

APN NO: 001-193-32

RECORDING REQUESTED BY:  
Title Deeds & Needs, LLC

WHEN RECORDED MAIL TO AND  
MAIL TAX STATEMENTS TO:  
CURT & GERRI PHILLIPS  
P.O. BOX 563  
PIOCHE, NV 89043

Affix RPTT: \$ Exempt. 7  
File No. 22-596

**GRANT, BARGAIN, SALE DEED**

THIS INDENTURE WITNESSETH THAT:  
VAUGHN KAY PHILLIPS AND DONNA MAE PHILLIPS, TRUSTEES OF THE VAUGHN  
KAY PHILLIPS AND DONNA MAE PHILLIPS FAMILY LIVING TRUST, dated the 14<sup>th</sup>  
day of July 1995

For valuable consideration, the receipt of which is hereby acknowledged, do hereby Grant, Bargain,  
Sell and convey to  
CURT PHILLIPS AND GERRI PHILLIPS, HUSBAND AND WIFE AS JOINT TENANTS

all that real property situated in the County of LINCOLN, State of Nevada, described as follows:

That portion of the Southwest Quarter (SW ¼) of Section 15, Township 1 North, Range 67  
East, M.D.B.&M., described as follows:

Parcel 3 as shown on Parcel Map recorded April 29, 1999 in the Office of the County  
Recorder of Lincoln County, Nevada in Book B of Plats, Page 211, as File No: 112673,  
Lincoln County.

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

SUBJECT TO:

1. General and special taxes for the current fiscal year.
2. Covenants, conditions, restrictions, rights of way, easements, and reservations of record.
3. Deed(s) of Trust of Record, if any.

**GRANTOR'S SIGNATURE AND NOTARY ACKNOWLEDGEMENT ATTACHED AS  
PAGE 2 HEREOF.**

WITNESS this 5<sup>th</sup> October ~~day of SEPTEMBER~~ 2022.

**VAUGHN KAE PHILLIPS AND DONNA MAE PHILLIPS FAMILY LIVING TRUST:**

Vaughn Kay Phillips  
**VAUGHN KAY PHILLIPS, TRUSTEE**

Donna Mae Phillips  
**DONNA MAE PHILLIPS, TRUSTEE**

**NOTARY ACKNOWLEDGMENT**

ATTACHED TO:

**Grant, Bargain, Sale Deed**

STATE OF NEVADA ) SS

COUNTY OF LINCOLN )

On 10/5/2022 before me, ASHLEY REMINGTON, a Notary Public  
in and for said State, personally appeared:

VAUGHN KAY PHILLIPS AND DONNA MAE PHILLIPS, AS TRUSTEES

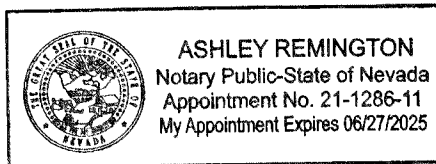
Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State that the foregoing paragraph is true and correct.

WITNESS my hand and official seal:

Signature: *AR*  
Signature of Officer

(NOTARY SEAL)



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) **001-193-30**  
 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**  
  
**TRUST ON FILE. - AE**

3. a) Total Value/Sales Price of Property                      \$ 0.00  
 b) Deed in Lieu of Foreclosure Only (value of property)                      ( \_\_\_\_\_ )  
 c) Transfer Tax Value:    \$ 0.00  
 d) Real Property Transfer Tax Due    \$ 0.00

4. **If Exemption Claimed:**  
 a. Transfer Tax Exemption per NRS 375.090, Section 7  
 b. Explain Reason for Exemption: **Transferring from trust 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:  Capacity: AGENT  
 Signature: \_\_\_\_\_ Capacity: \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
**(REQUIRED)**  
 Print Name: Vaughn Kay & Donna Mae Phillips\*\*\*  
 Address: P.O. Box 454  
 City: Pioche  
 State: NV                      Zip: 89043

**BUYER (GRANTEE) INFORMATION**  
**(REQUIRED)**  
 Print Name: Curt Phillips & Gerri Phillips  
 Address: PO Box 563  
 City: Pioche  
 State: NV                      Zip: 89043

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**  
 Print Name: **Title Deeds & Needs, LLC**    **File No. 22-249**  
 Address: **P.O. Box 180**  
 City, State & Zip: **Pioche, NV 89043**

\*\*\* TRUSTEES OF THE VAUGHN KAY PHILLIPS AND DONNA MAE PHILLIPS FAMILY LIVING TRUST, dated the 14<sup>th</sup> day of July 1995\*\*\*

**AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED**