APN 001-065-13 APN APN

LINCOLN COUNTY, NV Rec:\$37.00 Total:\$37.00 ANTHONY GARCIA

2024-166642

02/26/2024 04:30 PM

Pgs=7 AE

OFFICIAL RECORD AMY ELMER, RECORDER

EXPARTE ORDER DIRECTIVE TRANSFER OF PROPER
Title of Document

Grantees address and mail tax statement:

RD #10.

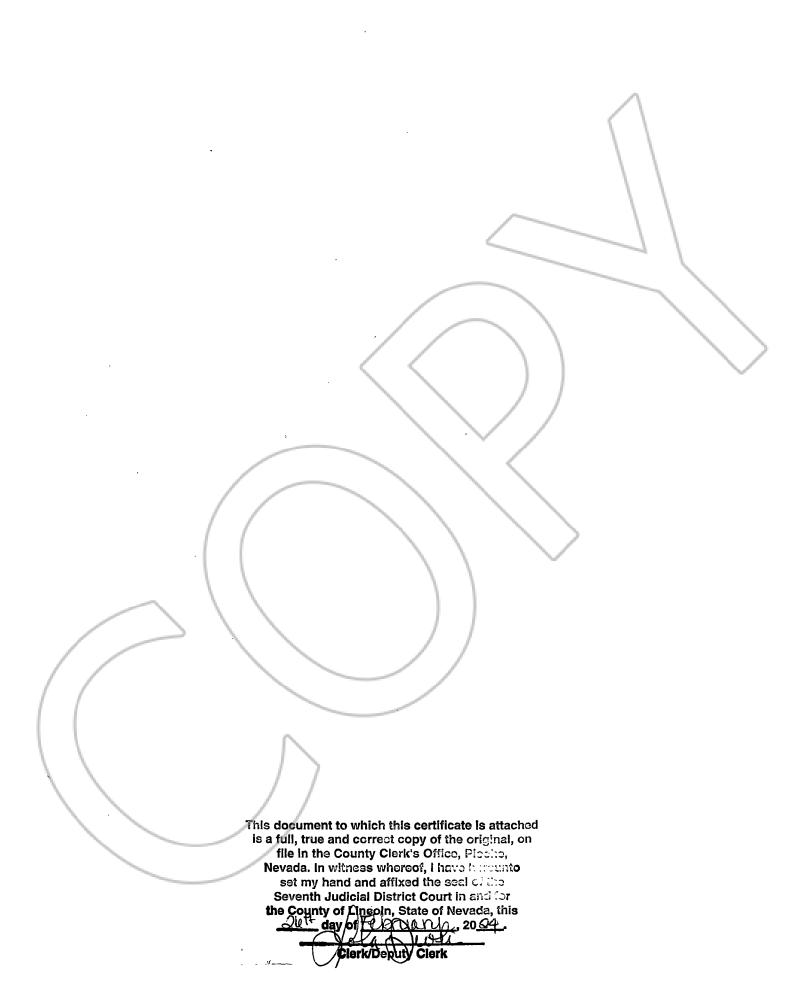
34654

	i de la companya de	
	772!! FEB 23 PM 12: 13	
1	ANTHONY GARCY EKOSE OF OLEM	
2	9119 RIDGERD #102 UPID	
3	(Address) New PORT RICHEY FL 34654 (City, State, Zip Code)	
4	727-505-7933 (Telephone number/Frr Number)	
5	ANTHONY DOMEGASION SETZVICE , COM	
6	Petitioner, Self-Represented	1
7	EIGHTH JUDICIAL DISTRICT COURT	Market Control
		1
8	CLARK COUNTY, NEVADA	7
9		
10	In the Matter of the Estate of:  Case No.: P2000A04  Dept. No.: PC-1	
11	CAROL LYNN WHITE	
12	Deceased.	
13		1
14	EX PARTE ORDER DIRECTING TRANSFER OF PROPERTY	
15	This Court, upon review of the verified ex parte petition of (your name)	!
16	Author Gara in the above-entitled matter, having considered the Petition and	
17	examined the evidence, and being fully advised, finds:	
18	1. Under the provisions of NRS 146.080(6), no notice of hearing is required by law;	
	2. The facts alleged in the Petition are true and correct;	
19	3. At least forty days have passed since the death of the above-named Decedent;	
20	4. Petitioner is the spouse of the Decedent, and the gross value of Decedent's estate does	
21	not exceed \$100,000.00 excluding the value of motor vehicles registered to Decedent; or	
22	Petitioner is not the spouse of the Decedent, and the gross value of Decedent's estate	
23	does not exceed \$25,000.00 excluding the value of motor vehicles registered to Decedent.  5. The Ex Parte Petition for Order Directing Transfer of Property ought to be granted.	
The Real Property lies	3. The Ex Parte Petition for Order Directing Transfer of Property Sugar to 30 grantes.	
24	© 1112	110
25	1 of 2 Civil Law Self	

