

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

a) Portion 003-184-82
b) _____
c) _____
d) _____

2. Type of Property

a) Vacant Land b) Single Fam. Res
c) Condo/Townhome d) 2-4 Pkx
e) Apt. Bldg. f) Comm/VndT
g) Agricultural h) Mobile Home
i) Other _____

FOR RECORDERS OPTIONAL USE ONLY
Document/Instrument # 120465
Book 174 Page 522
Date of Recording: July 9, 2003
Notes: _____

3. Total Value/Sales Price of Property: _____ \$None

Deed in Lieu of Foreclosure Only (value of property) (\$ _____)

Transfer Tax Value: _____ \$None

Real Property Transfer Tax Due: _____ \$

4. **X** Exemption Claimed:

a. Transfer Tax Exemption, per NRS 375.090, Section: 3

b. Explain reason for exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

The undersigned declare and acknowledge, under penalty of perjury, pursuant to NRS 375.080 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 misstatement 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 amount amount owed.

Signature: Michael Klanderud Capacity: Grantor

Signature: Terri L. C. Klanderud Capacity: Grantor

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: John R. Havens Print Name: Michael Klanderud, Sr. and Terri L. C. Klanderud

Address: 306 Palmer Drive Address: _____

City: Nampa City: _____

State: ID Zip: 83655 State: _____ Zip: _____

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

Print Name: First American Title Company of Nevada File Number: 162-2039289 MFMJ

Address: 766 Autumn Street, Ely, NV 89301, P.O. Box

City: Ely 15000 State: NV Zip: 89315

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

a) Parcel 003-184-02
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/Ind'l
g) Agricultural h) Mobile Home
i) Other

FOR RECORDERS OPTIONAL USE ONLY
Document/Instrument # 120415
Book 174 Page 522
Date of Recording: July 9, 2003
Notes: _____

3. Total Value/Sale Price of Property:

Deed in Lieu of Foreclosure Only (value of property) (\$ _____)
Transfer Tax Value: \$None
Real Property Transfer Tax Due \$ _____

4. X Exemption Claimed:

a. Transfer Tax Exemption, per 375.090, Section: 3
b. Explain reason for exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.090 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 claimant(s) 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 375.090, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature: [Signature] Capacity: Grantor
Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED) (REQUIRED)
Print Name: John R. Havens Print Name: Michael Klanderud, Sr. and Terri L. C. Klanderud
Address: 300 Palmer Drive P.O. Box 134 Address: _____
City: Nampa, Idaho City: _____
State: ID NV Zip: 83605 83205 State: _____ Zip: _____

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

Print Name: First American Title Company of Nevada File Number: 152-2039289 MJ/MJ
Address: 766 Auburn Street, Ely, NV 89301, P.O. Box 151045
City: Ely State: NV Zip: 89315

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)