

122723

APN: 012-220-10

Recording requested by and mail documents and tax statements to:

Name: **M/M JENSEN**

Address: **6105 E. SAHARA #17**

City/State/Zip: **LAS VEGAS, NEVADA 89142**

DED104mk

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FILED FOR RECORDING
AT THE REQUEST OF

Jerome A. Jensen
2004 JUL 26 AM 9 00

LINCOLN COUNTY RECORDER
FEE \$5.00
2730 DEPT 40
LESLIE SCHWARTZ

RPTT: _____

QUITCLAIM DEED

THIS INDENTURE WITNESS That the GRANTOR(S): **JEROME A. JENSEN, AN UNMARRIED MAN** for and in consideration of **ZERO Dollars (\$ 0.00)** do hereby QUITCLAIM the right, title and interest, if any, which GRANTOR may have in all that real property, the receipt of which is hereby acknowledged, to the GRANTEE(S): **JAMES JENSEN AND PATRICIA JENSEN, HUSBAND AND WIFE AS JOINT TENANTS** all that real property situated in the County of **LINCOLN**, State of **NEVADA**, bounded and described as follows: *(Set forth legal description)*

PARCEL NO.1 AS SHOWN ON PARCEL MAP FOR LOM THOMPSON, FILED IN THE OFFICE OF THE COUNTY RECORDER OF LINCOLN COUNTY ON DECEMBER 2, 1996, IN BOOK B, PAGE 9, OF PLATS, AS FILE NO. 106559, LOCATED IN A PORTION OF THE NE 1/4 SECTION 25, TOWNSHIP 2 SOUTH RANGE 67 EAST, M.D.B.&M.

EXCEPTING THEREFROM ALL MINES OF GOLD, SILVER, COPPER, LEAS, CINNABAR AND OTHER VALUABLE MINERALS AS RESERVED BY THE STATE OF NEVADA IN DEED RECORDED SEPTEMBER 26, 1949, IN BOOK H-1, PAGE 398, PATENT RECORDS, LINCOLN COUNTY, NEVADA.

THERE IS ALSO RESERVED A RIGHT-OF-WAY FOR A FEDERAL AID HIGHWAY UNDER 23 U.S.C. 317.

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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 23 day of **JULY, 2004**.

Jerome A. Jensen
JEROME A. JENSEN

STATE OF NEVADA)
COUNTY OF CLARK)

On this 23 day of **JULY, 2004**, personally appeared before me, a Notary Public **JEROME A. JENSEN**, personally known to me to be the person(s) whose name(e) is subscribed to the above instrument who acknowledged that he executed this instrument. Witness my hand and official seal.

C. Guidry
Notary Public
My Commission Expires: 11/22/06
Consult an attorney if you doubt this forms fitness for your purpose.

	Notary Public - State of Nevada County of Clark CARMEL GUIDRY My Appointment Expires November 22, 2006 No: 98-5184-1
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**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number (s)
 a) **012-220-10**
 b) _____
 c) _____
 d) _____

FOR RECORDERS USE ONLY	
Document/Instrument#:	<u>122723</u>
Book	<u>189</u> Page <u>40</u>
Date of Recording:	<u>July 26 2004</u>
Notes:	

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 _____

3. Total Value/Sales Price of Property \$ 7,000.00
 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 _____
 b. Explain reason for exemption: _____

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: Jerome Jensen Capacity: _____
 Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION (Required)
JEROME A. JENSEN
 Print name
P.O. BOX 567
 Address
CALIENTE
 City
NEVADA **89008**
 State Zip

BUYER (GRANTEE) INFORMATION (Required)
JAMES JENSEN
 Print name
6105 E. SAHARA #17
 Address
LAS VEGAS
 City
NEVADA **89142**
 State Zip

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

Escrow # _____
 Company's/Person Name _____
 Address _____ City _____ State _____ Zip _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)

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 Las Vegas, Nevada 89102
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