



APN: 012-210-33;  
012-210-56

**Exhibit A**  
**Legal Description**

LOT 3A AS SHOWN ON LAND DIVISION PARCEL MAP OF PARCEL 3 OF "PARCEL MAP MERGER AND REDIVIDE FOR DAVID AND JEAN LOVE" LC DOC NO. 2008-130892 FOR LOVE REVOCABLE TRUST, UNDER AGREEMENT DATED MAY 30, 2008, RECORDED SEPTEMBER 15, 2020 AS INSTRUMENT NO. 2020-158946, IN THE OFFICE OF THE COUNTY RECORDER OF LINCOLN COUNTY, NEVADA, LOCATED IN THE PORTION OF THE NORTHEAST QUARTER (NE 1/4) OF THE SOUTHEAST QUARTER (SE 1/4) OF SECTION 24, TOWNSHIP 2 SOUTH, RANGE 67 EAST, M.D.B.&M.

**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
a) 012-210-33; 012-210-56  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

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

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 Date of  
g)  Agricultural h)  Mobile Home 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 7  
b. Explain Reason for Exemption: Transfer to or from a Trust without consideration

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 [Signature] Capacity Attorney  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION  
(REQUIRED)**

**BUYER (GRANTEE) INFORMATION  
(REQUIRED)**

Print Name: **Del Gray and Veletia Gray**

Print Name: **Del William Gray and  
Veletia Sharon Gray,  
Trustees of The Gray  
Family Revocable Living  
Trust Dated February 23,  
2024**

Address: P.O. Box 917  
City: Panaca  
State: Nevada 89042

Address: P.O. Box 917  
City: Panaca  
State: Nevada 89042

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

Print Name: CASSADY LAW OFFICES Escrow #: \_\_\_\_\_  
Address: 10799 W. Twain Avenue  
City: Las Vegas State: NV Zip: 89135