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JUL 22 1991

LUREKA COUNTY

J. P. ITHURRALITY ASSESSOR

APPLICATION FOR AGRICULTURAL USE ASSESSMENT
THIS PROPERTY MAY BE SUBJECT TO LIENS FOR UNDETERMINED AMOUNTS
(PLEASE READ CAREFULLY THE ATTACHED INFORMATION AND INSTRUCTION SHEET)

Note: If necessary, attach extra pages.

Pursuant to Nevada Revised Statutes, Chapter 361.A (I) (We), Francis E. Nuttall RaVey A. Nuttall (Please print or type the name of each owner of record or his representative) hereby make application to be granted, on the below described agricultural land, an assessment based upon the agricultural land, an assessment based upon the agricultural land, and assessment land the agricultural land the agricultural land, and assessment land the agricultural land, and agricultural land the agricultural land, and agricultural land the ag cultural use of this land. (I) (We) understand that if this application is approved, it will be recorded and become a public record. acres, is located in 07-140-20 County, Nevada and is This agricultural land consists of _ (Assessor's Parcel Number(s)) T22N.R54E 19 SE4 Legal description (I) (We) certify that the gross income from agricultural use of the land during the preceding calendar year was \$5,000 or more. Yes __ No __. If yes, attach proof of income. (I) (We) have owned the land since (I) (We) have used it for agricultural purposes since The agricultural use of the land presently is (i.e. grazing, pasture, cultivated, dairy, etc.) . If so, when 1976 Was the property previously assessed as agricultural (I) (We) hereby certify that the foregoing information submitted is true, accurate and complete to the best of (my) (our) knowledge. (1) (We) understand that if this application is approved, this property may be subject to liens for undetermined amounts. (1) (We) understand that if any portion of this land is converted to a higher use, it is our responsibility to notify the assessor in writing within 30 days. (Each owner of record or his authorized representative must sign. Representative must indicate for whom he is signing, in what capacity and under what authority.) Please print name under each signature. Signature of Applicant or Agent Signature of Applicant or Agent Phone Number Address

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6a Agricultural program payments (see insuccions). 7 Commodity Credit Corporation (CCC) loans: a CCC loans reported under election (see Instructions).	Sinstructions) Poes nut As Elf As El	os X No
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a CCC loans reported under election (see Instructions)	ole amount 7c Sb	dia partir
b CCC loans todated or repaid with contificates 7b 7c Taxat	. d3 Inucma elu	1
R. Crop insurance proceeds and certain disaster payments (see Instructions):		والمرابع والمرابع المراجع
a Amount received in 1990		
e if election to defer to 1931 is attached, check here	9	
9 Custom hire (machine work) income		
Other income, including Foderal and state gascline or fuel tax credit or refund (see instructions). Add amounts in the right column for lines 3 through 10. If accrual method tax payer, enter the amount	from	
and the world to a common became		, 107
page 2, line 51. This is your gross Income . Part II Farm Expenses—Cash and Accrual Method (Spinot include personal or living expens	es such as taxes, insurance, repairs, etc	, on your home
12 Breeding fees	CGII)	
13 Chemica's 25 Pension and profit-share		<u> </u>
26 Rent or lease (see Institu		glagia proba e e
must attach Form 8645) 14		
15 Custom hire (machine work)		,689
16 Depreciation and section 179 28 Seeds and plants purch		,517
expense deduction not claimed		
an Suchles purchased	30 1	,321
17 Employee benefit programs other than on line 25	31	373
18 Feed purchased 18 32 Utilities		,593
19 Fertilizers and lime		
20 Freight and trucking 20 34 Other expenses (specific properties of the control of the	y):	110
21 Gasoline, fuel, and oil 21 886 a PROFESSIONAL		42
22 Insurance (other than health)	110110	,167
All Market Management Control	34d	
a Mortgage (paid to banks, etc.)	34e	
b Other	341	
9	34g	
h	34h	
	341	
	35 22	2,492
35 Add amounts on lines 12 through 34i. These are your total expenses		.,436
25 Not from most of flore). Subtract line 35 from tine 11. If a profit, enter on Form 1040, line 19, and	on tions) 36 16	3,385-
Schedule SE, line 1. If a loss, you MUST go on to line 37. (Fiduciaries and partnerships, see Instruc	07- 3114	tment is at risk.
37 If you have a loss, you MUST check the box that describes your investment in this activity (see Instru	Some in Some i	estment
If you checked 37a, enter the loss on Form 1040, line 19, and Schedule SE, line 1. If you checked 37b, you MUST attach Form 6198.	Schedule F (Fo	

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RECORDED AT IN RESIDENCE

ELLECKA CO. (LIMINA)

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EUREKA COUNTY NUMBER
M. REBALEATH RECORDER
FILE NO. HEE \$7.0

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