



OFFICIAL RECORD
AMY ELMER, RECORDER

After recording, please return to:)
Name: OSCAR HEREDIA)
Address: 6763 PARK LN.)
City, State, Zip: Hiko, NV 89017)
Phone: (775)962-3193)
Assessor's)
Parcel Number 011-120-04)

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QUIT CLAIM DEED

THIS INDENTURE WITNESSETH:

That ALMA GOMEZ - in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby remise, release, and forever quitclaim to OSCAR HEREDIA - as SOLE PROPRIETOR - all that real property situated in the town of Hiko, County of Lincoln, State of Nevada, more particularly described as follows: (Insert legal description and the commonly known address in the space provided.)

Lots 14 and 15 of the Ash Springs Subdivision, as shown on the Subdivision Map thereof June 5, 1967 in the office of the County Recorder of Lincoln County, Nevada in Book "A" of Plats, page 74 as File No. 45095, Lincoln County, NEVADA records.

Commonly known as 6763 PARK LN. Hiko, NV 89017.

TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

WITNESS ___ hand(s) this 1st day of May, 2024.

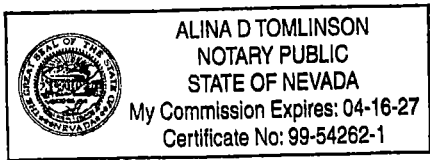
* Alma Gomez
Signature of Grantor ALMA GOMEZ

Signature of Grantor

STATE OF NEVADA)
COUNTY OF LINCOLN)

This instrument was acknowledged before me on this 1st day of May, 2024 by ALMA GOMEZ - and

Alina D Tomlinson
NOTARY PUBLIC



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

a) 011-120-04
 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) \$ 236,016
 (_____)
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due → \$ 922.35

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 Oscar Hernandez Capacity Grantee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Alma Gomez
 Address: 9490 Bermuda rd
 City: Las Vegas Apt # 1069
 State: NV Zip: 89123

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Oscar Hernandez
 Address: 6763 Park Road
 City: Hiko
 State: NV Zip: 89017

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

Print Name: _____ Escrow #: _____
 Address: _____
 City: _____ State: _____ Zip: _____