

Official Record

Recording requested By  
MICHAEL S. ANDERSON

Lincoln County - NV  
Leslie Boucher - Recorder

Fee: \$14.00 Page 1 of 1  
RPTT: Recorded By: LB  
Book- 286 Page- 0614



0145327

After recording please return to: )  
Name: Michael S. Anderson )  
Address: P. O. Box 111 )  
City, State, Zip: Panaca, NV 89042-0111 )  
Phone: )  
Assessor's )  
Parcel Number 002-103-21 )

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QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That Michael S. Anderson and Carma Anderson in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to Michael S. Anderson, Carma Anderson, and Michael R. Anderson as joint tenants with rights of survivorship, all that real property situated in the town of Panaca, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.)

All of lot numbered Eighteen (18) in Sun Gold Manor Unit No. 1, as said lot is delineated on the official plat of said Sun Gold Unit No. 1, now on file and of record in the office of the County Recorder of said Lincoln County, and to which said plat and the records thereof reference is hereby made for further particular description.

Together with any and all buildings and improvements situate thereon.

Commonly known as 1400 Wadsworth Road

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

WITNESS hand(s) this 21 day of April, 2014.

*Michael S. Anderson*

*Carma S. Anderson*

Signature of Grantor  
Michael S. Anderson  
STATE OF NEVADA )  
COUNTY OF LINCOLN )

Signature of Grantor  
Carma Anderson

This instrument was acknowledged before me on this 21 day of April, 2014 by Michael S. Anderson and Carma Anderson

*Sarah Somers*

NOTARY PUBLIC



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STATE OF NEVADA  
DECLARATION OF VALUE FORM

- Assessor Parcel Number(s)
  - 002-103-21
  - 
  - 
  -

- Type of Property:
 

a) <input type="checkbox"/>	Vacant Land	b) <input checked="" 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: _____	

- 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:**

- Transfer Tax Exemption per NRS 375.090, Section 5
- Explain Reason for Exemption: Adding our son to the deed.

- 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 Carma Anderson Capacity grantor  
 Signature Michael S. Anderson Capacity grantor

**SELLER (GRANTOR) INFORMATION (REQUIRED)**

Print Name: Michael S. Anderson and Carma Anderson  
 Address: 1400 Wadsworth Road  
 City: Panaca, P.O. Box 111  
 State: Nevada Zip: 89042-0111

**BUYER (GRANTEE) INFORMATION (REQUIRED)**

Print Name: Michael S. Anderson, Carma Anderson and Michael Anderson  
 Address: 1400 Wadsworth Road  
 City: Panaca, P.O. Box 111  
 State: Nevada Zip: 89042-0111

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

Print Name: \_\_\_\_\_ Escrow #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_