

APN 001-260-13

APN _____

APN _____

LINCOLN COUNTY, NV

2023-164700

Rec:\$37.00

Total:\$37.00

06/05/2023 02:13 PM

MATTHEW E. TRUAX

Pgs=3 KC



OFFICIAL RECORD
AMY ELMER, RECORDER

E05

Quit Claim

Title of Document

Affirmation Statement

I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does not contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of any person or persons. (Per NRS 239B.030)

____ I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of a person or persons as required by law: _____

(State specific law)

Sharon R. Skupa, Grantor
Signature Title

SHARRON R. SKUPA
Print

June 5, 2023
Date

Grantees address and mail tax statement:

Amanda R. & Matthew E. TRUAX, JTWS
1204 Santa Ynez Avenue
Henderson, NV 89002

When recorded please return to:
Amanda R. and Matthew E. Truax
1204 Santa Ynez Avenue
Henderson, NV 89002
APN 001-260-13

QUITCLAIM DEED

For valuable consideration, the sum of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, **SHARRON R. AND WILLIAM S. SKUPA, husband and wife JTWRs**, the undersigned Grantors,

Do hereby REMISE, RELEASE and FOREVER QUITCLAIM to **AMANDA R. TRUAX AND MATTHEW E. TRUAX, husband and wife JTWRs**, Grantees, the following described real property in the State of Nevada, Count of Lincoln:

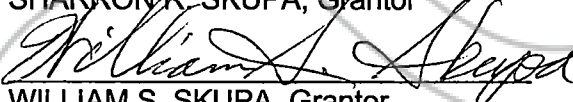
**APN 001-260-13, Pioche, NV 89043
Parcel 18 on Ash Grove Street in Pioche, NV**

A PORTION OF THE SOUTHWEST QUARTER (SW ¼) OF THE SOUTHEAST QUARTER (SE ¼) OF SECTION 11, TOWNSHIP 1 NORTH, RANGE 67 EAST, MOUNT DIABLO BASE AND MERIDIAN, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

PARCEL ONE (1) AS SHOWN ON THAT CERTAIN PARCEL MAP RECORDED MAY 24, 2006 IN PLAT BOOK "C" PAGE 212 AS FILE NO. 126569, IN THE OFFICE OF THE COUNTY RECORDER OF LINCOLN COUNTY, NEVADA.

IN WITNESS WHEREOF, I hereunto set my hand this date May 19, 2023.


SHARRON R. SKUPA, Grantor

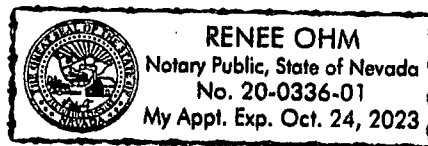

WILLIAM S. SKUPA, Grantor

STATE OF NEVADA)
) ss
COUNTY OF CLARK)

This instrument was acknowledged before me
on May 19, 2023,

by Sharron R Skupa and William S Skupa


NOTARY PUBLIC



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 001-260-13
 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 5
 b. Explain Reason for Exemption: Transfer of property from parent to children

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 Sharon R. Skupa Capacity Grantor
 Signature Matthew E. Truax Capacity Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)
 Print Name: Sharon R. & William S. Skupa
 Address: 2412 Greens Avenue JTWR5
 City: Henderson
 State: NEVADA Zip: 89014

BUYER (GRANTEE) INFORMATION
(REQUIRED)
 Print Name: AMANDA R. & Matthew E. TRUAX, JTWR5
 Address: 1204 SANTA YNEZ AVE
 City: HENDERSON
 State: NEVADA Zip: 89002

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