

RECORDING REQUESTED BY  
AND WHEN RECORDED  
RETURN TO:  
JIMMIE ROSA and  
MARY H. ROSA  
13533 East Bailey Street  
Whittier, CA 90601

MAIL TAX STATEMENTS TO:  
JIMMIE ROSA and  
MARY H. ROSA  
13533 East Bailey Street  
Whittier, CA 90601

**QUITCLAIM DEED**

THIS CONVEYANCE TRANSFERS THE GRANTORS' INTEREST INTO THEIR REVOCABLE LIVING TRUST.

THE UNDERSIGNED GRANTORS DECLARE DOCUMENTARY TAX is \$0, and FOR NO VALUABLE CONSIDERATION. JIMMIE ROSA and MARY H. ROSA, hereby remise, release and forever QUITCLAIM their share of the described real property to Jimmie Rosa and Mary H. Rosa, Co-Trustees of THE ROSA FAMILY TRUST dated May 2, 1990, for the benefit of JIMMIE ROSA and MARY H. ROSA, the following described real property in the County of Lincoln, State of Nevada:

See Attachment for Legal Description OR  
Vacant Land Section 10, 11 T1N 30.9E R2.36 acres  
(Legal Description)

Commonly known as: Vacant Land Section 10, 11  
(Street Address/City/State/Zip)

Parcel Number: 006-271-22 This Quitclaim Deed Signed On: JAN 02 2002  
(On Property Tax Statement) (Date)

Jimmie Rosa  
JIMMIE ROSA

Mary H. Rosa  
MARY H. ROSA

**CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC**

State of California )  
County of Los Angeles )

On JAN 02 2002, before me, Renee Bubetz, Notary Public, personally appeared  
(Insert name and title of the office)

JIMMIE ROSA and MARY H. ROSA, personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

WITNESS my hand and official seal.  
Renee Bubetz (SEAL)  
Notary's Signature

This instrument was drafted by Legacy Prepaid Legal Program (858) 453-2553



COPY

NO. 117990

FILED AND RECORDED AT REQUEST OF  
JIMMIE H. ROSA

APRIL 17, 2002

AT 06 MINUTES PAST 2 O'CLOCK

PM IN BOOK 163 OF OFFICIAL

RECORDS PAGE 23 LINCOLN

COUNTY NEVADA

*Zedee Boncher*  
COUNTY RECORDER

# State of Nevada Declaration of Value

1. Assessor Parcel Number(s)  
a) 006-271-22  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

2. Type of Property  
a)  Vacant Land  
b)  Single Family Res.  
c)  Condo/Townhouse  
d)  2-4 Plex  
e)  Apartment Building  
f)  Commercial /Ind'l  
g)  Agriculture  
h)  Mobile Home  
i)  other \_\_\_\_\_

**FOR RECORDERS OPTIONAL USE ONLY**  
Document / Instrument # 117990  
Book: 163 Page: 2324  
Date of Recording: April 17, 2002  
Notes: \_\_\_\_\_

3. Total Value / Sales Price of Property \$ \_\_\_\_\_  
Deed in Lien Only (value of forgiven debt) \$ \_\_\_\_\_  
Taxable Value \$ \_\_\_\_\_  
Real Property Transfer Tax Due: \$ \_\_\_\_\_

4. If Exemption Claimed:  
a. Transfer Tax Exemption, per NRS 375.090, section: \_\_\_\_\_  
b. Explain Reason for Exemption: Transfer into trust

5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %

The undersigned Seller (Grantor)/Buyer (Grantee), 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 1/4% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Jimmie Rosa Capacity Owner  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**

**BUYER (GRANTEE) INFORMATION**

Print Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_

Print Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_

**COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT BUYER OR SELLER)**

Co. Name \_\_\_\_\_ Esc. # \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

(As a public record, this form may be recorded / microfilmed)