

DOC # 0233742

08/14/2017

01:23 PM

Official Record

Recording requested By
ALBERT TREVINO

Eureka County - NV

Lisa Hoehne - Recorder

Fee: **\$17.00**

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RPTT:

Recorded By: CH

Book- 605 Page- 0176



0233742

QUIT CLAIM DEED

TAX PARCEL #:

007-380-55

FILED FOR RECORD AT REQUEST OF:

WHEN RECORDED RETURN TO:

Leslie Trevino

PO Box 671

Eureka, Nevada, 89316

THIS SPACE PROVIDED FOR RECORDER'S USE

Quitclaim Deed

For and in consideration of \$0.00, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Albert Trevino, not married, of 580 El Gato, Eureka, NV 89316, (the "Grantor"), conveys, as well as quitclaim, unto Leslie Trevino, not married, of PO Box 671, 617 Sharrow Circle, Eureka, NV 89316, (the "Grantee") as the sole tenant, the following described real estate (the "Premises"), situated in the County of Eureka, Nevada, together with all after acquired title of the Grantor in the Premises:

Legal Description for Parcel # 007-380-55

Legal Description Sect/Lot/Town/Block Range/Acres

Located in a portion of Lot 11 -- Lot D of Parcel 28 20 53 2.040

3 as shown on the parcel map for Van Vliet File #126926
Changed from Parcel #007-370-16.

Being all or part of the same property described in the County Register's Deed Book 527, Page 86.

TOGETHER with all the rights, members, hereditaments and appurtenances to the said Premises belonging, or in any wise incident or appertaining.

TO HAVE AND TO HOLD, all and singular, the said Premises before mentioned unto the said Grantee forever in fee simple.

DATED: 8 14, 17

Signed in the presence of:

Albert Trevino

Signature

Albert Trevino

Albert Trevino

Name



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Grantor Acknowledgement

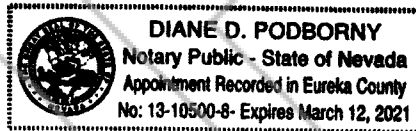
STATE OF NEVADA

COUNTY OF Eureka

On this day personally appeared before me Albert Trevino, the "Grantor", to me known (or proved to me on the basis of satisfactory evidence) to be the individual described in and who executed the foregoing instrument, and acknowledged that this Quitclaim Deed was signed as a free and voluntary act and deed for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this 14th day of Aug, 2017.

Diane D. Podborny
Notary Public in and for the State of Nevada



County of Eureka

Residing at 631 Sharrow Cir Dr. Eureka NV 89316

My Commission Expires March 12, 2021

Send Subsequent Tax Bills to: Leslie Trevino, PO Box 671, Eureka, NV 89316	Drafted By: _____ _____
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COPY



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STATE OF NEVADA
DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)

- a) 007 382 55
 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
 i) ☐ Other _____

Book: _____ Page: _____

Date of Recording: _____

Notes: Verified Deed

3. Total Value/Sales Price of Property

\$ _____

Deed in Lieu of Foreclosure Only (value of property)

() _____

Transfer Tax Value:

\$ _____

Real Property Transfer Tax Due

\$ _____

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section 6b. Explain Reason for Exemption: Divorce

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 Albert Trevino Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION**(REQUIRED)**Print Name: Albert TrevinoAddress: PO Box 552City: EurekaState: NV Zip: 89316**BUYER (GRANTEE) INFORMATION****(REQUIRED)**Print Name: Leslie Trevino (Oliver)Address: P.O. Box 671City: Eureka NVState: NV Zip: 89316**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