

Official Record

Recording requested By  
ELWYN ROBINSON

Lincoln County - NV  
Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By: DP

Book- 255 Page- 0617



0135857

APN# 004-011-14

Quit Claim Deed

Type of Document

(Example: Declaration of Homestead, Quit Claim Deed, etc.)

Recording Requested by:

Robinson Family Trust

Return Documents To:

Name Elwyn Robinson

Address P.O. Box 183

City/State/Zip Alamo, Nev. 89001

This page added to provide additional information required by NRS 111.312 Section 1-2

(An additional recording fee of \$1.00 will apply)

This cover page must be typed or printed clearly in black ink only.



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Page 1 of 1 Fee: \$15.00  
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STATE OF NEVADA  
DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)

a. ~~004-011-12~~  
b. 004-011-14  
c. \_\_\_\_\_  
d. \_\_\_\_\_

2. Type of Property:

a.  Vacant Land  
b.  Single Fam. Res.  
c.  Condo/Twnhse  
d.  2-4 Plex  
e.  Apt. Bldg  
f.  Cumm'/Ind'l  
g.  Agricultural  
h.  Mobile Home  
 Other RES Agri

FOR RECORDER'S OPTIONAL USE ONLY

Book: \_\_\_\_\_ Page: \_\_\_\_\_  
Date of Recording: \_\_\_\_\_  
Notes: Trust on file DP

3. a. Total Value/Sales Price of Property

b. Deed in Lieu of Foreclosure Only (value of property) \_\_\_\_\_  
c. Transfer Tax Value: \$ \_\_\_\_\_  
d. Real Property Transfer Tax Due \$ \_\_\_\_\_

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section 7  
b. Explain Reason for Exemption: Transfer Trust

5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %

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: [Signature] Capacity: \_\_\_\_\_

Signature: [Signature] Capacity: \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
(REQUIRED)

Print Name: Elwyn & Kay Robinson  
Address: PO Box 183  
City: Glamo  
State: Nev Zip: 89001

**BUYER (GRANTEE) INFORMATION**  
(REQUIRED)

Print Name: Robinson Fam. Trust  
Address: PO Box 183  
City: Glamo  
State: Nev Zip: 89001

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

Print Name: Robinson Fam. Trust Escrow #: \_\_\_\_\_  
Address: PO Box 183  
City: Glamo Nev 89001 State: Nev Zip: 89001