APN: 002-181-04
Recording requested by and mail documents and tax statements to:

Name: P-Wdy Wcrber
Address: 1121 Dwnrown Garden St.

City/State/Zip: Hcndcrsan, NV 89002

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

www.legalformsrus.com

DOC # 0138620

07/05/2011

33.51 PM

Official Record
Recording requested By

Recording requested By RUDY & MEGAN WERBER

Lincoln County - NV
Leslie Boucher - Recorder
Fee: \$15.00 Page 1 of 2
RPTT: \$39.00 Recorded By: AE

RPTT: \$39.00 Reco Book- 264 Page- 0753



RPTT: ____ QUITCLAIM DEED

•			
THIS INDENTURE WITNESS That the GF	RANTOR(S):	_ \	
Anita Marie Torgenson Adam		<u> </u>	
for and in consideration of ten thous	iand [©]	Dollars (\$ 10	000
do hereby QUITCLAIM the right, title and i	nterest, if any, wi	nich GRANTOR may ha	eve in all that real
property, the receipt of which is hereby ack	76.	2 2	
Rudolph and Megan Werbe	76.		int tenants
all that real property situated in the City of			
County of Lincoln	State of_	Nevada	
bounded and described as follows: (Set fo	rth legal descript	ion and commonly know	wn address)
Commonly known addres			
	1 1		

Legal Description: S1/2 S1/2 of Lot 2 blk 27

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.

Quitclaim Deed

Page 1 of 2

Initials (

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 a a day of April 20 11 InterMarie Torgonson adam
Signature of Grantor
Signature of Grantor Anita Marie Torgenson Adam Print or Type Name Here Print or Type Name Here STATE OF **COUNTY OF** personally appeared before me, a Notary Public, <u>An: +A</u> MARIE Torgenson □ 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. ALYSON HAMMOND NOTARY PUBLIC STATE OF NEVADA APPT.No. 99-5313-11 MY APPT, EXPIRES AUG. 26, 2011 Notary Public

My commission expires: Avo 26. 2011

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

07/05/2011

Official Record

STATE OF NEVADA	Recording requested By RUDY & MEGAN WERBER
DECLARATION OF VALUE 1. Assessor Parcel Number (s)	Lincoln County - NV
• •	Leslie Boucher - Recorde
a) 002-191-04 b)	Page 1 of 1 Fee: \$15.00 Percented By: QF RPTT: \$39.00
c) d)	Book- 264 Page- 0753
· · · · · · · · · · · · · · · · · · ·	FOR RECORDERS OF HUNAL USE UNLY
2. Type of Property:	Document/Instrument #:BookPage
a) Vacant Land b) Single Fam. Res. b) Condo/Twnhse d) 2/4 Plex	Date of Recording:
e) Apt. Bldg f) Comm'l/Ind'l	Notes:
g) Agricultural h) Mobile Home	
i) Other	
3. Total Value/Sales Price of Property	\$ 10,000
Deed in Lieu of Foreclosure Only (value of property Transfer Tax Value:	
Real Property Transfer Tax Due	\$
4. IF EXEMPTION CLAIMED:	
a. Transfer Tax Exemption per NRS 375.090, S	Section
b. Explain Reason for Exemption:	
5. Partial Interest: Percentage being transferred:	100 %
NRS 375.110, that the information provided is corre supported by documentation if called upon to substa disallowance of any claimed exemption, or other de	under penalty of perjury, pursuant to NRS 375.060 and ect to the best of their information and belief, and can be entiate the information provided herein. Furthermore, the termination of additional tax due, may result in a penalty n. Pursuant to NRS 375.030, the Buyer and Seller shall bunt owed.
Signature antomas Turgenson as	dan Capacity Grantor
Signature VV	Capacity Cyrantee
OF LED CORNERS IN SOCIATION	
SELLER (GRANTOR) INFORMATION (REQUIRED)	BUYER (GRANTEE) INFORMATION (REQUIRED)
Print name: Anita Marie Torgenson Ada	AMPrint name: KWOIPH WEATHER
Address: 956 N. Old Farms Rd	
City: Dammeron Valley	
State: <u>U.T Zip: 84783</u>	State: Nevada Zip: 89002
COMPANY/PERSON REQUESTING RECORDING	(required if not seller or buyer)
Print Name:	Escrow#
Address:	
City:	State: Zip:
(AS A PUBLIC RECORD THIS FORM	M MAY BE RECORDED/MICROFILMED)