



Recording requested By  
PAT & LINDA HANLEY

Lincoln County - NV  
Leslie Boucher - Recorder

Page 1 of 1 Fee: \$14.00  
Recorded By: AE RPTT:  
Book- 275 Page- 0370

STATE OF NEVADA  
DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)  
a) 006-241-66  
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'l/Ind'l  
g)  Agricultural h)  Mobile Home  
 Other \_\_\_\_\_

FOR RECORDER'S OPTIONAL USE ONLY  
Book: \_\_\_\_\_ Page: \_\_\_\_\_  
Date of Recording: \_\_\_\_\_  
Notes: Trust on file

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 7  
b. Explain Reason for Exemption: Transferring to trust with no consideration

5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %

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 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% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Linda Hanley Capacity \_\_\_\_\_  
Signature Pat Hanley Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION (REQUIRED)**  
Print Name: Pat and Linda Hanley  
Address: HC 74 Box 195  
City: Pioche  
State: NV Zip: 89043

**BUYER (GRANTEE) INFORMATION (REQUIRED)**  
Print Name: Patrick L. Hanley and Linda C. Hanley Family Trust  
Address: HC 74 Box 195  
City: Pioche  
State: NV Zip: 89043

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**  
Print Name: \_\_\_\_\_ Escrow #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_