

Official Record

Recording requested by
GERALD TAYLOR

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By: AE

Book- 278 Page- 0229



0143030

APN: 004-111-07

Recording requested by and mail documents and tax statements to:

Name: Gerald L. Taylor

Address: 8723 No. Four Views St

City/State/Zip: Las Vegas, Nv. 89143

DED104mk

Nevada Legal Forms & Tax Services, Inc.
www.nevadalegalforms.com

RPTT: _____

QUITCLAIM DEED

THIS INDENTURE WITNESS That the GRANTOR(S): Gerald Taylor, an
unmarried man

for and in consideration of 0 Dollars (\$ 0) do hereby QUITCLAIM

the right, title and interest, if any, which GRANTOR may have in all that real property, the receipt of which is hereby acknowledged, to the GRANTEE(S):

Samantha Lynn Rudder,
Andrea Lea Jorgensen, Jessica Rose Howard, and
Jamie Caye Taylor

all that real property situated in the City of Alamo, County of Lincoln,

State of Nevada, bounded and described as follows: (Set forth legal description

and commonly known address) commonly known address:

484 Michael Way, Alamo, Nv. 89001

Legal Description: Parcel 3-1 as shown on
subsequent Parcel Map for Gerald H. and Mary
S. Wilson recorded Aug. 6, 2001, in Plat book B,
page 382 as file 116798, and Certificate of
Amendment thereto recorded Sept. 21, 2001 in
Book 158, Page 319, as file 116925, Lincoln Co.
Nevada.



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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 30th day of April, 2013.

[Signature]
Signature of Grantor

Signature of Grantor

Gerald L. Taylor
Print or Type Name Here

Print or Type Name Here

STATE OF Nevada)
COUNTY OF Lincoln)

On this 30th day of April, 2013, personally appeared before me, a Notary Public, Gerald L. Taylor

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.

[Signature]
Notary Public
My commission expires: 01/20/2015
Consult an attorney if you doubt this forms fitness for your purpose.



Recording requested By
GERALD TAYLOR

STATE OF NEVADA
DECLARATION OF VALUE FORM

Lincoln County - NV
Leslie Boucher - Recorder

Page 1 of 2 Fee: \$15.00
Recorded By: AE RPTT:
Book- 278 Page- 0229

1. Assessor Parcel Number(s)
a. 004-111-07
b. _____
c. _____
d. _____

2. Type of Property:
a. Vacant Land b. Single Fam. Res. FOR RECORDER'S OPTIONAL USE ONLY
c. Condo/Twnhse d. 2-4 Plex Book: _____ Page: _____
e. Apt. Bldg f. Comm'l/Ind'l Date of Recording: _____
g. Agricultural h. Mobile Home Notes: _____
i. Other _____

3. a. Total Value/Sales Price of Property \$ 0
b. Deed in Lieu of Foreclosure Only (value of property) (_____
c. Transfer Tax Value: \$ 4587.00 *X*
d. Real Property Transfer Tax Due \$ 51.00 *X*

4. **If Exemption Claimed:**
a. Transfer Tax Exemption per NRS 375.090, Section 5
b. Explain Reason for Exemption: Deeding property to my daughters

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 [Signature] Capacity _____
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
Print Name: Gerald L. Taylor
Address: 8723 N. Four Views St.
City: Las Vegas
State: NV Zip: 89143

BUYER (GRANTEE) INFORMATION (REQUIRED)
Print Name: Samantha Lynn Ruckler
Address: 7604 Twisted Pine
City: Las Vegas
State: NV Zip: 89131

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

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED



DV 140030
04/30/2013

Andrea Lea Jorgensen
PO Box 346
Alamo, NV. 89001

Jessica Rose Howard
PO Box 133
Alamo, NV. 89001

Jamie Caye Taylor
7604 Twisted Pine
Las Vegas, NV. 89131

COOPY