DOUGLAS COUNTY, NV

RPTT:\$0.00 Rec:\$40.00 \$40.00 Pgs=2 **2021-965370** 04/12/2021 01:05 PM

SOLIDIFI TITLE AGENCY, LTD - 0506

KAREN ELLISON, RECORDER

E03

MAIL TAX STATEMENTS TO: SUSAN COCORES JOHN COCORES 823 MAHOGANY DRIVE MINDEN, NV 89423

RECORDATION REQUESTED BY/RETURN TO: SOLIDIFI 88 SILVA LANE MIDDLETOWN, RI 02842

APN No. 1320-30-210-001

## QUITCLAIM DEED

THIS QUICLAIM DEED, Executed this day of Movey 2021, by SUSAN CRUZ NOW KNOW AS SUSAN COCORES AND JOHN COCORES, WHO BOTH ACQUIRED TITLE AS UNMARRIED, AS JOINT TENANTS to second party, SUSAN COCORES AND JOHN COCORES, A MARRIED COUPLE.

WITNESSETH, That the said first party, for good consideration in the amount of Ten Dollars and 00/100 (\$10.00) and good and other valuable consideration paid by the said second party, the receipt whereof is hereby acknowledged, do hereby remise, release and quitclaim unto the said second party(ies), as joint tenants with right of survivorship, and not as tenants in common, and to their successors and assigns forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the City of MINDEN, County of DOUGLAS, State of NEVADA, to wit:

Lot 3, Block M, as shown on the Official Map of WESTWOOD VILLAGE UNIT NO. II, PHASE 1, filed for record in the office of the County Recorder of Douglas County, Nevada, on June 23, 1988, as Document No. 180866.

Property Address: 823 MAHOGANY DRIVE, MINDEN, NV 89423

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written.

SUSAN CRUZ N/K/A SUSAN COCORES

JOHN COCORES

STATE OF NEVADA

COUNTY OF TXUCIOS

SS.

On, YOUNG 22 10 , 20 12 , before me, the undersigned, a Notary Public in and for said State, personally appeared SUSAN CRUZ N/K/A SUSAN COCORES AND JOHN COCORES personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Notary Public

My Commission Expires: (

ELIZABETH ELLEN BLACKLEY
Notary Public-State of Nevada
Appointment No. 20-7474-03
My Appointment Expires 07/20/2024

PREPARED BY:

