

After recording please return to:

Name: Rebekah Hatch
Address: 4018 Oak Ln
City, State, Zip: Hiko, NV 89017
Phone: 702-419-1700
Assessor's Parcel Number: 011-090-31

LINCOLN COUNTY, NV **2020-158054**
Rec:\$37.00
Total:\$37.00 **01/31/2020 04:09 PM**
RYAN AND REBEKAH HATCH Pgs=3 KE



OFFICIAL RECORD
AMY ELMER, RECORDER

E05

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QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That Rocky J. Hatch and Lynda W. Hatch, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to Ryan and Rebekah Hatch as husband and wife as joint tenants with rights of survivorship, all that real property situated in the town of Hiko, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.)

See Attached

Commonly known as Parcel 5A of the Rocky J. Hatch Family Trust

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

WITNESS hand(s) this 9 day of October, 2018.

Rocky J. Hatch
Signature of Grantor

Lynda W. Hatch
Signature of Grantor

STATE OF NEVADA)
COUNTY OF LINCOLN)

This instrument was acknowledged before me on this 9 day of October, 2018 by Rocky J. Hatch and Lynda W. Hatch.

Robin E. Simmers
NOTARY PUBLIC



DESCRIPTION

A parcel of land situated in Section 34, Township 4 South, Range 60 East of the Mount Diablo Meridian, shown on a Parcel Map Recorded as Document # 2018-154131 and more particularly described as follows:

Beginning on the east side of NR 318 at a point from which the west quarter corner of said Section 34 bears N 33°11'14" W 3096.48';
Thence S 89°46'52" E 233.07';
Thence S 00°32'19" W 159.85';
Thence S 84°15'26" W 280.89';
Thence N 13°22'33" E 194.10' to the point of beginning.

Containing 1.019 acres (44,383 sq. ft.) more or less.

End of description.

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 011-090-31
 b) _____
 c) _____
 d) _____

2. Type of Property:
- | | | | |
|--|--------------|-----------------------------|------------------|
| a) <input checked="" type="checkbox"/> | Vacant Land | b) <input 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: _____	

3. Total Value/Sales Price of Property \$ 0
 Deed in Lieu of Foreclosure Only (value of property) (_____)
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due \$ 0

4. **If Exemption Claimed:**
 a. Transfer Tax Exemption per NRS 375.090, Section 5
 b. Explain Reason for Exemption: Seller is mother to buyer

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 Rebekah Hatch Capacity Grantee

Signature Ryan Hatch Capacity Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Rocky J. Hatch and Lyndaw Hatch
 Address: 410A Kay Wright Ranch Rd
 City: Hiko
 State: NV Zip: 89017

Print Name: Ryan and Rebekah Hatch
 Address: 4018 Oak Ln
 City: Hiko
 State: NV Zip: 89017

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

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