

Prepared By

Name: Clint Robison
Address: 280 Sutton Hills Place
State: NV Zip Code: 89002



OFFICIAL RECORD
AMY ELMER, RECORDER

After Recording Return To

Name: Clint Robison
Address: 280 Sutton Hills Place
State: Henderson Zip Code: 89002

Parcel # ^{NV} 001-27015

Space Above This Line for Recorder's Use

NEVADA QUIT CLAIM DEED

STATE OF NEVADA

COUNTY OF _____

KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of sixteen thousand (\$16,000) in hand paid to Leslie Parks, as Sole trustee, James L. Parks separate family trust, residing at 4415 Topaz St. County of Clark, City of Las Vegas, State of Nevada (hereinafter known as the "Grantor(s)") hereby conveys and quitclaims to Clint Robison/Lisa Hbl a _____, residing at 280 Sutton Hills Pl County of Clark, City of Las Vegas, State of Nevada (hereinafter known as the "Grantees(s)") all the rights, title, interest, and claim in or to the following described real estate, situated in the County of Clark, Nevada to-wit:

Lincoln County: property parcel # 001-27015
* See exhibit A

To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever for the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.



Leslie Park TTE
Grantor's Signature

Leslie Park TTE
Grantor's Name

SP. Leslie Park 4415 Topaz St.

Las Vegas, NV 89121
Address
City, State & Zip

Grantor's Signature

Grantor's Name

Address

City, State & Zip

STATE OF NEVADA)

COUNTY OF CLARK)

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that LESLIE PARK whose names are signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they, executed the same voluntarily on the day the same bears date.

Given under my hand this 4 day of NOVEMBER, 2020.

Giovanni L. Anacta
Notary Public

My Commission Expires: APRIL 29, 2023

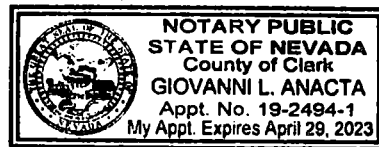


Exhibit "A"

Situated within the southwest quarter (SW 1/4) of the N.E. quarter (NE 1/4), of the Southeast Quarter (SE 1/4) of section 11, T. 1. N., R. 67 E. M.D.M., Town of Pioche, Lincoln County, State of Nevada, more particularly described as follows:

Parcel Forty Four (44), (SW 1/4, SW 1/4, NE 1/4, SE 1/4), as shown on that certain parcel map recorded, July 3rd, 2006 in PLAT Book (" PAGE 230, as file no. 126779, in the office of the County Recorder of Lincoln Co, NV.

**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)
 a. 001-270-15
 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 RECORDERS OPTIONAL USE ONLY
 Book _____ Page: _____
 Date of Recording: _____
 Notes: _____

3.a. Total Value/Sales Price of Property \$ 16,000.00
 b. Deed in Lieu of Foreclosure Only (value of property (_____)
 c. Transfer Tax Value: \$ _____
 d. Real Property Transfer Tax Due \$ 62.40

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: _____
 Signature: [Signature] Capacity: Grantee

SELLER (GRANTOR) INFORMATION
 (REQUIRED)
 Print Name: Leslie Parker, Trustee
 Address: 4415 TAPAZ ST.
 City: LAS VEGAS
 State: NV Zip: 89121

BUYER (GRANTEE) INFORMATION
 (REQUIRED)
 Print Name: Clint Robinson / Lizia Hohl
 Address: 280 Sutton Hills Pl
 City: Henderson
 State: NV Zip: 89102

COMPANY/PERSON REQUESTING RECORDING (Required if not seller or buyer)
 Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED