

173728

JOINT TENANCY DEED

THIS INDENTURE, made this 9th day of December, 1999 by and between WILLIAM E. & ROBIN R. HICKS, Grantors and JOHN BROWN & CHRISTINE SMITH husband and wife, Grantees, as Joint Tenants the survivor or survivors of them, and to the heirs and assigns of such survivor or survivors forever. The Grantees mailing address is P.O. Box 283, Eureka, NV 89316.

WITNESSETH: That the said Grantors, in consideration of TEN DOLLARS (\$10.00) lawful money of the United States of America, in hand paid by said Grantees, the receipt is hereby acknowledged, do by these presents grant, bargain, and sell unto the said Grantees all that certain lot, piece or parcel of land in the Townsite of Eureka, County of Eureka, State of Nevada, more particularly described as follows:

**Parcel D of Parcel Map, File #170339
file for record, August 6, 1998
Official Records of Eureka County, Nevada**

**excepting a portion of Well Street
as shown on Right of Way Dedication
Record of Survey Map File #171932
Official Records of Eureka County, Nevada**

APN 01-185-10 1.43 acres more or less

TOGETHER WITH 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 the said premises, together with the appurtenances, unto the said Grantees and to their successors and assigns forever.

IN WITNESS WHEREOF, THE Grantors have executed this conveyance the date and year first above written.

William E. Hicks
WILLIAM E. HICKS
Robin R. Hicks
ROBIN R. HICKS

STATE OF NEVADA)
)ss.
COUNTY OF EUREKA)

On Dec. 9, 1999, personally appeared before me, a Notary Public, WILLIAM E. and ROBIN R. HICKS, who acknowledge that they executed the foregoing instrument.

Glady Goicoechea
Notary Public

 **GLADY GOICOECHEA**
Notary Public - State of Nevada
Appointment Recorded in Eureka County
No: 94-0329-8 - Expires October 28, 2002

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF

John Brown
99 DEC 30 PM 4:35

EUREKA COUNTY NEVADA
M.M. REBALEATI, RECORDER.
FILE NO.

FEES 8.00

173728

COPY

BOOK 332 PAGE 221

State of Nevada Declaration of Value

1. Assessor Parcel Number(s)
 a) 01-185-10
 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
 i) Other _____

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument #:	<u>173728</u>
Book:	<u>332</u> Page: <u>220</u>
Date of Recording:	<u>12-30-99</u>
Notes:	_____

3. Total Value/Sales Price of Property: \$ _____
 Deduct Assumed Liens and/or Encumbrances: (_____)
 (Provide recording information: Doc/Instrument #: _____ Book: _____ Page: _____)

Transfer Tax Value per NRS 375.010, Section 2: \$ 2050.00
 Real Property Transfer Tax Due: \$ 2.60

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

5. Partial Interest: Percentage being transferred: _____ %

The undersigned Seller (Grantor)/Buyer (Grantee), 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 1/2% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

Seller Signature: _____
 Print Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Telephone: () _____
 Capacity: _____

Buyer Signature: [Signature]
 Print Name: Joan W. Brown
 Address: PO Box 471
 City: ELYRIA
 State: NV Zip: 89316
 Telephone: (775) 237-5229
 Capacity: _____

COMPANY REQUESTING RECORDING

Co. Name: _____ Esc. #: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)