ROBERT "BOB" WINES, ATTORNEY AT LAW O/B/O BC LAW FIRM, P.A. 687 6TH STREET STE. # 1

ELKO, NV 89801

Document/Instrument #  a) \( \frac{1}{2}\) D = \( \frac{1}{2}\) D ate of Recording:  Notes:    Date of Recording:   Notes:	State of Nevada	
Book: Page: Date of Recording: Notes:  2. Type of Property: a) Vacant Land b) Vacant Land c) Condo/Twnhse d) 2-4 Plex e) Apt. Bldg. f) Comm*/Indi* g) Agricultural h) Mobile Home i) Other  3. Total Value/Sales Price of Property: Deed in Lieu of Forcelosure 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, b. Explain Reason for Exemption: NAME CHANGE - Machine Status b. Explain Reason for Exemption: NAME CHANGE - Machine Status  5. Partial Interest: Percentage being transferred: %  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 therein, Furthermore, the disallowance of any claimed exemption or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interestat 1% per month.  Pursuant to NRS 13.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.  Signature  Sig	Declaration of Value	FOR RECORDER'S OPTIONAL USE ONLY
a) 3/200-30-210-001 b) Date of Recording: Date of Recording: Notes:  1. Type of Property: a) Vacant Land Single Fam. Res. c) Condo/Twinhse 4f) 2-4 Plex e) Apt. Blig. f) Comm'/Ind'1 g) Agricultural f) Other  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 b. Explain Reason for Exemption: NAME (**) And III Exemption Claimed: A. Transfer Tax Exemption or cather 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 therein. Furthermore, the disallowance of any claimed exemption or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interested 1% per month.  Pursuant to NRS 715.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed. Signature  SELLER (GRANTOR) NFORMATION (REGUIRED) Print Name: SUSAN (DUZ AN) DOVE Signature  SELLER (GRANTOR) NFORMATION (REGUIRED) Print Name: SUSAN (DUZ AN) DOVE Address: 623 MAHACARNY DOVE Clip: MINDEN State: NV. Zip 20423  State: NV. Zip 20423	1 Assessor Parcel Number(s)	Document/Instrument #
Date of Recording:    Date of Recording:   Notes:		Book: Page:,
d)  d)  d)  d)  vacant Land  c) Condo/Twnhse 6 2-4 Plex e) Apt. Bldg. f) Comm'l/Ind'l g) Agricultural h) Mobile Home i) Other  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 b. Explain Reason for Exemption: NAME CHANGE — MARCHAIL STOLUS  5. Partial Interest: Percentage being transferred:  %  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 therein. Furthermore, the disallowance of any claimed exemption or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interestal 1% per month.  Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.  Signature  SELLER (GRANTOR) AFORMATION  (REQUIRED)  Print Name: SUSAIL PLIZ And JOHN COOPES  Address: 623 MAHOGANN DEVICE  City: MINISEN  State: NV Zip 29H23  State: NV Zip 29H23	b)	\ \
2. Type of Property:  a) Vacant Land  c) Condo/Twnhse  d) 2-4 Plex e) Apt. Bldg. f) Comm*I/Ind*1 g) Agricultural h) Mobile Home i) Other  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 b. Explain Reason for Exemption: NAME CHANCIE - MANUEL - MANUEL  5. Partial Interest: Percentage being transferred:  7/2  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 therein. Furthermore, the disallowance of any claimed exemption or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interests 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  Capacity  Capac		\ \
n) Vacant Land c) Condo/Twnhse d) 2-4 Plex e) Apt. Bidg. f) Comm*Vind*1 g) Agricultural h) Mobile Home i) Other  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, b. Explain Reason for Exemption: NAME CHANGE - Machine  5. Partial Interest: Percentage being transferred:  76  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 therein. Furthermore, the 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  Capacity	·	Notes:
e) Apt. Bldg. () Comm'l/Ind'l g) Agricultural h) Mobile Home i) Other  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, b. Explain Reason for Exemption: MAME CHANGIE - MADIA Stolus  5. Partial Interest: Percentage being transferred:  76 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 therein. Furthermore, the 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 75.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed. Signature  Capacity  Capacity  Capacity  Capacity  Print Name: SisAn Course And John Course Address:  6.23 MAHOSANY DOVE  City: MINDEN  State:  NV Zip 29423	a) Vacant Land Single Fam. Res.	
