



00000112201801540970020022

OFFICIAL RECORD  
LESLIE BOUCHER, RECORDER

After recording please return to: )  
)  
Name: NNP Trust )  
)  
Address: P.O Box 232 )  
)  
City, State, Zip: Pioche, NV. 89043 )  
)  
Phone: 775-962-3582 )  
)  
Assessor's )  
Parcel Number 001-101-05 )

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**QUIT CLAIM DEED**

THIS INDENTURE WITNESSETH:

That **JAMES ARTHUR MCCAIN**, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to **NNP TRUST**, all that real property situated in the town of **PIOCHE**, County of Lincoln, State of Nevada, more particularly described as follows:

All lots numbered Twenty-Four (24), Twenty-Five (25), Twenty-Six (26), Twenty-Seven (27), Twenty-Eight (28), Twenty-Nine (29) and Thirty (30) in Block Eighteen (18) in the **TOWN OF PIOCHE, NEVADA** on file and of record in the Office of the County recorder of said **LINCOLN COUNTY, NEVADA** and to which plat and the records thereof reference is hereby made for further Particular description,

Also, any and all improvements situated on the above described land consisting of a small house, a cabin, a shed and chicken coops and including all fixtures and furniture therein as of date of delivery.

Assessor's Parcel Number **001-101-05**

SUBJECT TO:

- 1. Taxes for fiscal year;
- 2. Conditions, Restrictions, Reservations, Rights, Rights of way and Easements, of record.

Commonly known as: **550 Main Street Pioche, NV. 89043.**

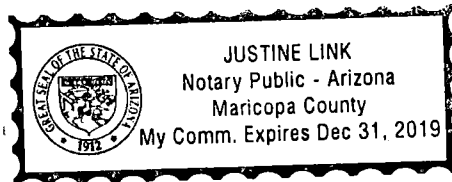
TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

WITNESS MY hand(s) this 28th day of MARCH, 2018.

Signature of Grantor  
JAMES ARTHUR MCCAIN  
STATE OF NEVADA )  
COUNTY OF LINCOLN )

This instrument was acknowledged before me on this 28 day of March, 2018 by James McCain and

Justine Link  
NOTARY PUBLIC



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) 001-101-05  
 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'l/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      \$ 14,000.00  
 Deed in Lieu of Foreclosure Only (value of property)      ( \_\_\_\_\_ )  
 Transfer Tax Value:      \$ 14,000.00  
 Real Property Transfer Tax Due      \$ 54.60

4. **If Exemption Claimed:**  
 a. Transfer Tax Exemption per NRS 375.090, Section \_\_\_\_\_  
 b. Explain Reason for Exemption: \_\_\_\_\_

5. Partial Interest: Percentage being transferred: 100 %  
 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 \_\_\_\_\_ Capacity SELLER  
 Signature \_\_\_\_\_ Capacity BUYER

**SELLER (GRANTOR) INFORMATION**  
 (REQUIRED)  
 Print Name: JAMES ARTHUR McCLAIN  
 Address: 11023 S. 200 8th LN  
 City: BUCKEYE  
 State: AZ / Zip: 85326

**BUYER (GRANTEE) INFORMATION**  
 (REQUIRED)  
 Print Name: KEN MEYER FOR NMP TRUST  
 Address: PO, Box 232  
 City: Pigeon  
 State: NV / Zip: 89043

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