LINCOLN COUNTY, NV

2018-155378

Rec:\$35.00 Total:\$35.00

11/05/2018 01:11 PM

M & R WHIPPLE RANCH LLC

Pgs=4 AE



OFFICIAL RECORD
LESLIE BOUCHER, RECORDER

E07

RETURN RECORDED DEED TO: M and R Whipple Ranch LLC 5025 Dry Farm Road Hiko, Nevada 89017

APN: 011-070-39

GRANTEE/MAIL TAX STATEMENTS TO: M and R Whipple Ranch LLC 5025 Dry Farm Road Hiko, Nevada 89017

QUITCLAIM DEED

THIS INDENTURE, made and entered into this <u>5</u> day of <u>November</u>, 2018, between KEITH MURRY WHIPPLE, Jr., Successor Trustee of the KEITH MURRY WHIPPLE, SR., FAMILY TRUST dated July 14, 2006, the party of the first part and hereinafter referred to as "GRANTOR", and M and R WHIPPLE RANCH LLC, and as the party of the second part and hereinafter referred to as "GRANTEES."

WITNESSETH:

That the GRANTOR does hereby quitclaim unto the GRANTEE, and to their heirs and assigns, forever, all their right, title and interest in and to those certain lots, pieces and parcels of land situate in Hiko, County of Lincoln, State of Nevada, and more particularly described as follows, to-wit:

Parcel 2 of the SUBSEQUENT PARCEL MAP For Keith Murray Whipple Family Trust, recorded on February 26, 2013 in the Official Record of the Lincoln County Recorder's Office, State of Nevada, Document #0142781, in Book D, Page 0085, consisting of approximately 4.217 Acres.

TOGETHER WITH all and singular the tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining and the reversion(s), remainder(s), rents, issues and profits thereof; also all possession, claim and demand whatsoever, as well as in law as in equity of the said party of the first part, of, in, or to the said premises.

TO HAVE AND TO HOLD, all and singular, the said premises together with the appurtenances, unto the said GRANTEES, and to their heirs and assigns, forever.

first above written.
Keith Murry WHIPPLA, JR.
Successor Trustee – Keith Murry Whipple, Sr., Family Trust
State of NEVADA))ss.
County of LINCOLN).
On this 52 day of November 2018, ***KEITH MURRY WHIPPLE
IR. ***personally appeared before me and proved to me to be the person described in and who executed the foregoing Quitclaim Deed, who acknowledged that he executed the same freely and voluntarily and for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal.

NOTARY PUBLIC

ALISHA ADAMS Notary Public-State of Nevada

APPT. NO. 97-2573-11 My Appt: Expires 06-17-2021

IN WITNESS WHEREOF, the GRANTOR has hereunto set his hand the day and year

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number(s)	^
a 011-070-39	/\
b. ·	()
C	\ \
d.	\ \
2. Type of Property:	\ \
a. Vacant Land b. Single Fam. Res.	FOR RECORDERS 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: Treat on File ?
Other	Troiss 17057 AT PIGE
3.a. Total Value/Sales Price of Property	
b. Deed in Lieu of Foreclosure Only (value of pro	nouts (
c. Transfer Tax Value:	perty (
	2
d. Real Property Transfer Tax Due	*
4. If Exemption Claimed:	
	Soution 7
a. Transfer Tax Exemption per NRS 375.090,	
b. Explain Reason for Exemption: A transfer of	
consideration if a certificate of trust is prese	
5. Partial Interest: Percentage being transferred: 1	- The second se
The undersigned declares and acknowledges, under	
and NRS 375.110, that the information provided is	
	bon to substantiate the information provided herein.
Furthermore, the parties agree that disallowance of a	
	f the tax due plus interest at 1% per month. Pursuant
to INKS 3/3.030, the Buyer and Seller shall be joint.	ly and severally liable for any additional amount owe
Signature V-old Mayor lashall	Consider CRANTOR
Signature Killy My	Capacity: GRANTOR
Simone 16 will Mine villadi I	Consider CDANITEE
Signature her frum why h	Capacity: GRANTEE
CELLED (CD ANTOD) INDODRA TION	DUNETO (CIE) A RIGUESTA VALENCIA DA CASTANIA
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: See Attached	Print Name: See Attached
Address:	Address:
City.	City:
State: Zip:	State: Zip:
COMPANY/DEDOOM DEOLIGOMING PROCES	NAME OF THE PARTY
COMPANY/PERSON REQUESTING RECORI	
Print Name:	Escrow #
Address:	Q1
City:	State: Zip:

SELLER (GRANTOR)/ BUYER (GRANTEE) INFORMATION

