

125577

FILED FOR RECORDING  
AT THE REQUEST OF

Sandra Taylor

2005 DEC 6 AM 9 40

LINCOLN COUNTY RECORDER  
FEE 15.00 46.80  
LESLIE B...

APN: 10-162-11  
Recording requested by and mail documents and  
tax statements to:

Name: Sandra Taylor

Address: 356 Emden Dr

City/State/Zip: Henderson NV 89015

DED104mk  
Nevada Legal Forms & Books, Inc. (702) 870-8977  
[www.legalformsrus.com](http://www.legalformsrus.com)

RPTT: \_\_\_\_\_

### QUITCLAIM DEED

THIS INDENTURE WITNESS That the GRANTOR(S): Jay Mount Day

for and in consideration of Eleven thousand nine hundred ninety Dollars (\$ 11,990.00)  
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): \_\_\_\_\_

Susan Russell  
all that real property situated in the City of Rachel

County of Lisianski, State of Nevada

bounded and described as follows: (Set forth legal description and commonly known address)

Lots 20 and 21 of Survey Area West #1  
A portion of the SE 1/4 and the S 1/2 of the  
NE 1/4 and the SE 1/4 of the SW 1/4 of Section  
35, Twp. 3 South, Range 55 E-1st N.D.M.

**WARNING: THE COUNTY RECORDER MAY CHARGE AN ADDITIONAL FEE IF YOU  
WRITE WITHIN THE 1" MARGINS OF THIS DOCUMENT OR VIOLATE ANY OTHER  
RECORDING REQUIREMENTS IMPOSED BY YOUR COUNTY RECORDER.**

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 12 day of Nov., 2005.

Fay Mount Day  
Signature of Grantor

Signature of Grantor

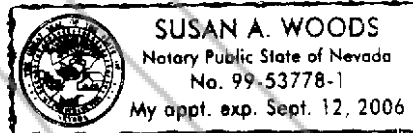
FAY MOUNT DAY  
Print or Type Name Here

Print or Type Name Here

STATE OF )  
COUNTY OF )

On this 12<sup>th</sup> day of NOVEMBER, 20 05, personally appeared before me, a Notary Public FAY MOUNT DAY personally known to me to be the person(s) whose name(e) is subscribed to the above instrument who acknowledged that s he executed this instrument. Witness my hand and official seal.

Susan A. Woods  
Notary Public



My commission expires: SEPT, 12, 2006

Consult an attorney if you doubt this forms fitness for your purpose.

# State of Nevada Declaration of Value

1. Assessor Parcel Number(s)

- a) 10-142-11
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

**FOR RECORDERS OPTIONAL USE ONLY**

Document / Instrument # 125577  
 Book: 209 Page: 250-251  
 Date of Recording: Dec 6, 2005  
 Notes: \_\_\_\_\_

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 \_\_\_\_\_

3. Total Value / Sales Price of Property

\$ 11,770.00  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ 412.80

Deed In Lieu 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: \_\_\_\_\_

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 Sandra Taylor Capacity Executor for grantor  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**

**BUYER (GRANTEE) INFORMATION**

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

Print Name Sandra Taylor executor for Susan Russell  
 Address 256 Linden St  
 City Henderson  
 State NV Zip 89015

**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)