

After recording please return to:)

Name: Dakota P. Fallis)
 Address: 1225 East 11th)
 City, State, Zip: Medford Oregon 97504)
 Phone: 1-541-846-6782)
 Assessor's Parcel Number 010-161-03)



OFFICIAL RECORD
 AMY ELMER, RECORDER

E05

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QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That Michael L. Fallis, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to Dakota Pepper Fallis as Sole and Separate property, all that real property situated in the town of Rachel, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.)

Lots 4 and 5, Sunrise Acres, Tract No. 1,
A portion of the SE 1/4 of the NE 1/4 and the SE 1/4
of the SW 1/4 of Section 35, TWP. 3 South Range
55 East M.D.B. & M.

APN 010-161-03

Commonly known as Raw Land

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

WITNESS ___ hand(s) this 19th day of July, 2018.2022

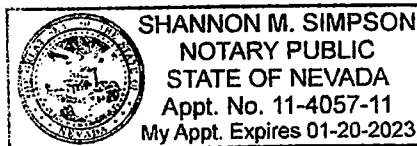
Michael L. Fallis

Signature of Grantor
Michael L. Fallis
 STATE OF NEVADA)
 COUNTY OF LINCOLN)

Signature of Grantor

This instrument was acknowledged before me on this 19th day of July, 2022, 2018 by Michael Leslie Fallis and xxxx

Shannon M. Simpson
 NOTARY PUBLIC



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 010-161-03
 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: _____

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: Transferring from Father to son
without consideration

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.

Signature Michael L. Fallis Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)
 Print Name: Michael L. Fallis
 Address: 5202 Groves Ave
 City: Alamo
 State: Nevada Zip: 89001-2182

BUYER (GRANTEE) INFORMATION
(REQUIRED)
 Print Name: Dakota Pepper Fallis
 Address: 1225 East 11th
 City: Medford
 State: Oregon Zip: 97504

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