

Official Record

Recording requested By
MARVIN EDWARD THORNBURGH

Lincoln County - NV
Leslie Boucher - Recorder

Fee: \$15.00 Page 1 of 2
RPTT: \$117.00 Recorded By: LB
Book- 243 Page- 0100



APN: 00300804
Recording requested by and mail documents and
tax statements to:

Name: LINDA LEE HAGGARD
Address: 227 MAIN ST
City/State/Zip: CALIENTE NV
89008

DED104mk
Nevada Legal Forms & Books, Inc. (702) 870-8977
www.legalformsrus.com

RPTT: _____

QUITCLAIM DEED

THIS INDENTURE WITNESS That the GRANTOR(S): LINDA LEE HAGGARD

for and in consideration of 1 DOLLAR & NO CENTS Dollars (\$ 1.00/100)
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): _____

MARVIN EDWARD THORNBURGH
all that real property situated in the City of CALIENTE
County of LINCOLN State of NEVADA

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

COMMONLY KNOWN ADDRESS
227 MAIN ST CALIENTE NV
89008

ALL OF LOT TWO(2) AND THE EAST HALF OF LOT THREE(3)
IN BLOCK TWO(2) IN THE CITY OF CALIENTE, LINCOLN
COUNTY, NEVADA.

**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.**



0132275

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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 4 day of July 2008.

Linda Lee Hagar
Signature of Grantor

Signature of Grantor

LINDA LEE HAGAR
Print or Type Name Here

Print or Type Name Here

STATE OF _____)
COUNTY OF _____)


On this 4 day of July, 20 08, personally appeared before me, a Notary Public, Sarah Hamilton

personally known to me OR proved to me on the basis of satisfactory evidence to be the person(s) described in and who executed the foregoing instrument in the capacity set forth therein, who acknowledged to me that they executed the same freely and voluntarily and for the uses and purposes therein mentioned. Witness my hand and official seal.

Sarah Hamilton
Notary Public

My commission expires: 3/10/2010

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



State of Nevada Declaration of Value

DOC # DV-132275
07/11/2008 03:07 PM
Official Record

1. Assessor Parcel Number(s)
a) 00308804
b) _____
c) _____
d) _____

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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 _____

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

3. Total Value / Sales Price of Property \$ 29,857
Deed In Lieu Only (value of forgiven debt) \$ _____
Taxable Value \$ _____
Real Property Transfer Tax Due: \$ 117.00

4. If Exemption Claimed:
a. Transfer Tax Exemption, per NRS 375.090, section: _____
b. Explain Reason for Exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

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 Marvin Edward Thourburgh Capacity _____
Signature Linda Lee Haggard Capacity _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

Print Name LINDA LEE HAGGARD
Address PO BOX 562
City PICHE NV
State NEVADA Zip 89013

Print Name MARVIN THOURBURGH
Address PO BOX 562
City PICHE
State NEVADA Zip 89013

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)