



OFFICIAL RECORD  
AMY ELMER, RECORDER

E07

**RECORDING COVER PAGE**

(Must be typed or printed clearly in BLACK ink only and avoid printing in the 1" margins of document)

**APN#** 12-100-09

(11 digit Assessor's Parcel Number may be obtained at:  
<http://redrock.co.clark.nv.us/assrrealprop/ownr.aspx>)

**TITLE OF DOCUMENT**

(DO NOT Abbreviate)

QUIT CLAIM DEED

Document Title on cover page must appear EXACTLY as the first page of the document to be recorded.

**RECORDING REQUESTED BY:**

J. David Westwood, Esq., Trustee

**RETURN TO: Name** WESTWOOD LAW, P.C.

**Address** 98 W. Harding Ave.

**City/State/Zip** Cedar City, UT 84720

**MAIL TAX STATEMENT TO: (Applicable to documents transferring real property)**

**Name** Edwin O. Larson

**Address** 131 N. 1225 W.

**City/State/Zip** Cedar City, UT 84720

This page provides additional information required by NRS 111.312 Sections 1-2.

To print this document properly, do not use page scaling.

P:\Common\Forms & Notices\Cover Page Template Oct2017

RECORDED AT THE REQUEST OF:

JAMES M. PARK (5408)

**The Park Firm, P.C.**

Post Office Box 765

141 North Main Street, Suite 200

Cedar City, Utah 84720

Telephone: (435) 586-6532

WHEN RECORDED MAIL TO:

JAMES M. PARK

**The Park Firm, P.C.**

Post Office Box 765

Cedar City, Utah 84720

*A.P.N. 12-100-09*

**QUIT -CLAIM DEED**

**EDWIN O. LARSON**, individually and as sole Grantor and sole Trustee of **THE EDWIN O. AND NEDRA S. LARSON LIVING TRUST**, dated the 29<sup>th</sup> day of June, 1989, and the Grantor and sole Trustee of the **EDWIN O. AND NEDRA S. LARSON LIVING TRUST, AMENDED AND RESTATED**, and dated the 1<sup>st</sup> day of September, 2004, of Cedar City, Iron County, State of Utah,

Grantor,

hereby quit claims the following described tract of land to **THE EDWIN O. LARSON LIVING TRUST**, dated the 9<sup>th</sup> day of August, 2006,

Grantee,

for the sum of Ten Dollars (\$10.00) and other good and valuable consideration, an undivided one- third (1/3) interest in and to the following described property located in Lincoln County, State of Nevada, and more particularly described as follows:

**PARCEL 1**

Lot 4, SE 1/4 SW 1/4, SW1/4 SE 1/4, of Section 7, Township 2 South, Range 67 East, Mt. Diablo Base and Meridian.



**STATE OF NEVADA  
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)  
 a. 12-100-09  
 b. \_\_\_\_\_  
 c. \_\_\_\_\_  
 d. \_\_\_\_\_

2. Type of Property:
- |   |  |
|---|--|
| a. <input 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 checked="" type="checkbox"/> Agricultural | h. <input type="checkbox"/> Mobile Home      |
| <input type="checkbox"/> Other                      |  |

<b>FOR RECORDERS OPTIONAL USE ONLY</b>	
Book _____	Page: _____
Date of Recording: _____	
Notes: <u>Trust on File dl</u>	

- 3.a. Total Value/Sales Price of Property \$ \_\_\_\_\_  
 b. Deed in Lieu of Foreclosure Only (value of property ( \_\_\_\_\_ ) )  
 c. Transfer Tax Value: \$ \_\_\_\_\_  
 d. Real Property Transfer Tax Due \$ \_\_\_\_\_

**4. If Exemption Claimed:**

- a. Transfer Tax Exemption per NRS 375.090, Section 7  
 b. Explain Reason for Exemption: transfer to trust - without consideration

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: Agent  
 Signature \_\_\_\_\_ Capacity: \_\_\_\_\_

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

Print Name: Edwin O. Larson, Ind. and trustee  
 Address: 131 N. 1225 W.  
 City: Cedar City  
 State: UT Zip: 84720

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

Print Name: the Edwin O. Larson Living Trust, dated 8/19/2006  
 Address: 131 N. 1225 W.  
 City: Cedar City  
 State: UT Zip: 84720

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

Print Name: <u>Westwood Law, P.C.</u>	Escrow # _____
Address: <u>98 W. Harding Ave.</u>	
City: <u>Cedar City</u>	State: <u>UT</u> Zip: <u>84720</u>

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED