

DEVLIN CLOUSE



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LISA HOEHNE, CLERK RECORDER

Above Space Reserved for Recording

[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Quitclaim Deed

Date of this Document: Dec. 20 2019

Reference Number of Any Related Documents: _____

Grantor:

Name Bryan Mason & Jane Mason
Street Address 4025 Eureka Ave -
City/State/Zip Crescent Valley, NV 89821

Grantee:

Name Devlin Clouse & Becky Clouse
Street Address 172 1st. St. 34
City/State/Zip CRESCENT VALLEY, NV. 89821

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Block 31 lot 8

Assessor's Property Tax Parcel/Account Number(s): 002-054-11

THIS QUITCLAIM DEED, executed this _____ day of _____,
20 19, by first party, Grantor, Bryan & Jane Mason, whose
mailing address is 4025 Eureka Ave Crescent Valley, NV 89821, to
second party, Grantee, Devlin & Becky Clouse, to
whose mailing address is _____

WITNESSETH that the said first party, for good consideration and for the sum of _____
Dollars (\$) paid by the said second party, the receipt whereof is hereby acknowledged,
does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim,

which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of _____, State of _____
to wit: _____

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first written above. Signed, sealed and delivered in the presence of:

Signature of Witness

Print Name of Witness

Signature of Witness

Print Name of Witness

Signature of Grantor

Print Name of Grantor

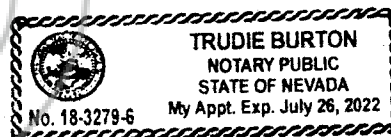
State of

County of

On December 20 2019, before me, Trudie Burton,
appeared Bryan Scott Mason / Lora Jane Mason, 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 of Notary



Affiant ☒ Known ☐ Produced ID
Type of ID Nevada DL
(Seal)

STATE OF NEVADA
DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)

- a) 902-054-11
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 _____

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

3. Total Value/Sales Price of Property

\$ 6000.00

Deed in Lieu of Foreclosure Only (value of property)

(_____)

Transfer Tax Value:

\$ 23.40

Real Property Transfer Tax Due

\$ _____

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 Devlin Clouse

Capacity Buyer

Signature Becky Clouse

Capacity Buyer

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: BRYAN & JANE MASON

Address: 4025 EUREKA AVE.

City: CRESSENT VALLEY

State: NV Zip: 89821

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: DEVLIN & BECKY CLOUSE

Address: 1721ST. SR 34

City: CRESSENT VALLEY

State: NV. Zip: 89821

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