	DOC # 0133727
	05/05/2009 03:58 PM Official Record Recording requested By SYLVIA KEARNS Lincoln County - NV
APN: <u>0/-/7/- 02</u> C Recording requested by and mail documents and tax statements to:	Leslie Boucher - Recorder Fee: \$15.00 Page 1 of 2 RPTT: Recorded By: AE Book- 248 Page- 0339
Name: Sylvin KEARNS	.
Address: PO Box 1362	
City/State/Zip Dalan SPRINGS AL 81044	£ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
DED130mk Nevada Legal Forms & Books, Inc. (702) 870-897 www.legalformsrus.com	
TRANSFER ON	DEATH DEED
THIS INDENTURE WITNESS that I'We, Sulvin	REARNS, AN UNMARRIED
(hereinafter called Grantor(s), hereby convey to:	HENRY G. ROBINETTE
	County of
State of Nevada, bounded and described as follows:	(Set forth legal description and commonly known
A PARCEL OF LAND SITUATE WITH OF SECTION 22, TOWNSHIP I NOW	YIN THE EAST HALF (E/2)
OF SECTION 22, TOWNSHIP I NOW	TH, RANGE 67 EAST,
MOUNT - DIABLO MERIDANO	
THIS DEED IS REVOCABLE. THIS DEED DOES IN DEATH OF THE GRANTOR. THIS DEED REVOWHICH CONVEY THE SAME REAL PROPERT 111.109 REGARDLESS OF WHETHER THE GRANTOR'S ENTIRE INTEREST IN THE SAME	KES ALL PRIOR DEEDS BY THE GRANTOR TY PURSUANT TO SUBSECTION 1 OF NRS PRIOR DEEDS FAILED TO CONVEY THE
WARNING: THE COUNTY RECORDER MA WRITE WITHIN THE 1" MARGINS OF THIS RECORDING REQUIREMENTS IMPOS	DOCUMENT OR VIOLATE ANY OTHER
Transfer on Death Deed Page 1	of 2 Initials

Subject to current taxes and other assessments, reservations in patents and all easements, rights-ofway, encumbrances, liens, covenants, conditions, restrictions, obligations and liabilities as may appear on record. Grantor(s) warrant(s) the title against all persons whomsoever. Pursuant to NRS 111.109, this deed becomes effective on the date of the death of the last surviving owner.

appertaining to.	interialities dielectino belonging of an any way
In Witness Whereof, I/We have hereunto set my hazo 20_09.	and/our hands on <u>21</u> day of <u>APRIL</u>
delica Kearns	m/a.
Signature of Grantor	Signature of Grantor
SULVIA GEARNS	
Print or Type Name Here	Print or Type Name Here
STATE OF Arizona) COUNTY OF Mohave) On this all day of April	20 D O ₁ personally appeared
before me, a Notary Public, Sylvia K	earns
personally known to me OR proved to me of	on the basis of satisfactory evidence to be the
person(s) described in and who executed the foreg	oing instrument in the capacity set forth therein,
who acknowledged to me that they executed the s	ame freely and voluntarily and for the uses and
purposes therein mentioned. Witness my hand and	d official seal.
Melody Beach	OFFICIAL GEAL MELODY BEACH NOTARY PUBLIC - State of Arizona MOHAVE COUNTY
Notary Public	My Comm. Expires Feb. 8, 2010
My commission expires: Feb. 8,2010	
Consult an attorney if you doubt this forms fitness f	or your purpose.

Transfer on Death Deed

Page 2 of 2

Initials

State of Nevada Declaration of Value

DOC # DV-133727

05/05/2009

03:58 PM

Official Record

1. Assessor Parcel Number(s)	Recording requested by
a) <u>01-171-02</u>	Lincoln County - NV
b)	Leslie Boucher - Recorder
b) c)	Lesite boucher - Recoi dei
d)	Page 1 of 1 Fee: \$15.00 Recorded By: AE RPTT
0 m on	FOR RE-Book-248 Page-0339
2. Type of Property	\ \ \
a) Vacant Land b) Single C) Condo/Townhouse d) 2-4 P	
	nercial /Ind'l Date of Recording:
	e Home
i) other	Notes:
3. Total Value / Sales Price of Property	s
Deed In Lieu Only (value of forgiven debt)	s
- · · · · · · · · · · · · · · · · · · ·	
Taxable Value	/
Real Property Transfer Tax Due:	\$
4. If Exemption Claimed:	
a. Transfer Tax Exemption, per NRS 375.090, so	
b. Explain Reason for Exemption:	NSFER ON DEATH
5. Partial Interest: Percentage being transferred:	%
The undersigned Seller (Grantor)/Buyer (Grantee), declares and ackn	owledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110,
hat 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
	ce of any claimed exemption, or other determination of additional tax due, may result in a p NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any
dditional amount owed.	/ / ~
Signature Outra Klanous.	Capacity GRANTOR
Office Harrison	
Signature They William	Capacity GRANTEE
	DANIEL (OD 1 MILES) TATADA (TATA
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
Jul alia Vannia	Hum C. P. Durtella
rint Name SUNA KEARNS	Print Name HENRY G ROBINETTE
ddress POBOX 13/02.	Address PO BOX 1.3/62
City DOLAN SPRINGS	City DOLAN SPRINGS
tate <u>Az</u> Zip 8/044/	State AZ Zip 8644/
\ \	·
	CORPANIC (PROVIDER VENIOR PROVIDER OF COLUMN
COMPANY/PERSON REQUESTING RE	CORDING (REQUIRED IF NOT BUYER OR SELLER)
co. Name	Esc. #
ddress	
lity	State: Zip

(As a public record, this form may be recorded / microfilmed)