01/03/2023 04:52 PM Total:\$43.90 Prepared By JAMES H. COE Pgs=3 Name: 1/PMRS H. COF Address: 1290 Rowln. GARDNER VILLE, 18 Zip Code: 89 410 SHAWNYNE GARREN, RECORDER After Recording Return To Name: UAMES HO COE Address: 1280 Row Lw GARDNENVELLE State: MADA Zip Code: 89410 1221-05-002-03 Space Above This Line for Recorder's Use NEVADA QUIT CLAIM DEED STATE OF NEVADA COUNTY OF DOUGLAS KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of ONE THOUSAND (\$ 1000.00 \_\_\_) in hand paid to COE | Gnoom , a trust , residing at 12-80 Row Lm. County of DOUGLAS, City of GAMERUSUE, State of NEVADA (hereinafter known as the "Grantor(s)") hereby conveys and quitclaims to County of <u>BUGLAS</u>, City of <u>GRADINAUSULE</u>, State of <u>NEUROP</u> (hereinafter known as the "Grantees(s)") all the rights, title, interest, and claim in or to the following described real estate, situated in the County of Doubles , Nevada towit:

DOUGLAS COUNTY, NV RPTT:\$3.90 Rec:\$40.00

LOT 78, OF FISH SPAINGS RESPARES, ACCORDEND TO THE MAP THEREOF, ESTED IN THE OFFICE OF HE COUNTY RECORDED OF DOUGLAS COUNTY, SPARE OF NEWARD, ON AUGUST 30, 1973, EN BOOK 673, PAGE 1006, AS DOWNERS POBLE 451 To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever for the said first party, either in law or equity, to the

only proper use, benefit and behoof of the said second party forever.

Low M Diego	la ce
Grantor's Signature	Grantor's Signature
Joni M GROOM	JAMES 1+. COE
Grantor's Name	Grantor's Name
1280 Ron Lau	1280 RON LW.
Address	Address
Gardnerville NV89410.	GAMPHENSUL NV. 89418
City, State & Zip	City, State & Zip
STATE OF NEVADA)	
COUNTY OF DOUGLOS	
- 50 Olice	
I the undereigned a Notern Dublic in and for	
I, the undersigned, a Notary Public in and fo that <u>Tone W. Good and Tonus It. Coe</u> w	or said County, in said State, hereby certify whose names are signed to the foregoing
instrument, and who is known to me, acknown	wledged before me on this day that, being
informed of the contents of the instrument, the	hey, executed the same voluntarily on the
day the same bears date.	
Given under my hand this $3$ day of $1$	Muary, 2623.
	* Raah Mills
Not	tary Public
My	Commission Expires: 2,7076
\ \	
	SUZANNE RUFFO
	Notary Public, State of Nevada Appointment No. 18-3420-5
	My Appt. Expires Sep 2, 2026
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\ / /	

## STATE OF NEVADA FOR RECORDERS OPTIONAL USE ONLY DECLARATION OF VALUE Document/Instrument#: 1. Assessor Parcel Number (s) Date of Recording: \_\_\_\_\_ (a) 1221-05-002-031 Notes: \_\_\_ 2. Type of Property: a) Vacant Land b) Single Fam Res. d) 2-4 Plex c) Condo/Twnhse e) Apt. Bldg. Comm'I/Ind'I 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: One trustee relinquishing proper 4. If Exemption Claimed: interest for sum of \$1,000 a. Transfer Tax Exemption, per NRS 375.090, Section: \_ to comain in same b. Explain Reason for Exemption: \_\_\_\_ 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 herein. 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. 🗸 -Capacity Grantes Signature N Capacity GRANTEE Signature / **SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION** Print Name: \_\_\_\_\_ & JH. COR **Print Name:** Address: Address: City: City: State: State:

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)