.,		
1	IT IS HEREBY ORDERED, ADJUDICATED AND DECREED:	
2	1. That the Nevada Estate of (decedent's name) CAROL LYNN WHITE,	
3	Decedent, is hereby found to include:	
4	(List, with specificity, all the property in decedent's estate. For bank accounts, CDs, stock certificates, etc., include the name of the financial institution & account number. List all personal property, including furniture, jewelcy, cash, etc.)	
5	Type of Property & Description Estimated cross value	
6	CONTENTS OF HOME \$1,000,00	
7	mwi van \$ 500,00	
8	STORAGE UNT \$ 500.00	1
9		
10	2. That this Order shall be used as the document transferring the title to said	
11	property; and he Decedent's property be distributed as stated in the Affidavit of Entitlement to	
12	Estate and in the following manner pursuant to NRS 146.080:	
13	(List all the people who will receive property, and in what percentage they'll receive property, or what they will be receiving. For example, if everything goes to you, you might say. "The entirety of the estate to John Doe." Or if you want to split the estate between you and two others, you might say, "50% of the estate to John Doe and 50% of the estate to Bob Brown." Or, if you can be more specific as to items, you might say, "The Chase Checking Account #123456 to John Doe and the gold ring to Jane Doe.")	
14	Chase Checking Account #123430 to South Disc and the gent mg	
15		_
16		_
17		
18	DATED this 23 day of Feloruse 2024.	
19	DATED this 23 day of relosures, 2024.	
20	DISTRICT COURT JUDGE	
21	Respectfully submitted,	
22	(Signature)	
23	(Your name) (AMC(A	
24		121/19
25	Civil Law Sel	f-i elp Ceni

