

After recording, please return to:)
Name: Mark R. Somers)
Address: PO Box)
City, State, Zip: Pioche, NV 89043)
Phone: _____)
Assessor's)
Parcel Number 001-033-15)



OFFICIAL RECORD
AMY ELMER, RECORDER

E05

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QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That Mark R. Somers, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to Mark R. Somers and Tegan M. Somers as joint tenants with rights of survivorship, all that real property situated in the town of Pioche, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.)

Lots 25, 26, 27, 28, 29 and 30 in Block 40 in the town of Pioche.

Commonly known as #126 Gold Street Pioche, NV

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

WITNESS ___ hand(s) this 7 day of NOVEMBER, 2022.

Mark R. Somers
Signature of Grantor Mark R. Somers

Signature of Grantor

STATE OF NEVADA)
COUNTY OF LINCOLN)

This instrument was acknowledged before me on this 7th day of November, 2022 by xx Mark Raymond Somers xx and xxxx

Shannon M. Simpson
NOTARY PUBLIC



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 001-033-15
 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 RECORDER'S OPTIONAL USE ONLY
 Book: _____ Page: _____
 Date of Recording: _____
 Notes: _____

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 3
 b. Explain Reason for Exemption: Adding son to property

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 Mark Somers Capacity Grantor
 Signature Mark Somers Capacity Grantee

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: Mark R. Somers
 Address: PO Box 671
 City: Pioche
 State: NV Zip: 89043

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Mark R. & Tegan M. Somers
 Address: PO Box 671
 City: Pioche
 State: NV Zip: 89043

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)
 Print Name: Thelma Somers Escrow #: _____
 Address: Box 361
 City: Pioche, NV State: NV Zip: 89043