

FILED FOR RECORDING  
AT THE REQUEST OF

Rhonda A. Farmer

2005 APR 6 PM 4 04

LINCOLN COUNTY RECORDER  
FEE 6.00  
LESLIE BOUCHER DEP au

APN 08-031-041

APN \_\_\_\_\_

APN \_\_\_\_\_

Grant, Bargain and Sale Deed  
Title of Document

Grantees address and mail tax statement:

WARREN McCollough

P.O. Box 275

Alamo, NV. 89001

w

RPTT 26.25

APN 08-031-041

# GRANT, BARGAIN, and SALE DEED

THIS INDENTURE WITNESS that: WARREN McCollough and Gloria McCollough,  
Husband and wife, as JOINT TENANTS.

(hereinafter called GRANTOR(S)) in consideration of \$ A, the receipt of which is hereby acknowledged,

do hereby GRANT, BARGAIN, SALE and CONVEY to: WARREN McCollough and Gloria  
McCollough, Husband and wife as JOINT TENANTS, and Rhonda Farmer, AN,

(hereinafter called GRANTEE(S)) all that real property situated in the City of Alamo UNMARRIED

County of LINCOLN State of NEVADA WOMEN

bounded and described as follows: (set forth legal description AND commonly known street address)

See Attached Schedule C

Together with all singular hereditament and appurtenances hereunto belonging or in any way appertaining to.

IN WITNESS WHEREOF, I/We have hereunto set my hand/our hand(s) this 16 day of JAN., 2005

Warren L McCollough  
Signature of Grantor

Warren L McCollough  
Print or type name here

Gloria McCollough  
Signature of Grantor

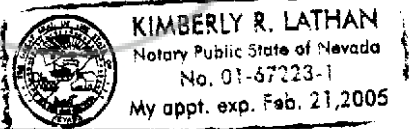
Gloria McCollough  
Print or type name here

STATE OF NEVADA )  
COUNTY OF LINCOLN )

This instrument was acknowledged before me on (date) January 16 2005

by (person(s) appearing before notary public) Warren L McCollough and Gloria McCollough

KLA  
Notary Public  
My commission expires: 2 21 2005



(Notary Stamp)

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

THIS SPACE FOR RECORDERS USE ONLY

Name: WARREN McCollough  
Address: PO Box 275 803 ANGEL  
City/State/Zip: ALAMO NV 89001  
LAS VEGAS 89145  
PO Box 275  
ALAMO NV 89001

SCHEDULE C

Policy No.: CNJP-1597-370346

All that certain real property situate in the County of Lincoln, State of Nevada, described as follows:

That portion of the North Half (N1/2) of the Northeast Quarter (NE1/4) of the Southwest Quarter (SW1/4) in Section 8, Township 7, South, Range 61 East, M.D.B.&M., more particularly described as follows:

Parcel 1 of that certain Parcel Map recorded August 6, 1984 in the Office of the County Recorder of Lincoln County, Nevada in Book A of Plats page 234 as File No. 80558, Lincoln County, Nevada records.



STATE OF NEVADA  
DECLARATION OF VALUE

**FOR RECORDERS USE ONLY**  
 Document/Instrument#: 124273  
 Book 199 Page 357-359  
 Date of Recording: April 6, 2005  
 Notes:

1. Assessor Parcel Number (s)  
 a) 03-031-041  
 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 \_\_\_\_\_

3. Total Value/Sales Price of Property \$ 0.00  
 Deed in Lieu of Foreclosure Only (value of property) (0.00)  
 Transfer Tax Value \$ 0.00  
**REAL PROPERTY TRANSFER TAX DUE** \$ 0.00

4. IF EXEMPTION CLAIMED:  
 a. Transfer tax exemption per NRS 375.090, Section 11  
 b. Explain reason for exemption: PARENTS adding Daughter to Deed.

5. Partial Interest: Percentage being transferred: 1/3 %

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 Warren S Mc Collough

Capacity GRANTOR

Signature Gloria Mc Collough

Capacity GRANTOR

**SELLER (GRANTOR) INFORMATION (Required)**

**BUYER (GRANTEE) INFORMATION (Required)**

WARREN McCollough + Gloria McCollough  
 Print name \_\_\_\_\_  
 Address P.O. Box 275  
Reno NV  
 City \_\_\_\_\_  
NV 89001  
 State \_\_\_\_\_ Zip \_\_\_\_\_

Rhonda Farmer  
 Print name \_\_\_\_\_  
 Address 808 Angus Stal IN  
LV NV  
 City \_\_\_\_\_  
NV 89145  
 State \_\_\_\_\_ Zip \_\_\_\_\_

**Company Requesting Recording**

Company's Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Escrow # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

DED106mk

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