

EUREKA COUNTY, NV
LAND-QTD
Rec:\$37.00
Total:\$37.00

2020-240094
02/20/2020 11:11 AM
Pgs=3

BETTY A. GRASSO



LISA HOEHNE, CLERK RECORDER E05

QUITCLAIM DEED

WHEN RECORDED MAIL TO:
Lynda L. Robinett-Salles
2206 Alarose Way
Riverbank, CA 95367

DATE: July 11, 2018

MAIL TAX STATEMENT TO:
Betty A. Grasso
PO Box 2025
Minden, NV 8943

The undersigned declare(s): Documentary transfer tax is \$ ~~37.00~~ *37.00*
 computed on full value of property conveyed, or
 computed on full value less value of liens and encumbrances remaining at time of sale
 Unincorporated area: Eureka County, Nevada, and
FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, the Undersigned

LLYNDA L. ROBINETT-SALLES, TRUSTEE
The Rasmussen Trust

Lynda L. Robinett-Salles Trustee

Lynda L. Robinett-Salles

Does hereby Remise, Release and forever Quitclaim to Betty A. Grasso 892 Mahogany Dr, Minden, NV 89423 the following described real property in the County of Eureka, State of Nevada:
568 El Dorado, Eureka, NV 89316,
APN 07-396-13 Parcel 3, of Parcel 3, of Parcel A

Before me, the undersigned a Notary Public: Personally appeared known to be the persons described in and who executed the foregoing instrument, who acknowledged to me that he/she executed the same freely and voluntarily and for the uses and purposes therein mentioned:

NOTARY:

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 Stanislaus)

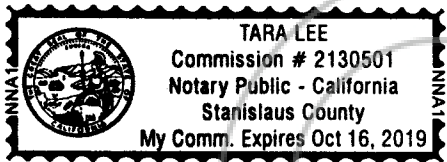
On July 11, 18 before me, TARA LEE, Notary public
Date Here Insert Name and Title of the Officer

personally appeared Lynda L Robinett - Saltes
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 Tara Lee
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: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

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 FORM**

1. Assessor Parcel Number(s)
 a) 07-396-13-
 b) Parcel 3, of Parcel 3, of Parcel A.
 c) 568 El Dorado
 d) Eureka, NV. 89316

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 \$ 30,397.7 (2019)
 Deed in Lieu of Foreclosure Only (value of property) _____
 Transfer Tax Value: \$ 35.00
 Real Property Transfer Tax Due _____

4. **If Exemption Claimed:**
 a. Transfer Tax Exemption per NRS 375.090, Section # 5
 b. Explain Reason for Exemption: Lavernia Rasmussen (Deceased)
Mother of Betty A. Grasso

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 Betty A. Grasso Capacity daughter/trustee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: Lynda L. Sales / Trustee
 Address: 2206 Alarose Way
 City: Riverbank
 State: Calif. Zip: 95367

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Betty A. Grasso
 Address: P.O. Box 2025
 City: Minden
 State: Nevada Zip: 89423

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