

Unincorporated Area or City of _____

Tax computed on full value of property conveyed, or

Tax computed on full value less value of liens or encumbrances remaining at time of sale

This Quitclaim Deed is made on 06/17/2015, between
David L Plummer, Grantor(s), of Crescent Valley
(address), and Jim B Davids,
Grantee(s), of Crescent Valley (address).

For valuable consideration, the receipt of which is hereby acknowledged, the Grantor(s) hereby quitclaims and transfers all right, title, and interest held by the Grantor in the following described real estate and improvements to the Grantee(s), and his or her heirs and assigns, to have and hold forever, located at

3097 Crescent Avenue, State of NEVADA:
Crescent Valley NV. 89821
(CUR unit #1, lot 8, block 5)

Dated: 6/17/2015

David L. Plummer
Signature of Grantor

David L. Plummer
Name of Grantor

[Signature]
Signature of Witness #1

Kristi Davids
Printed Name of Witness #1

Nancy Plummer
Signature of Witness #2

NANCY PLUMMER
Printed Name of Witness #2

State of Nevada County of EIKO

On 06/17/2015, the Grantor, David L. Plummer,

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.

[Signature]
Notary Signature



Notary Public- State of Nevada
County of Eiko

RODOLFO GARCIA

No. 14-18278-6 My Commission Expires October 2, 2018

Notary Public,

In and for the County of EIKO State of Nevada

My commission expires: 10/02/2018 Seal

Send all tax statements to Grantee.



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STATE OF NEVADA
DECLARATION OF VALUE FORM

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Page 1 of 1 Fee: \$15.00
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- 1. Assessor Parcel Number(s)
 - a) 002-022-08
 - b) _____
 - c) _____
 - d) _____

- 2. Type of Property:

a) <input type="checkbox"/>	Vacant Land	b) <input checked="" 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
<input type="checkbox"/>	Other		

FOR RECORDER'S OPTIONAL USE ONLY
 Book: _____ Page: _____
 Date of Recording: _____
 Notes: _____

- 3. Total Value/Sales Price of Property \$ 8089
 Deed in Lieu of Foreclosure Only (value of property) (_____)
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due \$ 35.10

- 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 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 _____
 Signature [Signature] Capacity Buyer

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: David L Plummer
 Address: 729 Seventh St
 City: Crescent Valley
 State: NV Zip: 89821

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Jim Davids
 Address: 238 Second St
 City: Crescent Valley
 State: NV Zip: 89821

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)
 Print Name: _____ Escrow #: _____
 Address: _____
 City: _____ State: _____ Zip: _____