Commonly known as 7500 James Road

TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

WITNESS __ hand(s) this 25 day of ///4 9, 2016.

Signature of Grantor

STATE OF NEVADA) COUNTY OF LINCOLN) honold o Rounsvillo

This instrument was acknowledged before me on this distributed and the records will and



M. HOWARD Notary Public State of Nevada My Commission Expires: 12-10-19 Certificate No: 08-5566-11

NOTARY PUBLIC

DOC # DV-149334

05/25/2016

02:29 PM

Official Record

Recording requested By STATE OF NEVADA RONALD ROUNSVILLE DECLARATION OF VALUE FORM Lincoln County - NV 1. Assessor Parcel Number(s) Leslie Boucher - Recorder a) 13-120-33 Fee: \$14.00 of 1 RPTT Recorded By: HB c) Book- 303 Page- 0225 **d**) 2. Type of Property: Vacant Land Single Fam. Res. FOR RECORDER'S OPTIONAL USE ONLY b) 🔯 Condo/Twnhse 2-4 Plex d) c) Page: Apt. Bldg Comm'l/Ind'l e) f) Date of Recording: Agricultural h) Mobile Home g) Notes: Other 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 b. Explain Reason for Exemption: Adias wife To Proposty 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. Capacity GRANTAR Signature Capacity ___ SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION (REQUIRED) (REQUIRED) Print Name: Rounde Da Weadth Rounsvihle Address: Po Box 983 City: CALLENTO City: CALLET & State: New Zip: 8900 8 Zip: 89008 COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer) Print Name: Escrow #: Address:

State:

City:

Zip: