

Assessor's Parcel Number:  
00404124

Prepared By:  
Nicole Burcham



OFFICIAL RECORD  
AMY ELMER, RECORDER

After Recording Return To:  
Mona Herring  
170 Skylane Dr.  
Alamo, Nevada 89835

SPACE ABOVE THIS LINE FOR RECORDER'S USE

### QUITCLAIM DEED

On July 21, 2023 THE GRANTOR(S),

- Michael Wayne Burcham and Nicole Foisy Burcham, a married couple

for and in consideration of: One Dollar (\$1.00) and/or other good and valuable consideration conveys, releases and quitclaims to the GRANTEE(S):

- Mona Herring, a single person, residing at 170 Skylane Dr., Alamo, Lincoln County, Nevada 89001

the following described real estate, situated in Alamo, in the County of Lincoln, State of Nevada

Legal Description:

APNT#  
004-04-24

Twn  
07S

R09  
61E

Sct  
5

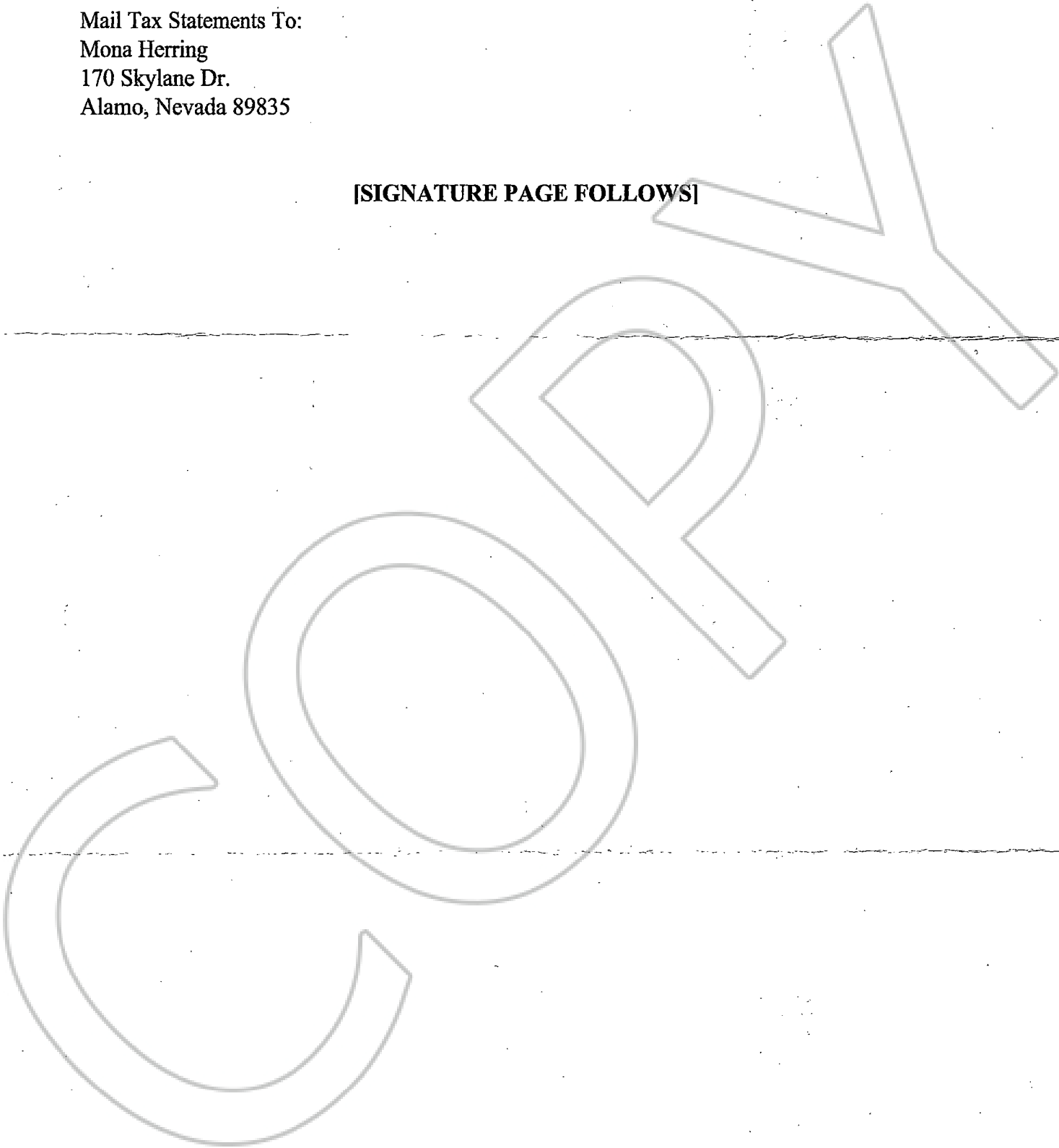
New deed

Grantor does hereby convey, release and quitclaim all of the Grantor's rights, title, and interest in and to the above described property and premises to the Grantee(s), and to the Grantee(s) heirs and assigns forever, so that neither Grantor(s) nor Grantor's heirs, legal representatives or assigns

shall have, claim or demand any right or title to the property, premises, or appurtenances, or any part thereof.

Mail Tax Statements To:  
Mona Herring  
170 Skylane Dr.  
Alamo, Nevada 89835

**[SIGNATURE PAGE FOLLOWS]**



**Grantor Signatures:**

DATED: 7/21/23

Michael Wayne Burcham

Michael Wayne Burcham  
935 Starr Avenue  
Wells, Nevada  
89835

DATED: 7/21/23

Nicole Foisy Burcham

Nicole Foisy Burcham  
935 Starr Avenue  
Wells, Nevada  
89835

STATE OF NEVADA, COUNTY OF ELKO, ss:

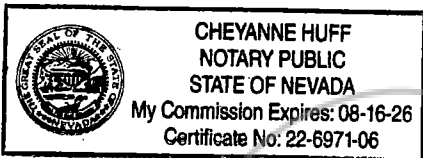
This instrument was acknowledged before me on this 21 day of July 2023  
by Michael Wayne Burcham and Nicole Foisy Burcham.

CHA

Notary Public

Notary Public  
Title (and Rank)

My commission expires 8-16-26



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) 00404124  
 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 \$ 30,000.00  
 Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due \$ 117.00

4. **If Exemption Claimed:**  
 a. Transfer Tax Exemption per NRS 375.090, Section \_\_\_\_\_  
 b. Explain Reason for Exemption: \_\_\_\_\_

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 [Signature] Capacity grantor

<b>SELLER (GRANTOR) INFORMATION</b>	<b>BUYER (GRANTEE) INFORMATION</b>
(REQUIRED) <u>Nicole Burcham</u>	(REQUIRED)
Print Name: <u>Michael W. Burcham</u>	Print Name: <u>Mona Herring</u>
Address: <u>935 Starr Ave</u>	Address: <u>170 Skylane dr.</u>
City: <u>Wells</u>	City: <u>Alamo</u>
State: <u>NV</u> Zip: <u>89835</u>	State: <u>NV</u> Zip: <u>89001</u>

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

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED

*\*(Grantor) Nicole Foisy Burcham  
 Michael Wayne Burcham*