

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

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AMENS LAW LTD



LISA HOEHNE, CLERK RECORDER E10

APN: 007-396-05

WHEN RECORDED MAIL TO:

AMENS LAW, Ltd.
Debra M. Amens, Esq.
P.O. Box 488
Battle Mountain, NV 89820

MAIL TAX STATEMENTS TO:

Cindy McIntosh
15776 Duggans Road
Grass Valley, CA 95949

QUITCLAIM DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, ESTATE OF CHESTER HULL, does hereby QUITCLAIM to ANNABELL HULL, whose address 15776 Duggans Road, Grass Valley, California, all rights, title and interest in and to that certain real properties with Assessor Parcel Numbers of 007-936-05, all located in Eureka County, State of Nevada, which are commonly all known as 310 El Centro Parcel A, Diamond Valley, Nevada, and more particularly described as follows:

APN: 007-396-05

LOT 1 as shown on that certain parcel map, filed in the Office of the County Recorder of Eureka County, Nevada, filed on October 21, 1985, as File No. 100554, located in a portion of Lot 2, the E1/2 of Section 17, Township 20 North, Range 53 East, M.D.B. & M., together with well and improvements thereon. APN # 07-396-05

EXCEPTING THEREFROM all of the oil and gas, in and under said land, reserved by the United States of America, in Patent recorded April 15, 1966, in Book 10, Page 331, Official Records, Eureka County, Nevada.

ACKNOWLEDGMENT

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 NEVADA

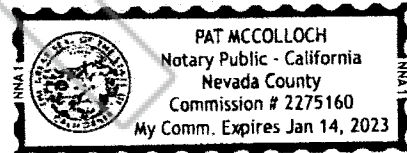
On APRIL 30, 2020 before me, PAT MCCOLLOCH NOTARY PUBLIC
(insert name and title of the officer)

personally appeared CINDY MCINTOSH
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  (Seal)



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 007-396-05
 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 \$ 63,777
 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 10
 b. Explain Reason for Exemption: Death of Grantor Chester Hill

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 Heather Andersen - Co-Personal Representative Capacity Grantee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Heather Andersen - Co-Personal representative
 Address: Po Box 488
 City: Battle Mtn
 State: NV Zip: 89820

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: _____ Escrow #: _____
 Address: _____
 City: _____ State: _____ Zip: _____