g) Agricultural h) Mobile Home i) Other  3. Total Value/Sales Price of Property:  Deed in Lieu of Forcelosure 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,  b. Explain Reason for Exemption:  NAME CHANGIE - MACTIE -		
i) Other  3. Total Value/Sales Price of Property:  Deed in Lieu of Foreclosure Only (value of property)  Fransfer Tax Value:  Real Property Transfer Tax Due:  4. If Exemption Claimed:  a. Transfer Tax Exemption, per NRS 375.090, Section,  b. Explain Reason for Exemption:  NAME CHANGIE - March 18 Stollus  5. Partial Interest: Percentage being transferred:  %  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 therein. Furthermore, the 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  Capacity  Capacity	g) Agricultural h) Mobile Home	
Transfer Tax Value:  Real Property Transfer Tax Due:  5.  1. If Exemption Claimed:  a. Transfer Tax Exemption, per NRS 375.090, Section,  b. Explain Reason for Exemption:  NAME CHANGIE - MARTHAL STOLUS  5. Partial Interest: Percentage being transferred:  "%  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 therein. Furthermore, the 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  Capacity  Capacity  Capacity  Capacity  Print Name: SUSAN CALLY AND DOLUE  Address: 823 MAHOMANY DOLUE  City: MINDEN  State: NU ZIP SH423  State: NU ZIP SH423		
Transfer Tax Value:  Real Property Transfer Tax Due:  5.  1. If Exemption Claimed:  a. Transfer Tax Exemption, per NRS 375.090, Section,  b. Explain Reason for Exemption:  NAME CHANGIE - MARTHAL STOLUS  5. Partial Interest: Percentage being transferred:  "%  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 therein. Furthermore, the 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  Capacity  Capacity  Capacity  Capacity  Print Name: SUSAN CALLY AND DOLUE  Address: 823 MAHOMANY DOLUE  City: MINDEN  State: NU ZIP SH423  State: NU ZIP SH423	2 To 4 S.V. Lov 10 alone Dellan a C.Dennardan	
Transfer Tax Value:  Real Property Transfer Tax Due:  5. If Exemption Claimed: a. Transfer Tax Exemption, per NRS 375.090, Section, b. Explain Reason for Exemption: NAME CHANGIE - MADIAL STOLUS  5. Partial Interest: Percentage being transferred:  % 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 therein. Furthermore, the 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 75.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.  Signature  Capacity  Capacity  Capacity  Capacity  Capacity  Capacity  Capacity  Capacity  Print Name: USAN COLDES AND JOHN COLDES  Address: 623 MAHOSANY DOINE  City: MINDEN  State:  NU Zip 99423  State:  NU Zip 99423		
Real Property Transfer Tax Due:  4. If Exemption Claimed:  a. Transfer Tax Exemption, per NRS 375.090, Section,  b. Explain Reason for Exemption: NAME (HANGIE - MADIA) Status  5. Partial Interest: Percentage being transferred:	Deed in Lieu of Foreclosure Only (value of property	) 5
4. If Exemption Claimed:  a. Transfer Tax Exemption, per NRS 375.090, Section,  b. Explain Reason for Exemption: NAME CHANGIE - MARCHAI STOLUS  5. Partial Interest: Percentage being transferred:	Transfer Tax Value:	/s
a. Transfer Tax Exemption, per NRS 375.090, Section b. Explain Reason for Exemption: NAME CHANGIE - MADIAL SITILUS  5. Partial Interest: Percentage being transferred:	Real Property Transfer Tax Due:	\s
b. Explain Reason for Exemption:    ME	4. If Exemption Claimed:	
b. Explain Reason for Exemption:    ME	a. Transfer Tax Exemption, per NRS 375.090, Section . 03	
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 therein. Furthermore, the 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  Capacity	b. Explain Reason for Exemption: NAME	CHANGE - MARTIAL STOLLS
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 therein. Furthermore, the 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  Capacity  Capacity  Capacity  Capacity  REQUIRED  Print Name: USAN CRUZ AND JOHN COODES  Address:  823 MAHOMANY DOINE  City:  MINDEN  City:  MINDEN  State:  NU Zip Q9423		
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 therein. Furthermore, the 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  Capacity  Capacity  Capacity  Capacity  REQUIRED  Print Name: USAN CRUZ AND JOHN COODES  Address:  823 MAHOMANY DOINE  City:  MINDEN  City:  MINDEN  State:  NU Zip Q9423	6 Dayled Latenets Develop to a being transferred:	94
