

APN: 1318-15-711-009

RECORDING REQUESTED BY:

Name: FOR THE PEOPLE
Address: 1092-B. S. Virginia Street
City/State/Zip: Reno, NV 89502



SHAWNYNE GARREN, RECORDER

E04

WHEN RECORDED MAIL TO:

Name: NIMO PURCELL
Address: P.O. Box 48724
City/State/Zip: Los Angeles, CA 90048

MAIL TAX STATEMENT TO:

Name: NIMO PURCELL
Address: P.O. Box 48724
City/State/Zip: Los Angeles, CA 90048

QUITCLAIM DEED

Please complete Affirmation Statement below:

 X I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the personal information of any person or persons. (Per NRS 239B.030)

-OR-

 I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the personal information of a person or persons as required by law:

(State specific law)


SHARMAARKE PURCELL

GRANTOR
Title

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 1318-15-711-009
 b) _____
 c) _____
 d) _____

2. Type of Property:

- | | | | |
|-----------------------------|--------------|--|-----------------|
| a) <input type="checkbox"/> | Vacant Land | b) <input checked="" type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex |
| e) <input type="checkbox"/> | Apt. Bldg. | f) <input type="checkbox"/> | Comm'l/Ind'l |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

FOR RECORDERS OPTIONAL USE ONLY

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: 4
 b. Explain Reason for Exemption: _____
This conveyance is a transfer without consideration to one remaining tenant. Refer to Doc.# 2018-913271.

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 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 [Signature] Capacity Grantor
 Signature [Signature] Capacity Grantor

SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION

(REQUIRED)	(REQUIRED)
Print Name: <u>Nimo Purcell and Sharmaarke Purcell</u>	Print Name: <u>Nimo Purcell</u>
Address: <u>P.O. BOX 48724</u>	Address: <u>SAME</u>
City: <u>Los Angeles</u>	City: _____
State: <u>CA</u> Zip: <u>90048</u>	State: _____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)
 Print Name: For the People/Needle and Annoy Inc. Escrow # _____
 Address: 1092 S. Virginia Street, Suite B.
 City: Reno State: NV Zip: 89502

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)