

Official Record

Recording requested By
ROBERT MAYO

Lincoln County - NV
Leslie Boucher - Recorder

Fee: \$40.00

Page 1 of 2

RPTT: \$15.60

Recorded By: LB

Book- 239 Page- 0641



0131113

APN 010-162-06

APN _____

APN _____

Quitclaim Deed

Title of Document

Affirmation Statement

X I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does not contain** the social security number of any person or persons. (Per NRS 239B.030)

_____ I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does contain** the social security number of a person or persons as required by law:

(State specific law)

RMAYO

Signature

Title

Signature

3/10/08

Date

Grantees address and mail tax statement:

ROBERT MAYO

1612 COUNCIL BLUFF LN

NORTH LAS VEGAS NV

89031

State of Nevada Declaration of Value

DOC # DV-131113
03/10/2008 11:29 AM
Official Record

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1. Assessor Parcel Number(s)
a) 010-167-06
b) _____
c) _____
d) _____

2. Type of Property
- | | |
|--|--|
| a) <input checked="" type="checkbox"/> Vacant Land | b) <input type="checkbox"/> Single Family Res. |
| c) <input type="checkbox"/> Condo/Townhouse | d) <input type="checkbox"/> 2-4 Plex |
| e) <input type="checkbox"/> Apartment Building | f) <input type="checkbox"/> Commercial /Ind'l |
| g) <input type="checkbox"/> Agriculture | h) <input type="checkbox"/> Mobile Home |
| i) <input type="checkbox"/> other _____ | |

FOR RECORDERS OPTIONAL USE ONLY
Document / Instrument # _____
Book: _____ Page: _____
Date of Recording: _____
Notes: _____

3. Total Value / Sales Price of Property \$ 4,000
Deed In Lieu Only (value of forgiven debt) \$ _____
Taxable Value \$ _____
Real Property Transfer Tax Due: \$ 15.60

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 1/2% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature [Signature] Capacity AGENT
Signature [Signature] Capacity _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

Print Name MERLINDA MAYO
Address 1612 COUNCIL BLUFF LN
City NORTH LAS VEGAS
State NV Zip 89031

Print Name ROBERT MAYO
Address 1612 COUNCIL BLUFF LN
City NORTH LAS VEGAS
State NV Zip 89031

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)