10/27/2021 04:00 PM LONNY & CONNIE WALCH After recording please return to: Name: Áddress: OFFICIAL RECORD AMY ELMER, RECORDER City, State, Zip: 89001 Phone: Assessor's Parcel Number -Above This Line Reserved For Official Use Only GRANT, BARGAIN AND SALE DEED THIS INDENTURE WITNESSETH: That Lowy Walch and Course Walch, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby grant, bargain, sell and convey to Denvis D. Hamrick J- and Kami Hamrick as Joint Tenants with right of Syrvivorship. all that real property situated in the town of Algo, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.) Lot 2 of Map document # 2020-159368 Lincoln County NV, USA as recorded on 12/23/2020 SUBJECT TO: 1. Taxes for the fiscal year of 2021 - 2022. 2. Rights of way, reservations, restrictions, easements and conditions of record. Commonly known as Assessor Darcel # 004-14F77 TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining. hand(s) this 15 day of October Signature of Grantor Connie Walch STATE OF NEVADA COUNTY OF LINCOLN) This instrument was acknowledged before me on this 15 day of October ____, 2020 by ROBIN E. SIMMERS Long Walch and Notary Public, State of Nevada Connie Water Appointment No. 02-78907-11 My Appt. Expires November 6, 2022 COSTA !

NOTARY PUBLIC

LINCOLN COUNTY, NV.

Rec:\$37.00

Total:\$37.00

2021-161540

Pgs=2 AK

E05

STATE OF NEVADA **DECLARATION OF VALUE FORM** 1. Assessor Parcel Number(s) a) 004-141-77 c) d) 2. Type of Property: a) 🔀 Vacant Land b) Single Fam. Res. FOR RECORDER'S OPTIONAL USE ONLY Condo/Twnhse d) 2-4 Plex c) Book: Page: Comm'l/Ind'l Date of Recording:____ e) Apt. Bldg f) [Agricultural Mobile Home h) Notes: g) 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 5 b. Explain Reason for Exemption: TRANSFER TO DAUGHTER AND SON-IN-5. Partial Interest: Percentage being transferred: 100 % 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 GRANTOR Signature . Signature

Signature	Capacity
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: LONNY AND CONNIE WALCH	Print Name: DENNIS D. HAMRICK JR AND KAMI HAMIRICK
Address: Po Box 524	Address: Po Box 514
City: ALAMO	City: ALAMO
State: <u>NV</u> Zip: <u>89001</u>	State: <u>NV</u> Zip: <u>8900/</u>
COLOR ANY MEDICAN PROVINCENIC PRICAD	

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

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