				LINCOLN COUNTY, NV	2021-160943	
) Ç	After recording please return to:			Rec:\$37.00 Total:\$37.00	08/05/2021 11:24 AM	i
	Name:	Nikki Ann Bai	ilei/)	NIKKI ANN BAILEY	Pgs=2 KC	;
	Address:	128 Davis St. 20 Box 145)			
;	City, State, Zip:	775-962-2582)43)	00007613202101609430	E04	
F.	Phone:	113-462-0382		OFFICIAL RECORD AMY ELMER, RECORDE	1 1	
	Assessor's Parcel Number	001-123-02				•
			Abov	e This Line Reserved For Off	ficial Use Only	
OTHE OF A LIM DEED						
THIS INDENTURE WITNESSETH: That Mathew Bailey & Nikkithan Bailey in consideration of TEN						
	described as follows	: (Insert legal description and th	e commonly known	address in the space pro	a, more particularly vided.)	Lad
			76. 76.	C # () # \ / /		ecteu
Lots 243 of block 22 in the town of Piochl, NV. as delineated on the allicity plat of said town, now on file and of second in the						
The Lincoln County Recorder, and to which sour plat and						
on the official plat of said town, now on file and of record in the office of the Lincoln County Recorder, and to which said plat and office of the Lincoln County Recorder, and to which said plat and						
the records therest lettrener is the property to Grantors in						
office of the Lincoln County Recorder, and to which said plat and effice of the Lincoln County Recorder, and to which said plat and the records thereof reference is hereby made for further description. The records of the Lincoln Referencing a prior instrument conveying said property to Grantors in document 122527 in book 187 pages 382-384 in the records of the Lincoln Commonly known as Parcel 201-123-02 lots 243 of Black 22						
document 122527 in book 181 pages 382-584 11 Courtry Kecorder.						
Commonly known as Parcel 001-123-02 lots 243 of Block 22.						
TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging						
or in anywise appertaining.						
WITNESS $\frac{\partial U'}{\partial u}$ hand(s) this $\frac{\partial Q}{\partial u}$ day of $\frac{\partial U}{\partial u}$, 2021.						
/ /	Mauto	Railer	Mil	W Bin		
	Signature of Grant	701. 7	Signature	e of Grantor		
\ '	MAHLew		NIKI	Ki Bailey		
	STATE OF NEVAL COUNTY OF LINC		•			
1		/ /				
	This instrument was this <u>19</u> day of	acknowledged before me on JUNE, 2021 by				
	MATTHEW BAI	UEY and		NOTARY PUBLIC	,	
,	NIKKI BATI	FY.	S S	TATE OF NEVADA		
		De	No. 17-2767-11 MY APT	PT. EXPIRES JUNE 20, 2025		
:	NOTARY PUBLIC	\sim				

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STATE OF NEVADA DECLARATION OF VALUE FORM 1. Assessor Parcel Number(s) a) 001-123-02 b) c) d) 2. Type of Property: a) Vacant Land b) Single Fam. Res. FOR RECORDER'S OPTIONAL USE ONLY c) Condo/Twnhse d) 2-4 Plex Page: Apt. Bldg Date of Recording: e) f) Comm'l/Ind'l Agricultural h) Mobile Home g) Notes: Other 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 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. Capacity GRantee Signature Signature_ Capacity ___ **BUYER (GRANTEE) INFORMATION** SELLER (GRANTOR) INFORMATION (REQUIRED) (REQUIRED) Print Name: Mathew Bailey + Nikki ann Bai Print Name: Nikki ann Bailey Address: AC34 BOX 200 128 dayis St BOX 45 Address: 128 dayis St BOX 14 City: <u>Panac</u> a City: Pioche 89643 State: NV Zip: 89043 State: \1\ COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer) Escrow #: Print Name:

State: Zip:

Address:

City: