

Official Record

Recording requested By
STEPHEN A. & DAWNE M. COMBS

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$14.00 Page 1 of 1
RPT: Recorded By: AE
Book- 279 Page- 0063



After recording please return to:

Name: Stephen & Dawne Combs

Address: PO Box 597

City, State, Zip: Pioche, NV 89043

Phone: 702-358-5940

Assessor's
Parcel Number 001-341-35

---Above This Line Reserved For Official Use Only---

QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That Stephen A. Combs, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to Stephen A. and Dawne M. Combs as husband and wife, all that real property situated in the town of Pioche, County of Lincoln, State of Nevada, more particularly described as follows:

Parcel 23, as shown upon parcel map for James Vincent recorded November 18, 1997, in Book B, page 74 of Plats, as file 110135 in the Northeast Quarter (NE ¼) of Section 15, Township 1 North, Range 67 East M.D.B. and M., Lincoln County, Nevada. Legal address is 403 Cedar Ridge St, Pioche, NV 89043.

Commonly known as 403 Cedar Ridge St, Pioche, NV 8043.

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

WITNESS ___ hand(s) this 30 day of May, 2013.

Stephen A. Combs

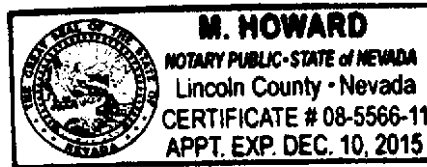
Signature of Grantor
STEPHEN A. Combs
STATE OF NEVADA)
COUNTY OF LINCOLN)

Signature of Grantor

This instrument was acknowledged before me on this 30 day of May, 2013 by Stephen Alan Combs and _____

M. Howard

NOTARY PUBLIC



Recording requested By
STEPHEN A. & DAWNE M. COMBS

STATE OF NEVADA
DECLARATION OF VALUE FORM

Lincoln County - NV
Leslie Boucher - Recorder

Page 1 of 1 Fee: \$14.00
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- 1. Assessor Parcel Number(s)
 - a) 001-341-35
 - b) _____
 - c) _____
 - d) _____

- 2. Type of Property:

<ul style="list-style-type: none"> a) <input type="checkbox"/> Vacant Land c) <input type="checkbox"/> Condo/Twnhse e) <input type="checkbox"/> Apt. Bldg g) <input type="checkbox"/> Agricultural <input type="checkbox"/> Other _____ 	<ul style="list-style-type: none"> b) <input checked="" type="checkbox"/> Single Fam. Res. d) <input type="checkbox"/> 2-4 Plex f) <input type="checkbox"/> Comm'l/Ind'l h) <input type="checkbox"/> Mobile Home
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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: Transfer from husband to 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 Stephen A Combs Capacity _____

Signature Dawne M Combs Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Stephen A. Combs

Address: PO Box 597

City: Piache,

State: NV Zip: 89043

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Stephen A. Combs + Dawne M. Combs

Address: PO Box 597

City: Piache

State: NV Zip: 89043

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: _____ Escrow #: _____

Address: _____

City: _____ State: _____ Zip: _____