

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- 0621



0135859

APN# 008-291-12

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 L. Robinson

Address P.O. Box 183

City/State/Zip Alamo, New 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.



QUITCLAIM DEED

Elwyn L. Robinson and Kae Robinson, as shown on deed, DO HEREBY QUITCLAIM TO: THE ROBINSON FAMILY TRUST, Elwyn L, and Margie Kae Robinson, Trustees, REAL PROPERTY IN THE COUNTY OF LINCOLN, STATE OF NEVADA, DESCRIBED AS:

Parcel # 008-291-12

Grantors address:
P.O. Box 183
Alamo, Nevada 89001

The East half of the Southeast quarter of the Northwest quarter of the Southeast quarter (E1/4SE1/4NW1/4SE1/4) and the Northeast quarter of the Northeast quarter of the Southwest quarter of the Southeast quarter (NE1/4NE1/4SW1/4SE1/4) of Section 21, Township 7 South, Range 61 East, M.D.B.&M.,

***** EXEMPTION #007 TRANSFER TO TRUST WITHOUT CONSIDERATION *******

SUBJECT TO: Reservations, restrictions and conditions if any; Rights of way and easements either of record or actually existing on said premises.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

WITNESS MY HAND ON THIS 13th day of April, 2010.

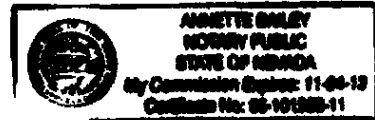
Elwyn L. Robinson
Elwyn L. Robinson, Trustee

Kae Robinson
Kae Robinson, Trustee

STATE OF NEVADA)
) SS:
COUNTY OF LINCOLN)

ON THIS 13th DAY OF APRIL, 2010 PERSONALLY APPEARED BEFORE ME A NOTARY PUBLIC, ELWYN L. AND KAE ROBINSON WHO ACKNOWLEDGED THE WITHIN INSTRUMENT WAS EXECUTED

Annette Bailey
NOTARY PUBLIC
NOTARY SEAL:



DOCUMENT PREPARED WITHOUT LIABILITY

WHEN RECORDED MAIL TO:
MAIL TAX INVOICE TO:
Mr. & Mrs. Elwyn L. Robinson.
P.O. Box 183.
Alamo, Nevada 89001

SPACE FOR RECORDER USE:

State of Nevada Declaration of Value

DOC # DV-135859
04/26/2010 03:20 PM
Official Record

Recording requested By
ELWYN ROBINSON

Lincoln County - NV
Leslie Boucher - Recorder

Page 1 of 1 Fee: \$15.00
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1. Assessor Parcel Number(s)
a) 008-291-12
b) _____
c) _____
d) _____

2. Type of Property
- | | |
|--|--|
| a) <input 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 checked="" type="checkbox"/> other <u>RES & Agri</u> | |

FOR RECORDERS OPTIONAL USE ONLY

Document / Instrument # _____
Book: _____ Page: _____
Date of Recording: _____
Notes: transfer field

3. Total Value / Sales Price of Property \$ _____
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: 7
b. Explain Reason for Exemption: TRANSFER TO TRUST

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 _____
Signature [Signature] Capacity _____

SELLER (GRANTOR) INFORMATION

Print Name Elwyn L Robinson
Address Box 183
City Alamo, NV
State NV Zip 89001

BUYER (GRANTEE) INFORMATION

Print Name Robinson Family Trust
Address Box 183
City Alamo
State NV Zip 89001

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)