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 therein. Furthermore, the 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 \$\textit{15.030}\$, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.  Signature  Signature  Capacity  Capacity  Capacity  Capacity  Capacity  Fint Name: Susan Courses And John Courses  Address:  \[ \textit{823 MAHOMANY DOLVE} Address: \textit{823 MAHOMANY DOLVE} Address: \textit{823 MAHOMANY DOLVE} City: \textit{MINDEN}  State: \textit{NU Zip P9423}  State: \textit{NU Zip P9423}	5. Partial interest: Percentage being transferred:	
documentation if called upon to substantiate the information provided therein. Furthermore, the 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  Capacity  Capacity  Capacity  Capacity  SELLER (GRANTOR) INFORMATION  (REQUIRED)  Print Name: SUSAN CRUZ AND JOHN COODES  Address: 823 MAHOMANY DOIVE  Address: 823 MAHOMANY DOIVE  City: MINDEN  State: NV Zip 99423  State: NV Zip 99423	The undersigned declares and acknowledges, under pena	alty of perjury, pursuant to NRS 375.000 and NRS 375.110.
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 75.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.  Signature Capacity Capacity Capacity SELLER (GRANTOR) NFORMATION  (REQUIRED)  Print Name: SUSAN CRUZ AND JOHN COODES  Address: 823 MAHOMANY DRIVE Address: 823 MAHOMANY DRIVE City: MINDEN  City: MINDEN  State: NV Zip 99423  State: NV Zip 99423	documentation if called upon to substantiate the informa	tion provided therein. Furthermore, the disallowance of any
Pursuant to NRS \$75.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.  Signature Capacity Capacity SELLER (GRANTOR) INFORMATION  (REQUIRED)  Print Name: SUSAN CRUZ AND JOHN COCORS  Address: 623 MAHOSANY DRIVE Address: 623 MAHOSANY DRIVE City: MINDEN  State: NV Zip 691423  State: NV Zip 691423	claimed exemption, or other determination of additional	
Signature  Signature  Signature  Capacity  Capacity  GRANTORINFORMATION  SELLER (GRANTORINFORMATION  (REQUIRED)  Print Name: SUSAN CRUZ AND JOHN COCORS  Address:  B23 MAHOGANY DRIVE  City:  MINDEN  State:  NV Zip 89423  Capacity  GRANTEE) INFORMATION  (REQUIRED)  Print Name: SUSAN COCORS  Address:  823 MAHOGANY DRIVE  City:  MINDEN  State:  NV Zip 99423	interest at 1% per month.	\ \
Signature  Signature  Signature  Capacity  Capacity  GRANTORINFORMATION  SELLER (GRANTORINFORMATION  (REQUIRED)  Print Name: SUSAN CRUZ AND JOHN COCORS  Address:  B23 MAHOGANY DRIVE  City:  MINDEN  State:  NV Zip 89423  Capacity  GRANTEE) INFORMATION  (REQUIRED)  Print Name: SUSAN COCORS  Address:  823 MAHOGANY DRIVE  City:  MINDEN  State:  NV Zip 99423	Pursuant to NRS \$75.030, the Buyer and Seller shall	be jointly and severally liable for any additional amount
SELLER (GRANTOR) INFORMATION  SELLER (GRANTOR) INFORMATION  (REQUIRED)  Print Name: SUSAN CRUZ AND JOHN COODES  Address: 823 MAHOGANY DRIVE  City: MINDEN  State: NV Zip 89423  Capacity GRANTED INFORMATION  (REQUIRED)  Print Name: SUSAN COODES AND JOHN COODES  Address: 823 MAHOGANY DRIVE  City: MINDEN  State: NV Zip 99423	owed.	
SELLER (GRANTOR) INFORMATION  (REQUIRED)  Print Name: SUSAN CRUZ AND JOHN COCORS  Address: 623 MAHOGANY DRIVE  City: MINDEN  State: NV Zip P91423  BUYER (GRANTEE) INFORMATION  (REQUIRED)  Print Name: SUSAN COCORS AND JOHN COCORS  Address: 623 MAHOGANY DRIVE  City: MINDEN  State: NV Zip 991423	Signature Och To	
Print Name: SUSAN CRUZ AND JOHN COCORES Address: 823 MAHOSANY DRIVE Address: 823 MAHOSANY DRIVE City: MINDEN City: MINDEN State: NU Zip 89423 State: NU Zip 99423	Signature	_ Capacity GRANIER
Print Name: JUSAN CRUZ AND JOHN COCORS  Address: B23 MAHOGANY DRIVE Address: 823 MAHOGANY DRIVE City: MINDEN City: MINDEN State: NV Zip 89423  State: NV Zip 99423	SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
Address: 823 MAHOGANY DDIVE Address: 823 MAHOGANY DDIVE City: MINDEN City: MINDEN State: NV Zip 99423	(REQUIRED)	(REQUIRED)
City: MINDEN City: MINDEN State: NV Zip 89423 State: NV Zip 99423		
	City: MINDEN	City: MINDEN
COMPANY DECAME DECAME DECARDANCE (PROJUDED IN MOT THE CELLED OF DIVER)	State: NV. Zip 89423	State: NV Zip 99423
COMPANY/PERSON RECOILENTING RECORDING (REQUIRED IF NOT THE SELLER OR DUTER)	COMPANY/PERSON REQUESTING RECORDING	(REQUIRED IF NOT THE SELLER OR BUYER)
Print Name: Solidifi Title & Closinia Escrow # ASV - 1320-30-210-001		
Address: BB SILVA LANE		
eity: Middlelown State RI zip 02842	N. J. Johnson	ate RI zip 02842
(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)		