

APN: 006-081-04  
\$0.00 Consideration

Recorded at the Request of and  
When Recorded Return to:  
DICKINSON WRIGHT PLLC  
ATTN: JOHN E. DAWSON, ESQ.  
8363 W. Sunset Road, Suite 200  
Las Vegas, Nevada 89113

Mail Tax Statements to:  
ROBERT ALAN LAUBACH  
1630 Sundown Drive  
Henderson, Nevada 89002

LINCOLN COUNTY, NV 2023-165815  
Rec:\$37.00  
Total:\$37.00 08/02/2023 11:23 AM  
ROBERT A. LAUBACH Pgs=4 KC



OFFICIAL RECORD  
AMY ELMER, RECORDER

E04

### QUITCLAIM DEED


THIS INDENTURE WITNESSETH: That JOYELLE <sup>R</sup>~~E~~ LAUBACH, does hereby quitclaim to ROBERT A. LAUBACH, all of her right, title and interest in that real property situated in the County of Lincoln, State of Nevada, bounded and described as follows:

PLEASE SEE EXHIBIT "A" ATTACHED HERETO FOR COMPLETE LEGAL DESCRIPTION.

- SUBJECT TO:
1. All general and special taxes for the fiscal year.
  2. Covenants, conditions, restrictions, reservations, rights, rights of way and easements now of record.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in any wise appertaining.

Witness her hand this 29 day of July, 2019.

  
JOYELLE E. LAUBACH  
R. 18



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**EXHIBIT "A"**  
**LEGAL DESCRIPTION**

Eight (8) acres in the East half of 40 acres known as Willow and being more particular described as:

Beginning at a point 264 feet West of the Southeast corner of the Northeast quarter of the Northeast quarter (NE1/4NE1/4) of Section 23, T3N, R69 East, MDB&M., thence North 1320 feet to the North boundary, thence West 264 feet; thence South 1320 feet to the South Boundary, thence East 264 feet to the Point of beginning, being in patent No. 1048554.

Also 1/5 of the Water and Water Rights to Willow Springs. Said Willow Springs being situated in the NW1/4NW1/4 of Section 23, T3N, R69E., M.D.B. &M., evidenced by Certificate No. 1914, Application No. 7816 of file and of record with the State Engineer of Nevada at Carson City, Nevada.

**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) 006-081-0A  
 b) \_\_\_\_\_  
 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 _____               |  |

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 A  
 b. Explain Reason for Exemption: Remaining one joint tenant document # 114285

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 [Signature] Capacity Grantor  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
(REQUIRED)

Print Name: Jayelle R. Halbach  
 Address: 1112 Adcox  
 City: Henderson  
 State: NV Zip: 89015

**BUYER (GRANTEE) INFORMATION**  
(REQUIRED)

Print Name: Robert A. Halbach  
 Address: P.O. Box 11  
 City: Roche  
 State: NV Zip: 89043

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**

Print Name: \_\_\_\_\_ Escrow #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_