

127769

FILED FOR RECORDING
AT THE REQUEST OF

Jimmy R. Barfield

2006 NOV 3 PM 9 28

LINCOLN COUNTY RECORDED
FEE \$15.00
78.00 DEP
LESLIE BOUCHER RD

APN 010-182-08

APN _____

APN _____

Quit Claim Deed

Title of Document

Grantees address and mail tax statement:

Jimmy R. & Jo Ann Barfield

HCR 61 Box 46

Rachel, NV 89001

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A.P.N. #	010-182-08
R.P.T.T.	\$
Escrow No.	Does Not Apply
Recording Requested By:	
Jimmy R. & Jo Ann Barfield	
Mail Tax Statements To:	Same as below
When Recorded Mail To:	
Jimmy R. & Jo Ann Barfield	
HCR 61 Box 46	
Rachel, NV 89001	

QUITCLAIM DEED

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Elaine K. Matthews, Grantor

hereby do/does REMISE, RELEASE AND FOREVER QUITCLAIM to Jimmy R. and Jo Ann Barfield, Grantee the following described real property situated in the County of Lincoln, State of Nevada:

Lot 25 in Sunset Acres Tract #^{Exm}2 APN 010-182-08
 Located on Sagebrush Way in Rachel, NV 89001

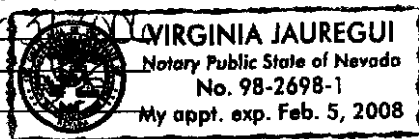
Dated: October 31, 2006
Elaine K. Matthews
 Elaine K. Matthews

State of Nevada }
 County of Clark } ss

This instrument was acknowledged before me on
 by: Elaine K. Matthews

Signature: Virginia Jauregui
 Notary Public

October 31, 2006
October 31, 2006



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**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

- a) 010-182-08
- 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 land w/personal property

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FOR RECORDER'S OPTIONAL USE ONLY	
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Date of Recording: _____	
Notes: _____	

3. Total Value/Sales Price of Property

\$ 20,000.00

Deed in Lieu of Foreclosure Only (value of property)

(_____)

Transfer Tax Value:

\$ _____

Real Property Transfer Tax Due

\$ 78.00

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 Elaine K. Matthews Capacity Grantor

Signature J. R. Barfield Capacity Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Elaine K. Matthews

Address: 4461 El Oro Street

City: Las Vegas

State: NV Zip: 89121

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Jimmy R. & Jo Ann Barfield

Address: HCR 61 Box 46

City: Rachel

State: NV Zip: 89001

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

Print Name: _____ Escrow #: _____

Address: _____

City: _____ State: _____ Zip: _____

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED

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