

Valerie

After recording please return to twitcheLL  
Name: Stuart Valerie  
TwitcheLL  
Address: PO Box 401  
City, State, Zip: Alamo, NV.  
Phone: 801-573-7562 89001  
Assessor's  
Parcel Number 011-200-73



OFFICIAL RECORD E07  
AMY ELMER, RECORDER

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QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That Higbee 1979 Trust, in consideration of TEN  
DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever  
quitclaim to Valerie and Stuart TwitcheLL  
as joint rights of survivorship,  
all that real property situated in the town of Alamo, County of Lincoln, State of Nevada, more particularly  
described as follows: (Insert legal description and the commonly known address in the space provided.)

see exhibit A

Commonly known as 1405 Old Sharp Lane

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

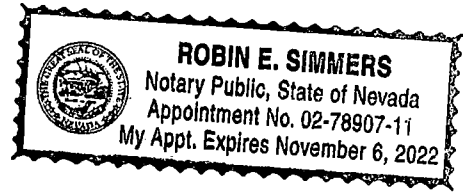
WITNESS ~~my~~ hand(s) this 19 day of August, 2019.

Vance L. Higbee  
Signature of Grantor  
Vance L. Higbee  
STATE OF NEVADA )  
COUNTY OF LINCOLN )

Vaughn M. Higbee  
Signature of Grantor  
Vaughn M. Higbee

This instrument was acknowledged before me on  
this 19 day of August, 2019 by  
Vance L. Higbee and  
Vaughn M. Higbee

Robin E. Simmers  
NOTARY PUBLIC

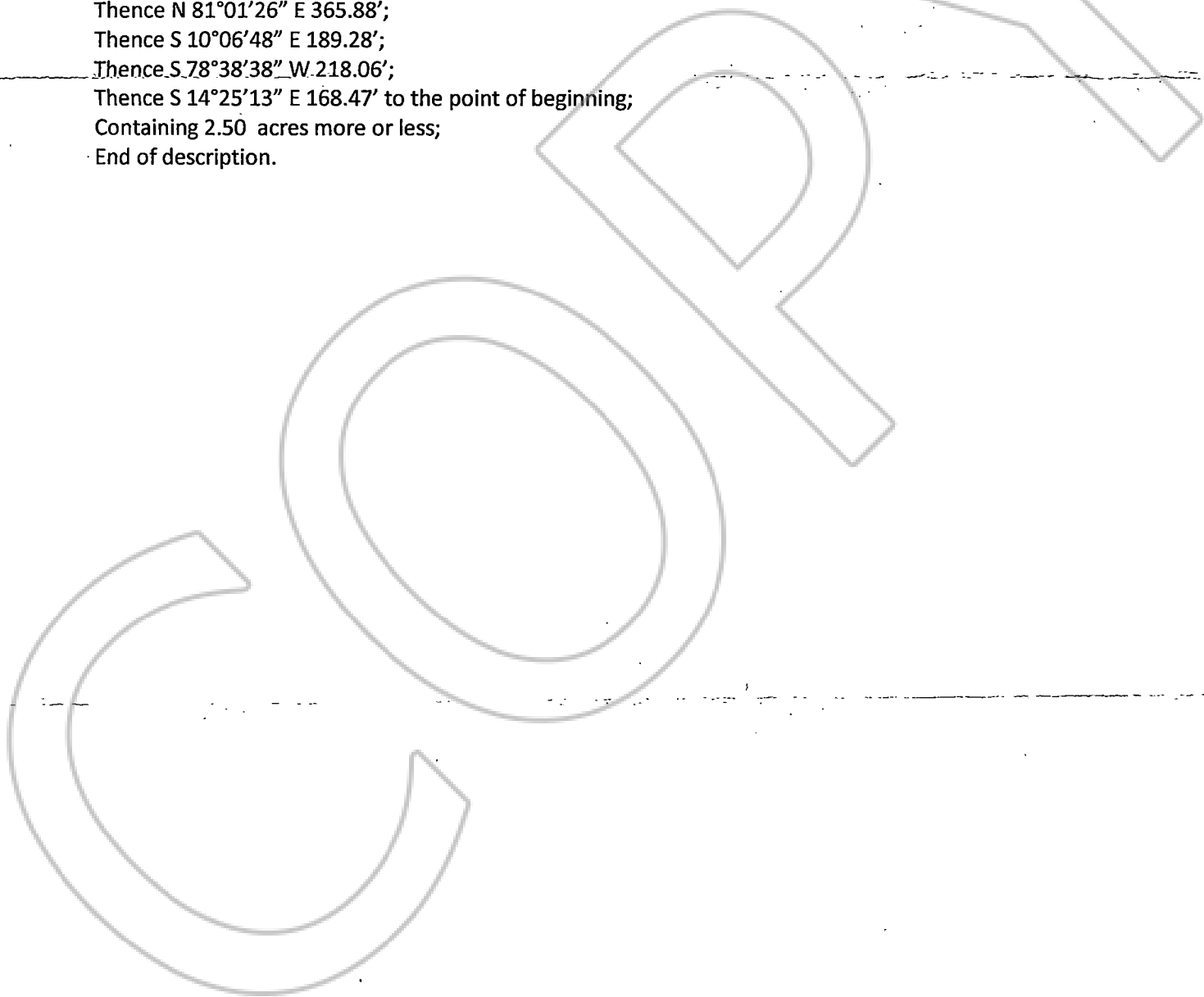


DESCRIPTION

*Joe Trust*

Parcel 1A-4 of Parcel Map for Joe and Evelyn Trust located in Section 32, Township 6 South, Range 61 East in Lincoln County, Nevada Recorded 4-25-19 Document #2019-156185 and hereby more particularly described as follows:

Beginning at the southeast corner situated on the east-west centerline of said Section 2 at a point from which the east quarter corner bears S 89°04'27" E 2044.71';  
Thence N 89°04'27" W 239.77' along said centerline;  
Thence N 6°00'18" W 171.40';  
Thence N 54°01'45" E 63.72';  
Thence N 7°41'42" W 124.71';  
Thence N 81°01'26" E 365.88';  
Thence S 10°06'48" E 189.28';  
Thence S 78°38'38" W 218.06';  
Thence S 14°25'13" E 168.47' to the point of beginning;  
Containing 2.50 acres more or less;  
End of description.



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

- a) 011-200-73
- 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: <u>Trust on File</u>	

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 7
- b. Explain Reason for Exemption: transfer from trust with NO consideration - given to daughter

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 \_\_\_\_\_ Capacity \_\_\_\_\_

Signature Valerie H. Twitchell Capacity \_\_\_\_\_

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

Print Name: Hogbee 1979 Trust  
 Address: PO Box 354  
 City: Alamo  
 State: NV Zip: 89001

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

Print Name: Valerie and Stuart Twitchell  
 Address: PO Box 401  
 City: Alamo  
 State: NV Zip: 89001

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

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