

LINCOLN COUNTY, NV

2020-157944

Rec:\$37.00

Total:\$37.00

01/09/2020 04:02 PM

TONI & RANDY LYTLE

Pgs=3 KE

After recording please return to:

Name: Cory Lytle
 Kylea Lytle
 Address: HC 74 Box 243
 1315 Mule Deer Road
 City, State, Zip: Pioche, NV 89043
 Phone: (775) 962-5417
 Assessor's
 Parcel Number 006-261-01



OFFICIAL RECORD
AMY ELMER, RECORDER

E05

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GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH:

That Randy G. Lytle and Toni C. Lytle, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, does hereby grant, bargain and sell to Cory and Kylea Lytle, husband and wife as joint tenants with full right of survivorship, all that real property situated in Ursine, County of Lincoln, State of Nevada, more particularly described as follows:

A tract of land situate in a portion of the northeast quarter of the northwest quarter of Section 2, Township 1 North, Range 69 East, and the northwest quarter of the northeast quarter of Section 2, Township 1 North, Range 69 East, MDBM, Lincoln County, commonly known as Joe's Pasture, and more particularly described as follows:

Beginning at the Northeast corner of the NW¼NW¼ of Section 2, T. 1 N., R. 69 E., M.D.B.&M. and running thence South 78°10' East, 737 feet to a point, thence running South 53°45' West 494 feet to the TRUE POINT OF BEGINNING, thence running South 68°30' East 292 feet, thence running South 23° West 920 feet; thence running North 22° 13' East 1225 feet; thence running North 53°45' East approximately 250 feet to the true point of beginning and containing approximately 7.85 acres of pasture land of the "Lytle Estate."

Together with any and all improvements situate thereon and together with any water rights appurtenant thereto.

NOTARY PUBLIC

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

WITNESS this 9th day of January, 2020.

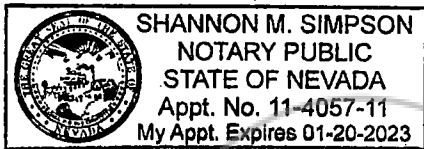
Randy G Lytle
Randy G Lytle

STATE OF NEVADA)
COUNTY OF LINCOLN)

Toni C Lytle
Toni C. Lytle

This instrument was acknowledged before me on

this 9th day of January, 2020 by
~~xx~~ Toni Cottino Lytle ~~xx~~ and
~~xx~~ Randy Gordon Lytle ~~xx~~.



Shannon M. Simpson
NOTARY PUBLIC

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

- a) 006-261-01 (JOE'S)
- 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 PASTURE

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____
Date of Recording: _____
Notes: _____

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 5

b. Explain Reason for Exemption: PARENTS TO SON AND DAUGHTER-IN-LAW

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 Toni Lytle Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: RANDY G. AND TONI C. LYTLE
Address: HC 74 Box 180
City: Piute
State: NV Zip: 89043

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: CORY AND KYLISA LYTLE
Address: HC 74 Box 243
City: Piute
State: NV Zip: 89043

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

Print Name: _____ Escrow #: _____
Address: _____
City: _____ State: _____ Zip: _____