

PLEASE SEND ALL TAX
INFO TO:
R. Kennedy
P.O. Box 119
EUREKA, NV
89316

EUREKA COUNTY, NV
LAND-QTD
RPTT:\$62.40 Rec:\$37.00
Total:\$99.40
ROBERT KENNEDY

2020-240435
05/04/2020 09:36 AM
Pgs=2



LISA HOEHNE, CLERK RECORDER

LF298-04
R298-04

QUITCLAIM DEED

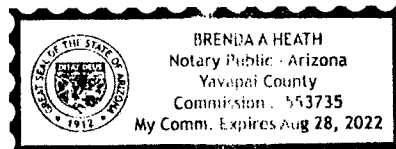
THIS QUITCLAIM DEED, executed this 9th day of April, 2020,
by first party, Grantor, Marianne S. Price
whose post office address is 3135 Rainbow Ridge Dr. Prescott, AZ 86303
to second party, Grantee, Robert Kennedy
whose post office address is 201 S. Spring Street Eureka, NV 89316

WITNESSETH, That the said first party, for good consideration and for the sum of
Fifteen thousand seven hundred fifty and $\frac{4}{100}$ Dollars (\$15,750 and $\frac{4}{100}$)
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 Eureka, State of Nevada to wit:

Street Address: 191 S. Spring Street Eureka, NV 89316
Vacant Land

Tax Parcel ID: Parcel Number 001-136-04

Marianne S. Price
Grantor



Brenda A. Heath
my commission
expires 8/28/22
4/9/2020

Request ALL TAX INFO ON THIS PROPERTY
Be sent TO: R. Kennedy, P.O. Box 119
EUREKA, NV 89316

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

a) 001-136-04
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

\$ 15,750.00

Deed in Lieu of Foreclosure Only (value of property) _____

Transfer Tax Value: \$ _____

Real Property Transfer Tax Due \$ 62.40

4. **If Exemption Claimed:**

a. Transfer Tax Exemption per NRS 375.090, Section _____

b. Explain Reason for Exemption: _____

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: [Signature] Capacity: BUYER

Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: MARIANNE S. PRICE
Address: 3135 RAINBOW RIDGE DR.
City: PRESCOTT
State: AZ Zip: 86303

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: ROBERT KENNEDY
Address: P.O. BOX 119
City: EUREKA
State: 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