

After recording, please return to: )  
Name: LARRY V GEARHEART )  
Address: PO BOX 479 )  
City, State, Zip: Piotech NV 89043 )  
Phone: 702-612-3606 )  
Assessor's )  
Parcel Number 001-095-03/001-095-04 )



OFFICIAL RECORD E03  
AMY ELMER, RECORDER

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**QUIT CLAIM DEED**

THIS INDENTURE WITNESSETH:

That Bobby Dean Orr and Mable Ann Millmine in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to Larry V Gearheart

as \_\_\_\_\_,  
all that real property situated in the town of \_\_\_\_\_, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.)

Lots 15, 16 & the Easterly 23 feet of lot 14 in Block 25 in the town of Pioche, Lincoln County, Nevada.

Commonly known as 743 & 749 Meadow Valley St.

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

WITNESS \_\_\_ hand(s) this 20 day of Oct, 2022

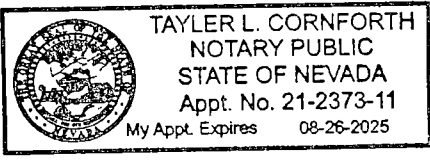
Bobby Orr  
Signature of Grantor  
BOBBY ORR

Mable Ann Millmine  
Signature of Grantor  
MABLE MILLMINE

STATE OF NEVADA )  
COUNTY OF LINCOLN )

This instrument was acknowledged before me on this 20<sup>th</sup> day of October, 2022  
by Bobby Dean Orr  
and Mable Ann Millmine

Taylor L. Cornforth  
NOTARY PUBLIC



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) 001-095-031  
 b) 001-095-04  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

2. Type of Property:
- |                                                    |                                              |
|----------------------------------------------------|----------------------------------------------|
| a) <input checked="" type="checkbox"/> Vacant Land | b) <input type="checkbox"/> Single Fam. Res. |
| c) <input type="checkbox"/> Condo/Twnhse           | d) <input type="checkbox"/> 2-4 Plex         |
| e) <input type="checkbox"/> Apt. Bldg              | f) <input type="checkbox"/> Comm'l/Ind'l     |
| g) <input type="checkbox"/> Agricultural           | h) <input type="checkbox"/> Mobile Home      |
| <input type="checkbox"/> Other                     |                                              |

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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: 2022-163096 TRANSFER TAX PAID

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 \_\_\_\_\_  
 Signature [Handwritten Signature] Capacity GRANTEE

**SELLER (GRANTOR) INFORMATION (REQUIRED)**  
 Print Name: BOBBY DEAN ORR  
 Address: MARIE ANN MILLINE  
 City: PO BOX 681 Pioche  
 State: NV Zip: 89043

**BUYER (GRANTEE) INFORMATION (REQUIRED)**  
 Print Name: LARRY V GERHEART  
 Address: PO BOX 479  
 City: Pioche  
 State: NV Zip: 89043

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