

When recorded, please return to:
William & Sharron Skupa
2412 Greens Ave.
Henderson, NV 89014
APN 001-331-87



QUITCLAIM DEED


For valuable consideration, the sum of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, **JAMES VINCENT, an unmarried man**, as the undersigned *Grantor*,

Do hereby REMISE, RELEASE, and FOREVER QUITCLAIM to **GINO JAMES VINCENT, an unmarried man, an undivided 50% interest, and to WILLIAM S. SKUPA and SHARRON R. SKUPA, as husband and wife, JTWS, an undivided 50% interest, Grantees**, the following described real property in the State of Nevada, County of Lincoln:

THAT PORTION OF THE NORTHEAST QUARTER (NE ¼) OF THE SOUTHEAST QUARTER (SE ¼) OF SECTION 10, TOWNSHIP 1 NORTH, RANGE 67 EAST, M.D.B. AND M., LINCOLN COUNTY, NEVADA, DESCRIBED AS FOLLOWS:

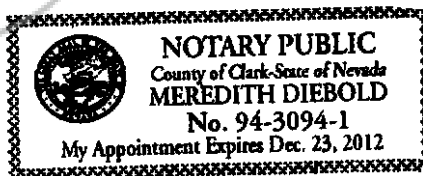
PARCEL 7, AS SHOWN UPON SUBSEQUENT PARCEL MAP FOR JIM VINCENT RECORDED NOVEMBER 17, 2003 IN PLAT BOOK C, PAGE 18, AS FILE 121256.

IN WITNESS WHEREOF, I hereunto set our hands this date: August 2, 2011.


JAMES VINCENT, Grantor

STATE OF NEVADA)
) ss
COUNTY OF CLARK)

This instrument was acknowledged before me
on August 2, 2011,
by Meredith Diebold
Notary Public



STATE OF NEVADA
DECLARATION OF VALUE FORM

Recording requested By
WILLIAM & SHARRON SKUPA

Lincoln County - NV
Leslie Boucher - Recorder

Page 1 of 2 Fee: \$14.00
Recorded By: AE RPTT: \$109.20
Book- 265 Page- 0255

- 1. Assessor Parcel Number(s)
 - a. 001-331-87
 - b. _____
 - c. _____
 - d. _____

- 2. Type of Property:

a. <input checked="" type="checkbox"/> Vacant Land	b. <input type="checkbox"/> Single Fam. Res.
c. <input type="checkbox"/> Condo/Twnhse	d. <input type="checkbox"/> 2-4 Plex
e. <input type="checkbox"/> Apt. Bldg	f. <input type="checkbox"/> Comm'l/Ind'l
g. <input type="checkbox"/> Agricultural	h. <input type="checkbox"/> Mobile Home
<input type="checkbox"/> Other _____	

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

- 3. a. Total Value/Sales Price of Property \$ 55,791.00
- b. Deed in Lieu of Foreclosure Only (value of property) ()
- c. Transfer Tax Value: \$ 27,985.50
- d. Real Property Transfer Tax Due \$ 109.20

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 5
- b. Explain Reason for Exemption: 50% - Father to Son

- 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: James Vincent

Capacity: Grantor

Signature: William & Sharron Skupa

Capacity: Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: James Vincent
Address: 850 So. Boulder Highway, Suite 247
City: Henderson
State: NV Zip: 89015

Print Name: William & Sharron Skupa
Address: 2412 Greens Avenue
City: Henderson
State: NV Zip: 89014

COMPANY REQUESTING RECORDING

Print Name: _____
Address: _____
City: _____

Escrow #: _____
State: _____ Zip: _____



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a. 001-331-87
 b. _____
 c. _____
 d. _____

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| <input type="checkbox"/> Other _____ | |

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Signature: *James Vincent*

Capacity: Grantor

Signature: *Gino Vincent*

Capacity: Grantee

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(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: James Vincent
 Address: 850 So. Boulder Highway, Suite 247
 City: Henderson
 State: NV Zip: 89015

Print Name: Gino James Vincent
 Address: 850 So. Boulder Highway, Suite 247
 City: Henderson
 State: NV Zip: 89015

COMPANY REQUESTING RECORDING

Print Name: _____
 Address: _____
 City: _____

Escrow #: _____
 State: _____ Zip: _____