

APN 106522

APN _____

APN _____



00014001202401668690030034

OFFICIAL RECORD
AMY ELMER, RECORDER

E03

Quit Claim Deed

Title of Document

Affirmation Statement

Re-recording Doct 2024-166863 to correct
the spelling of SAVADOR R. Alcant-Cendijas
to SALVADOR R. Alcant-Cendijas

Grantees address and mail tax statement:

David A. Carlson

PO Box 478

Pioche, NV 89043



OFFICIAL RECORD
AMY ELMER, RECORDER

E05

After recording, please return to:)
)
Name: David A. Carlson)
)
Address: PO Box 478)
)
City, State, Zip: Pioche, NV 89043)
)
Phone: 775/9621452)
)
)
Assessor's 106522)
Parcel Number)

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QUIT CLAIM DEED

On _____ THE GRANTOR(S):
___ DAVID A. CARLSON and LOUISE M. CARLSON, a married couple.
for an in consideration of zero dollars (\$0.00) and/or other good and valuable consideration conveys, releases and
quitclaims to the GRANTEE(S):

___ David A. Carlson and Louise M. Carlson, a married couple, residing at 339 Main St, Pioche, Lincoln County, State of Nevada
___ Savador R. Allard Cendejas, a single person, residing at 339 Main St, Pioche, Lincoln County, State of Nevada

as joint tenants with rights of survivorship, the following described real estate, situated in an unincorporated area in the
County of LINCOLN, State of NEVADA

Legal Description: LOTS FOUR AND FIVE (4 AND 5) IN BLOCK FIVE (5) AS RECORDED IN OFFICIAL RECORDS
OF LINCOLN COUNTY RECORDER. REFER TO RECORD OF SURVEY, BOUNDARY LINE. ADJUSTMENT AS
RECORDED AT FLAT A, PAGE 426 PREVIOUSLY KNOWN AS : 5 MAIN STREET, PIOCHE, NEVADA

Description is as it appears in Document No. 123441, Official Records, Lincoln County, Nevada

Witnessed This 6, day of May, 2024

David A. Carlson
Signature of Grantor David A. Carlson

Louise M. Carlson
Signature of Grantor Louise M. Carlson

STATE OF NEVADA)
COUNTY OF LINCOLN)

This instrument was acknowledged before me on this 6th day of
May, 2024

By David A. Carlson and Louise M. Carlson

Mercedes Howard
NOTARY PUBLIC



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a) 100522
 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) (_____)
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due \$ _____

4. **If Exemption Claimed:**
 a. Transfer Tax Exemption per NRS 375.090, Section 3
 b. Explain Reason for Exemption: correcting spelling of Grantee

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 Louise H. Carlson Capacity Grantor
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: David A. & Louise H. Carlson
 Address: P.O. Box 478
 City: Piache
 State: NV Zip: 89043

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: David A. & Louise H. Carlson + #
 Address: P.O. Box 478
 City: Piache
 State: NV Zip: 89043

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

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