QUIT CLAIM DEED

My Commission expires: _7_

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO KATHERINE J. BOWLING, CLERK RECORDER for and in consideration of 6,000,00 Dollars (\$ -6 _) do hereby QUIT CLAIM the right, title and interest, if any, which GRANTOR(S) may have in all that real property, the receipt of which is hereby acknowledged, to the GRANTEE(8): Rocky Joe Long address is (if applicable): 443 West Cliff On situate in the Spring Creek County of E/CO , State of Nevada 39815. All that certain property in the County of Eureka, State of Nevada bounded and described as follows: (Set forth legal description) Lot 8, Block 13 Crescent Valley Ranch and Farms Unit #1 Together with all and singular hereditament and appurtenances thereunto belonging or in any way appertaining to. In Witness Whereof, I/We have hereunto set my hand/our hands on $\frac{9}{1}$ /10/2023 Signature of Grantor Signature of Grantor STATE OF NEVADA COUNTY OF EUREKA This instrument was acknowledged before me on (date) 9/11/2023.

By (person(s) appearing before notary public) Freq Dernis 120 Notary Public

EUREKA COUNTY, NV

Total:\$60.40 DENNIS LEE FREY

LAND-QTD RPTT:\$23.40 Rec:\$37.00 2023-251064

09/15/2023 02:28 PM

STATE OF NEVADA	^
DECLARATION OF VALUE FORM	
1. Assessor Parcel Number(s)	()
a) 002-033-02	\ \
b)	\ \
c)	\ \
d)	. \ \
2. Type of Property:	
a) Vacant Land b) Single Fam. Res.	FOR RECORDER'S OPTIONAL USE ONLY
c) Condo/Twnhse d) 2-4 Plex	Book: Page:
e) Apt. Bldg f) Comm'l/Ind'l	Date of Recording:
g) Agricultural h) Mobile Home	Notes:
Other	
3. Total Value/Sales Price of Property	\$ 6,000,00
Deed in Lieu of Foreclosure Only (value of propert	y) (
Transfer Tax Value:	\$
Real Property Transfer Tax Due	s 23.40
4. If Exemption Claimed:	
a. Transfer Tax Exemption per NRS 375.090, Sec	tion
b. Explain Reason for Exemption:	/- /
5. Partial Interest: Percentage being transferred: 10	0 %
The undersigned declares and acknowledges, un	
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	
exemption, or other determination of additional tax due	
due plus interest at 1% per month. Pursuant to NRS 37	
jointly and severally liable for any additional amount o	
jointly and severally habite for any additional amount of	
Signature	Capacity Gran Tol
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Signature	Capacity
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SELLER (GRANTOR) INFORMATION BY	UYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: Dennis lee Fred Pr	int Name: ROCKY DOC Long
	idress: 743 West cliff Dr. O
	ty: Soring Cleek
	ate: No Va da Zip: 89815
State: Abrada Zip: 8982/ St	all. Novada Lip. 01015
COMPANY/PERSON REQUESTING RECORDIN	(C (required if not seller or huver)
	scrow#:
Address:	юю т.
	ate: Zip:
City St	aicLip

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED