

DOUGLAS COUNTY, NV	2021-971020
RPTT:\$0.00 Rec:\$40.00	
\$40.00 Pgs=2	07/19/2021 08:45 AM
TITLE DEEDS & NEEDS, LLC	
KAREN ELLISON, RECORDER	E04

APN NO: 1318-03-211-013

**RECORDING REQUESTED BY:
Title Deeds & Needs, LLC**

**WHEN RECORDED MAIL TO AND
MAIL TAX STATEMENTS TO:
ROY EMIL CLASON, JR.
P.O. BOX 11425
ZEPHYR COVE, NV 89448**

**Affix RPTT: \$ Exempt. 4
File No. 21-244**

QUITCLAIM DEED

THIS INDENTURE WITNESSETH THAT:

ROY EMIL CLASON, A WIDOWER

For valuable consideration, the receipt of which is hereby acknowledged, does hereby convey, quitclaim and release unto Grantee all interest Grantor has, if any, in said real property to

ROY EMIL CLASON, JR., AN UNMARRIED MAN

all that real property situated in the County of DOUGLAS, State of Nevada, described as follows:

**LOT 114, AS SHOWN ON THE MAP OF SKYLAND SUBDIVISION MAP UNIT NO. 2
FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY,
STATE OF NEVADA, ON JULY 22, 1959 AS FILE NO. 14668.**

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

SUBJECT TO:

1. General and special taxes for the current fiscal year.
2. Covenants, conditions, restrictions, rights of way, easements and reservations of record.
3. Deed(s) of Trust of Record, if any

**GRANTOR'S SIGNATURE AND NOTARY ACKNOWLEDGEMENT ATTACHED AS PAGE 2
HEREOF.**

WITNESS this 17 day of July, 2021.

Roy Clason
ROY EMIL CLASON

NOTARY ACKNOWLEDGMENT

ATTACHED TO:
Grant, Bargain, Sale Deed

STATE OF Nevada) SS
COUNTY OF Lincoln)

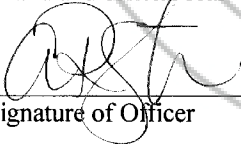
On 07/17/2021 before me, **Ashley Remington**
_____, a Notary Public in and for said State, personally appeared:

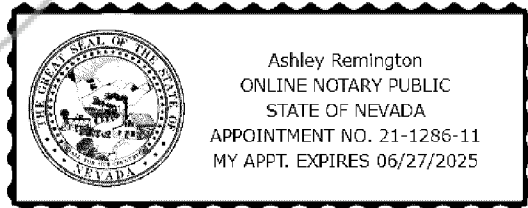
ROY EMIL CLASON

Who 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.

I certify under PENALTY OF PERJURY under the laws of the State that the foregoing paragraph is true and correct.

WITNESS my hand and official seal:

Signature: 
Signature of Officer



STATE OF NEVADA DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)
 a) 1318-03-211-013
 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

 Doc #905493 - JS

3. a) Total Value/Sales Price of Property \$ 0.00
 b) Deed in Lieu of Foreclosure Only (value of property) (_____)
 c) Transfer Tax Value: \$ 0.00
 d) Real Property Transfer Tax Due \$ 0.00

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 4
 b. Explain Reason for Exemption: REMOVING JOINT TENANT WITHOUT CONSIDERATION
 c.

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: Ray Clason Capacity: Grantor

Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: ROY EMIL CLASON
Address: PO BOX 12089
City: ZEPHYR COVE
State: NV Zip: 89448

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: ROY EMIL CLASON, JR.
Address: PO BOX 11425
City: ZEPHYR COVE
State: NV Zip: 89448

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

Print Name: Title Deeds & Needs, LLC
Address: PO Box 180
City, State & Zip: Pioche, NV 89043

File No. 21-244