



APN: 13-110-07
Recording requested by and mail documents and
Tax statements to:

Name: Bert & Natalie Cox

Address: PO Box 762

City/State/Zip: Caliente, NV. 89008

DED115

Nevada Legal Forms & Books, Inc. (702) 870-8977

www.legalformsrus.com

RPTT: _____

QUITCLAIM DEED

Creating Joint Tenancy

Dated this 27th day of October, 2016.

For valuable consideration, the sum of twenty thousand dollars,
Dollars (\$20,000) I/We, the undersigned, Alick J. Mackie, Trustee of the Alick J. Mackie Living Trust,
who acquired title to that certain property described below, and who is the Grantor(s) herein, does hereby
Quitclaim to: BERT L. COX and NATALIE COX as Joint Tenants, and Grantee(s) all that real property
situated in the county of unincorporated area,
County of Lincoln, State of Nevada,

Described as: (set forth legal description and commonly known address)
The Southeast Quarter (SE ¼) of the Northwest Quarter (NW ¼) of section 5, Township 4 South, Range 67
East, M.D.M. Meridian, State of Nevada, County of Lincoln.

WARNING: THE COUNTY RECORDER MAY CHARGE AN ADDITIONAL FEE IF YOU WRITE
WITHIN THE 1" MARGINS OF THIS DOCUMENT OR VIOLATE ANY OTHER RECORDING
REQUIREMENTS IMPOSED BY YOUR COUNTY RECORDER



0150420

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In Witness Whereof, I/We hereunto set my/our hands this 28th day of October 2016.

Alick J Mackie

Signature

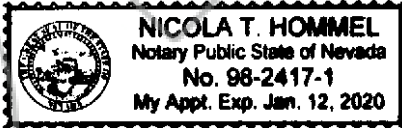
Alick J. Mackie

Print or type name here

STATE OF NEVADA) Clark
COUNTY OF ~~LINCOLN~~)

On this 28th day of Oct, 2016, personally appeared before me, a Notary Public, Alick J. Mackie trustee.
 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 she executed the same freely and voluntarily and for the uses and purposes therein mentioned. Witness my hand and official seal.

Nicola T. Hommel
Notary Public
My commission expires: Jan. 12, 2020
Consult an attorney if you doubt this forms fitness for your purpose.



Recording requested By
 BERT COX

Lincoln County - NV
 Leslie Boucher - Recorder

Page 1 of 1 Fee: \$15.00
 Recorded By: LB RPTT: \$78.00
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**STATE OF NEVADA
 DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

- a) 13-110-07
- b) _____
- c) _____
- d) _____

2. Type of Property:

- a) Vacant Land
- b) Single Fam. Res.
- c) Condo/Twnhse
- d) 2-4 Plex
- e) Apt. Bldg
- f) Comm'/Ind'l
- g) Agricultural
- h) Mobile Home
- Other

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

3. Total Value/Sales Price of Property

\$ 20,000
 Deed in Lieu of Foreclosure Only (value of property) (_____)
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due \$ 78.00

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 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 Grantor Trustee

Signature [Signature] Capacity Grantee

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

Print Name: Mackie Family Trust
 Address: 928 Sand Gabriel Ave
 City: Henderson
 State: NV Zip: 89002

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

Print Name: Bert & Natalie Cox
 Address: P.O. Box 762
 City: Caliente
 State: NV Zip: 89008

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

Print Name: _____ Escrow #: _____
 Address: _____
 City: _____ State: _____ Zip: _____