

APN: 005-010-53

Send Tax Statements To:

Colleen Thorn et al
9459 Argonne Way
Forestville, CA 95436

EUREKA COUNTY, NV

RPTT:\$0.00 Rec:\$35.00

\$35.00 Pgs=3

COPENHAVER & MCCONNELL, PC

LISA HOEHNE, RECORDER

2018-235154

05/16/2018 11:25 AM

E07

When recorded return to:

Copenhaver & McConnell, P.C.
950 Idaho Street
Elko, NV 89801

QUITCLAIM DEED

FOR CONSIDERATION RECEIVED, **S. COLLEEN THORN**, as Successor Trustee of the **ALTA P. MARVIN REVOCABLE LIVING TRUST** dated **July 19, 1989**, as Grantor, does hereby forever quitclaim and transfer to **COLLEEN THORN** and **BONNIE ROSSI**, as joint tenants with rights of survivorship, as Grantees, and to their heirs and assigns, forever, the property located in the County of Eureka, State of Nevada, described as follows:

The Southeast Quarter (SE¼) of the Southwest Quarter (SW¼), Section 13, Township 31 North, Range 48 East, M.D.B.M., as per Government Survey.

RESERVING THEREFROM an easement of 30 feet along all boundaries for ingress and egress, with power to dedicate.

TOGETHER WITH all and singular tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

SUBJECT TO all taxes and assessments, reservations, exceptions, easements, rights of way, limitations, covenants, conditions, restrictions, terms, liens, charges and licenses affecting the property of record.

TO HAVE AND TO HOLD the property, with the appurtenances to the Grantees, and their heirs, personal representatives and assigns, forever.

SIGNED this 3rd day of April 2018.

GRANTOR:

ALTA P. MARVIN REVOCABLE LIVING TRUST



S. COLLEEN THORN, Successor Trustee

State of California
County of Sonoma

April This instrument was acknowledged before me on the 3rd day of _____, 2018, by **S. COLLEEN THORN**, as Successor Trustee of the **ALTA P. MARVIN REVOCABLE LIVING TRUST** dated July 19, 1989.

★ **SEE ATTACHED** ★

NOTARY PUBLIC

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

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 **SONOMA**)

On 04/03/2018 before me, **SEAN BURNS (notary public)**
Date Here Insert Name and Title of the Officer

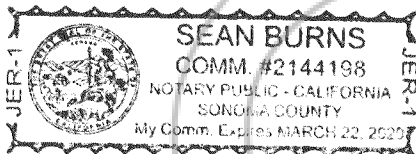
personally appeared Colleen MARVIN THORN

AKA S. Colleen THORN
Name(s) of Signer(s)

who 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.

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 Sean Burns
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Quit Claim Deed Document Date: None
Number of Pages: 2 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: Colleen MARVIN THORN
Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☒ Individual Attorney in Fact
☐ Trustee Guardian or Conservator
☐ Other: _____
Signer Is Representing: _____

Signer's Name: _____
Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Individual Attorney in Fact
☐ Trustee Guardian or Conservator
☐ Other: _____
Signer Is Representing: _____

**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number (s)

- a) 005-010-53
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument# _____
Book: _____ Page: _____
Date of Recording: _____
Notes: _____

2. Type of Property:

- | | | | |
|------|--------------|----|-----------------|
| a) x | 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 | | |

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property)	\$	0.00
Transfer Tax Value:	\$	0.00
Real Property Transfer Tax Due:	\$	0.00

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 7
b. Explain Reason for Exemption: A transfer from a trust without consideration.

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 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 - Grantor
Signature _____ Capacity - Grantee

**SELLER (GRANTOR) INFORMATION
(REQUIRED)**

Print Name: Alta P. Marvin Revocable
Living Trust
Address: 9459 Argonne Way
City: Forestville
State: CA Zip: 95436

**BUYER (GRANTEE) INFORMATION
(REQUIRED)**

Print Name: Colleen Thorn & Bonnie Rossi
Address: 9459 Argonne Way
City: Forestville
State: CA Zip: 95436

**COMPANY/PERSON REQUESTING RECORDING
(REQUIRED IF NOT THE SELLER OR BUYER)**

Print Name: Copenhagen & McConnell, PC Escrow #
Address: 950 Idaho Street
City: Elko State: Nevada Zip: 89801

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)