

LINCOLN COUNTY, NV **2022-163050**  
RPTT:\$380.25 Rec:\$37.00  
Total:\$417.25 **09/21/2022 01:16 PM**  
MARK R. & LINDA T. HOLT Pgs=3 KC

After recording please return to: )  
Name: MARK HOLT )  
Address: Box 416 )  
City, State, Zip: Caliente Nv. 89008 )  
Phone: \_\_\_\_\_ )



OFFICIAL RECORD  
AMY ELMER, RECORDER

Assessor's  
Parcel Number 003-181-16 )

----- Above This Line Reserved For Official Use Only -----

### GRANT, BARGAIN AND SALE DEED

THIS INDENTURE WITNESSETH:

That Gottfredson's Incorporated, a Nevada Corporation, in consideration of TEN DOLLARS (\$10.00), the receipt of which is hereby acknowledged, do(es) hereby GRANT, BARGAIN, SELL AND CONVEY to Mark R. Holt and Linda T. Holt, husband and wife, as joint tenants with right of survivorship, and to its successors and assigns forever, all that certain parcel of land situated in the City of Caliente, County of Lincoln, State of Nevada, and bounded and described as follow, to-wit:

All of Lots ( 16,17,18 ) in Block 9 in said city of Caliente, as said Lots and Blocks are delineated on the official plat of said city, now on file in the office of the county recorder of said Lincoln County.

Together with any and all improvements situated thereon and all buildings and the contents therein.

SUBJECT TO: 1. Taxes for the fiscal year of 2022-2023.  
2. Rights of way, reservations, restrictions, easements and conditions of record.  
More commonly known as Assessor Parcel Number 003-181-16

TOGETHER WITH ALL AND SINGULAR, the tenements, hereditaments and appurtenances thereunto belonging and in anywise appertaining.

WITNESS \_\_\_\_\_ hand(s) this 20th day of September, 2022

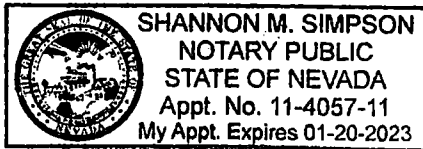
Mark R Holt  
Signature of Grantor Mark R. Holt  
For Gottfredson's Inc. AS  
President

\_\_\_\_\_  
Signature of Grantor

STATE OF NEVADA )  
COUNTY OF LINCOLN )

This instrument was acknowledged before me on  
this 20th day of September 2022, ~~2020~~ by  
\*\* Mark R. Holt \*\* and  
\*\*\*

Shannon M. Simpson  
NOTARY PUBLIC



COPY

**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) 003-181-16  
 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: \_\_\_\_\_

3. Total Value/Sales Price of Property \$ 97,186  
 Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due \$ 380.25

4. **If Exemption Claimed:**  
 a. Transfer Tax Exemption per NRS 375.090, Section \_\_\_\_\_  
 b. Explain Reason for Exemption: \_\_\_\_\_

5. Partial Interest: Percentage being transferred: 100 %

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 Mark R Holt Capacity Grantee

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

<b><u>SELLER (GRANTOR) INFORMATION</u></b> <b>(REQUIRED)</b>	<b><u>BUYER (GRANTEE) INFORMATION</u></b> <b>(REQUIRED)</b>
Print Name: <u>Gottfredson's Incorporated</u>	Print Name: <u>MARK R + LINDA T HOLT</u>
Address: <u>Box 307</u>	Address: <u>Box 416</u>
City: <u>Caliente NV.</u>	City: <u>Caliente</u>
State: <u>NEVADA</u> Zip: <u>89008</u>	State: <u>NEVADA</u> Zip: <u>89008</u>

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