

Official RecordRecording requested By
EVA DONAHUE

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2

RPTT \$70.20

Recorded By DP

Book- 269 Page- 0283



0140472

PARCEL NUMBER: 001-192-47

WHEN RECORDED RETURN TO: MAIL TAX STATEMENTS TO:

Anthony Kyle Donohue and Eva Dawn Donohue

P.O. Box 297

Pioche, Nevada 89043

GRANT, BARGAIN and SALE DEED***FOR A VALUABLE CONSIDERATION***, receipt of which is hereby acknowledged,

Mark Somers and Sarah Somers, a married couple,

do(es) hereby ***GRANT, BARGAIN and SELL*** to

Anthony Kyle Donohue and Eva Dawn Donohue, husband and wife as joint tenants with rights of survivorship

the real property situate in the County of Lincoln, State of Nevada, described as follows:

THAT PORTION OF THE WEST HALF (W 1/2) OF THE SOUTHWEST QUARTER (SW 1/4) OF SECTION 15, TOWNSHIP 1 NORTH, RANGE 67 EAST, M.D.B. AND M., LINCOLN COUNTY, NEVADA DESCRIBED AS FOLLOWS:**PARCEL 1, AS SHOWN UPON PARCEL MAP FOR DARYL AND RANDI COWLEY RECORDED MARCH 8, 2006 IN PLAT BOOK C, PAGE 174, AS FILE 126084.**

Subject to

1. All general and special taxes for the current fiscal year.
2. Covenants, Conditions, Restrictions, Reservations, Rights, Rights of Way and Easements now



of record.

TOGETHER with all tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

Date: 01/27/2012

Grantor Signatures:

DATED: 1/27/12

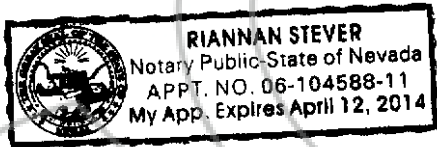
DATED: 1-27-2012

Mark Somers
Mark Somers
P.O. Box 657
Pioche, Nevada 89043

Sarah Somers
Sarah Somers
P.O. Box 657
Pioche, NV 89043

STATE OF NEVADA, COUNTY OF LINCOLN, ss:

This instrument was acknowledged before me on this 27th day of Jan.,
2012 by Mark Somers and Sarah Somers.



Riannan Stever
Notary Public
Notary
Title (and Rank)

My commission expires April 12, 2014

State of Nevada Declaration of Value

DOC # DV-140472
01/27/2012 01:13 PM
Official Record

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Page 1 of 1 Fee: \$15.00
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1. Assessor Parcel Number(s)
a) 001-192-47
b) _____
c) _____
d) _____

2. Type of Property
- | | |
|--|--|
| a) <input checked="" type="checkbox"/> Vacant Land | b) <input type="checkbox"/> Single Family Res. |
| c) <input type="checkbox"/> Condo/Townhouse | d) <input type="checkbox"/> 2-4 Plex |
| e) <input type="checkbox"/> Apartment Building | f) <input type="checkbox"/> Commercial /Ind'l |
| g) <input type="checkbox"/> Agriculture | h) <input type="checkbox"/> Mobile Home |
| i) <input type="checkbox"/> other _____ | |

FOR RECORDERS OPTIONAL USE ONLY

Document / Instrument # _____
Book: _____ Page: _____
Date of Recording: _____
Notes: _____

3. Total Value / Sales Price of Property \$ 18,000.00
Deed In Lieu Only (value of forgiven debt) \$ _____
Taxable Value \$ _____
Real Property Transfer Tax Due: \$ _____

4. If Exemption Claimed:
- a. Transfer Tax Exemption, per NRS 375.090, section: _____
- b. Explain Reason for Exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

The undersigned Seller (Grantor)/Buyer (Grantee), 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 parties agree that 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 1/4% 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 Seller
Signature [Signature] Capacity Buyer

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

Print Name Mark & Sarah Somers
Address P.O. Box 657
City Pioche
State NV Zip 89043

Print Name Kyle & Eva Donohue
Address PO Box 297
City Pioche
State NV Zip 89043

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

Co. Name _____ Esc. # _____
Address _____
City _____ State: _____ Zip _____

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