

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

Name

Street Address

City & State

SPACE ABOVE THIS LINE FOR RECORDER'S USE

MAIL TAX STATEMENTS TO

Name

Street Address

City & State Zip

DOCUMENTARY TRANSFER TAX \$

COMPUTED ON FULL VALUE OF PROPERTY CONVEYED.

OR COMPUTED ON FULL VALUE LESS LIENS AND ENCUMBRANCES REMAINING AT TIME OF SALE.

Signature of Declarant or Agent determining tax. Firm Name

# Grant Deed

This Deed, made the ..... ninth ..... day of

March ..... one thousand nine hundred and ..... ninety two

Between ..... MARILAN G. RAMBLE

Grantor

and ..... JAMES L. ZEMKE

Grantees

Witnesseth: That the said Grantor, in consideration of the sum of

..... ~~FIFTEEN HUNDRED~~ ..... dollars, lawful money of the United States of America, in hand paid by the said Grantee, the receipt whereof is hereby acknowledged, do ..... by these presents grant, bargain, and sell unto the said Grantee, and to his heirs and assigns forever, all

th. at ..... certain lot ..... piece ..... or parcel ..... of land situated in the EUREKA

County of EUREKA ..... State of NEVADA ..... and bounded and

described as follows: Parcel 02-023-14. Lot 17 of Block 4, Crescent Valley Ranch and Farms Unit Number 1.

Page 1

This document is only a general form which may be proper for use in simple transactions and in no way acts, or is intended to act, as a substitute for the advice of an attorney. The printer does not make any warranty, either express or implied, as to the legal validity of any provision or the suitability of these forms for any specific transaction.

Cowdery's Form No. 464 - GRANT DEED (C.C. Sec. 682) (Rev. 1/83)

BOOK 232 PAGE 592

**Together** with all and singular the tenements, hereditaments, and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues, and profits thereof.

**To have and to hold** all and singular the said premises, together with the appurtenances, unto the said Grantees, as joint tenants, and not as tenants in common, with right of survivorship, and to the heirs and assigns of such survivor or survivors forever.

**In Witness Whereof** the said Grantor ha...S....executed this conveyance the day and year first above written.

Signed and Delivered in the presence of

*Ronald B. Dwyer*  
.....  
*Kathryn A. Zinke*  
.....

*Marilan G. Ramble*  
.....  
.....

BOOK 232 PAGE 593  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
*James Zemke*  
92 MAR 24 P5:00

EUREKA COUNTY, NEVADA  
M.N. REDEALTI. RECORDER  
FILE NO. 140291  
FEE \$6.00

Dated ..... MARCH 9, 1992

JAMES L. ZEMKE

TO


Grant Deed

This document must be executed in the presence of a Notary Public.

State of ~~California~~ Nevada  
County of ..... Eureka ss,

On this... 9th ..... day of... March .....  
in the year one thousand nine hundred and... ninety..two...  
before me, ..... Betty J. Krambs .....  
a Notary Public, State of California, duly commissioned and  
sworn, personally appeared.....  
..... Marilan G. Ramble .....  
personally known to me (or proved on the basis of satisfactory  
evidence) to be the persons described in and whose names are  
subscribed to the within instrument, and acknowledged to me  
that... she ..... executed it.

In Witness Whereof I have hereunto set my hand and affixed my  
official seal in the ..... Eureka ..... County  
of ..... Nevada ..... on the day and year in this certificate  
first above written.

 **BETTY J. KRAMBS**  
NOTARY PUBLIC - STATE OF NEVADA  
Eureka County - Nevada  
APPT. EXP. 6-15-94

*Betty J. Krambs*  
.....  
Notary Public, State of ~~California~~ Nevada  
My commission expires ... 15 June 1994

BOOK 232 PAGE 593

Recording Date 3/24/92 Book 232 Page 592 Instrument # 140291

\$ 2,000.00

\_\_\_\_\_

§ \_\_\_\_\_

\$ 2.40 2.60

☐ Escrow Holder only: Check if Real Property Transfer Tax is to be deferred under NRS 375.030, Section 3.

ESCROW HOLDER

Under penalty of perjury, I hereby declare that the above statements are correct to the best of my knowledge based upon the information available to me in the documents contained in the escrow file.

**Signature of Declarant**

**Name (Please Print)**

**Address**

Name (Please Print)

Minneapolis MN 55413  
City State Zip

Escrow Number

Firm Name

**Address**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Tax paid for the above transfer on March 24, 19 92, per NRS 375.030, Section 3.

Signature of Recorder or Representative