APN#: _____

Recording Requested By:

_____

Return Documents To:

_____
_____
_____

Mail Tax Statements To:

_____
_____
_____

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this_____day of_____, 20____, by the Grantor, _____

_____

whose mailing address is

_____

to the Grantee,

_____

_____

whose mailing address is

_____ .

WITNESSETH, That the said Grantor, for good consideration and for the sum of $_____paid by the said Grantee, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said Grantee forever, all the right, title, interest and claim which the said Grantor has in and to the following described parcel of land, and improvements and appurtenances thereto in_____County, State of Nevada, to wit:

APN#: _____

Commonly known as:

_____

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

Signed, sealed and delivered in presence of:

Signature _____ Date: _____

Printed Name: _____ Capacity: _____

Signature _____ Date: _____

Printed Name: _____ Capacity: _____

Signature _____ Date: _____

Printed Name: _____ Capacity: _____

Signature _____ Date: _____

Printed Name: _____ Capacity: _____

Signature _____

Printed Name: _____

STATE OF NEVADA }
COUNTY OF }

_____

On_____before me, _____, personally appeared_____

_____

_____,

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. [SEAL]

_____
Signature

Affiant: _____ ___Known Unknown

ID _____ Produced: