



APN _____

APN _____

APN _____

Quit Claim Deed

Title of Document

Affirmation Statement

 7 I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does not contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of any person or persons. (Per NRS 239B.030)

_____ I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of a person or persons as required by law: _____
(State specific law)

Jake Wade
Signature

_____ Title

Jake Wade
Print

5-23-12
Date

Grantees address and mail tax statement:

Jake Wade
P.O. Box 165
Alamo, NV 89001

State of Nevada Declaration of Value

DOC # DV-142635
01/24/2013 10:22 AM
Official Record

Recording requested By
MICHAEL JAKE WADE

Lincoln County - NV
Leslie Boucher - Recorder

Page 1 of 1 Fee: \$15.00
Recorded By: AE RPTT: \$39.00
Book- 276 Page- 0410

1. Assessor Parcel Number(s)

- a) _____
- b) _____
- c) _____
- d) _____

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 Water rights and Grazing Allotments

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

3. Total Value / Sales Price of Property

\$ 10,000
\$ _____
\$ _____
\$ _____

Deed In Lieu Only (value of forgiven debt)

Taxable Value

Real Property Transfer Tax Due:

\$ 39.00

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 1/4% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature _____ Capacity _____

Signature [Signature] Capacity _____

SELLER (GRANTOR) INFORMATION
Eddie M. Bundy and Connie W Bundy

BUYER (GRANTEE) INFORMATION

Print Name of the Ed + Connie Bundy Family Trust
Address _____
City St. George
State UT Zip _____

Print Name Michael Jake Wade and Trevor L. Wade
Address P.O. Box 165
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)