

Official Record

Recording requested By
IKE N. & MICHELE MOSES

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By: AE

Book- 278 Page- 0005



0142944

After recording please return to:)

Name: IKE N MOSES)

Address: 8600 Willow Cabm St.)

City, State, Zip: Las Vegas, NV 89131)

Phone: 702-396-5588)

Assessor's
Parcel Number 006-231-03)

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QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That IKE N. MOSES, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to IKE N. MOSES AND Michele Moses as JOINT TENANTS with rights of Survivorship, all that real property situated in the town of Eagle Valley, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.)

See Exhibit A.

Commonly known as 14938 ~~11348~~ SR 322, Eagle Valley, Nevada

TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

WITNESS my hand(s) this 12 day of April, 2013.

IKE N. MOSES
Signature of Grantor

Signature of Grantor

STATE OF NEVADA)
COUNTY OF LINCOLN)

This instrument was acknowledged before me on this 12 day of April, 2013 by Ike Newton Moses and

M. Howard
NOTARY PUBLIC

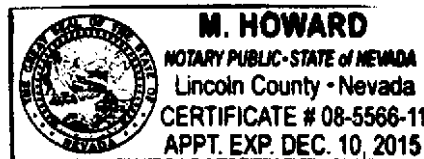




Exhibit A

BEGINNING at a point 100 feet East of the Southwest (SW) corner of the Southwest Quarter (SW 1/4) of the Northeast Quarter (NE 1/4) of Section 35, Township 2 North, Range 69 East, M.D.B. & M in the County of Lincoln, State of Nevada, and running thence North 330 feet to the TRUE POINT OF BEGINNING, thence continuing North 165 feet, then at right angle East 264 feet, thence at right angle South 165 feet, thence at right angle West 264 feet to the TRUE POINT OF BEGINNING

RESERVING HOWEVER, an easement for the irrigation ditch as presently located over said property.

ALSO RESERVING the Northerly 15 feet for a road right of way.

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STATE OF NEVADA
DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)
 a) ST 006-231-03
 b) _____
 c) _____
 d) _____

2. Type of Property:
- | | | | |
|-----------------------------|--------------|--|------------------|
| a) <input 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 checked="" type="checkbox"/> | Mobile Home |
| <input type="checkbox"/> | Other | | |

FOR RECORDER'S OPTIONAL USE ONLY	
Book: _____	Page: _____
Date of Recording: _____	
Notes: _____	

3. Total Value/Sales Price of Property \$ _____
 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, Section 5
 b. Explain Reason for Exemption: TRANSFERRING FROM HUSBAND TO
THE HUSBAND AND WIFE
 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 Ike N. Moses Capacity _____
 Signature Michele Moses Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)
 Print Name: IKE N. MOSES
 Address: 8600 Willow Cabin St
 City: LAS VEGAS
 State: NV Zip: 89131

BUYER (GRANTEE) INFORMATION
(REQUIRED)
 Print Name: IKE N. MOSES AND MICHELE MOSES
 Address: 8600 Willow Cabin St
 City: LAS VEGAS,
 State: NV Zip: 89131

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)
 Print Name: _____ Escrow #: _____
 Address: _____
 City: _____ State: _____ Zip: _____