300 V . 100 V

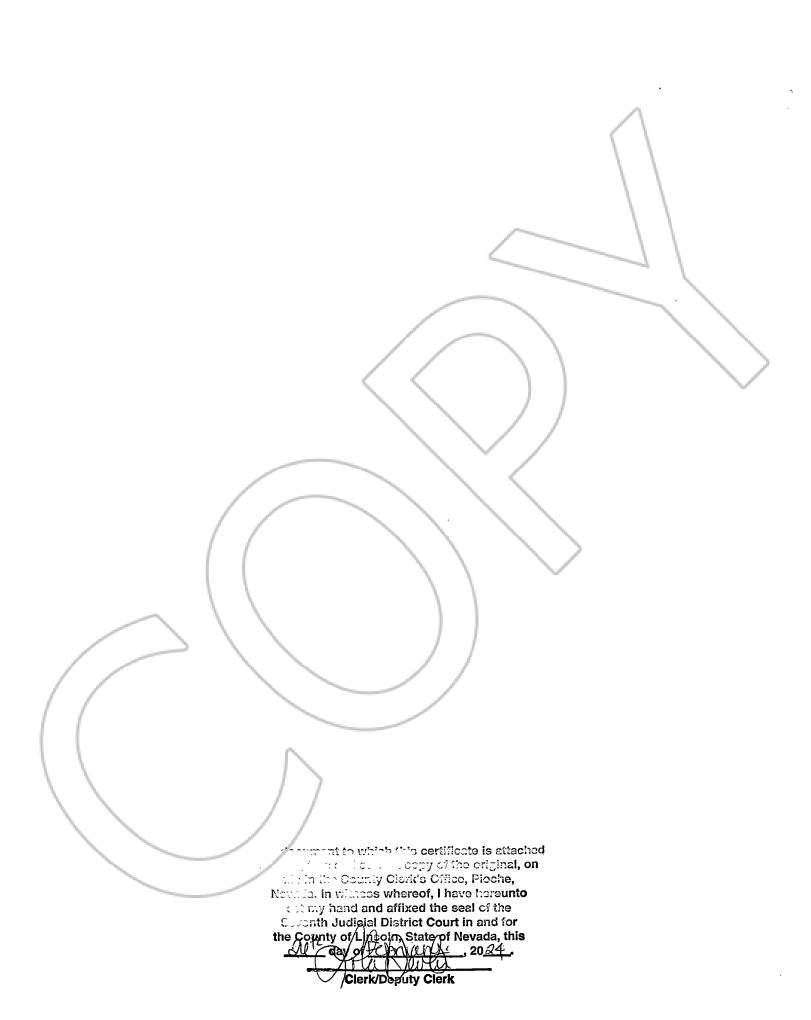
ં ને કે



## AFFIDAVIT OF ENTITLEMENT FOR ESTATES PURSUANT TO NRS 146.080

STATE OF NEVADA )	
) SS:	·
COUNTY OF CLARK )	
I, (insert your name) Anthony Garcia	_, residing at the address listed below, being first duly
sworn upon oath, hereby affirm:	\ \
Decedent (insert decedent's name) Carol Lynn White	died in the County of (insert county of death)
Washington , State of (insert state of death) Utah	, on the (insert date of death) 5th day of
	the State of (insert state where decedent lived at time of death)
	unty of Clark, State of Nevada. Decedent's estate did not
include real property nor a lien thereon.	
I affirm that (check one box):	
	gross value of the estate, except amounts due the decedent
for services in the Armed Forces of the United States	or the value of any motor vehicles registered to decedent,
is not in excess of \$100,000.00.	
	I am the person who has a right to succeed the property of
the decedent, or I am a beneficiary of the decedent's I	Last Will and Testament, and the gross value of the estate,
except amounts due the decedent for services in the	Armed Forces of the United States or the value of any
motor vehicles registered to decedent, is not in excess	of \$25,000.00.
	rth whatever the asset may be: bank account, stock certificate, insurance proceeds,
payroll check, personal property, etc., and the portion claimed.) Mobile home at	nd land, Home contents, Mini Van, Storage unit contents
	\
	S 146.080 to succeed the entire portion of property of said
decedent, unless otherwise stated, and to have any evidence and to have any evidence and to have any evidence and the state of the stat	dences of interest, indebtedness or right transferred to me
by: (insert person, representative, corporation or body having custody of such p	property or acting as registrar or transfer agent of such evidences of interest):
Anthony Garcia	
At least forty days have elapsed since the date of	f death of decedent, as evidenced by the attached Death
Certificate.	
No application or petition for the appointment of a	a personal representative is pending or has been granted in
any jurisdiction.	
All debts of decedent, including funeral and buria	l expenses, and money owed to the Department of Health
and Human Services as a result of the payment of bene	efits for Medicaid, have been paid or provided for.
I have no knowledge of any existing claims for per	rsonal injury or tort damages against the decedent.
	nal service or by certified mail, identifying my claim and
	ose right to succeed to the decedent's property is equal or
superior to that of my right, and that at least 14 days h	
I am personally entitled to full payment or delive	ery of the property claimed, or am entitled to payment or
	all other successors who have an interest in the property.
I have no knowledge of any existing claims for per	
I acknowledge that I understand that filing a false	affidavit constitutes a felony in the State of Nevada.
CANDO CONTROL AND	
SUBSCRIBED AND SWORN to before me this  13th day of February, 20 24 by Anthony Gruzia-4	(Signature)
Illimorea , 2021 by Minary Clause	(Printed Name)
NOTARY PUBLIC in and for the County of	9119 Ridge rd #102
Lincoln, State of Nanda.	(Street Address)
	New Port Richey, FL 34654
MERCEDES HOWARD	(City, State, & Zip Code)
Notary Public, State of Nevada	
Commission Expires: 12/10/2027	

Commission No.: 08-5566-11



## **DECLARATION OF VALUE FORM** 1. Assessor Parcel Number(s) a) 001-065-13 b) c) d) 2. Type of Property: Single Fam. Res. Vacant Land b) FOR RECORDER'S OPTIONAL USE ONLY Condo/Twnhse d)[\_\_\_ 2-4 Plex c) Apt. Bldg f) Comm'l/Ind'l Date of Recording: e) g) Agricultural h) 🗶 Mobile Home Notes: X Other WITH LAND 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: From MOTHER TO SON 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. Capacity\_\_\_\_ Signature Capacity GRANTEE Signature\_ **SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION** (REQUIRED) (REQUIRED) Print Name: ANTHONY GARCIA Print Name: CAROL LYNN WHITE Address: 9/19 RD9E RD #102 Address: 9/19 RIDGE RO # 102 City: New Port Ricotey City: New PORT RICHEY FO COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer) Escrow #: Print Name: Address: Zip: City:

STATE OF NEVADA