

# GRANT DEED

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, I(We), the Grantor(s) Judith C Mayer Lynn  
Three Thousand dollars and no cents  
 grant to the Grantee(s) Kit Lorre Benadam  
 all that real property situated in the City of \_\_\_\_\_ (or in an unincorporated area of)  
 \_\_\_\_\_ County of Eureka \_\_\_\_\_ State of Nevada, described as  
 follows (Set forth legal description and commonly known street address if known):

Township 30 North, Range 48E, Section 15 NW 1/4 SE 1/4 SE 1/4

ASSESSORS PARCEL NO. 05-210-35

Together with all and singular the tenements, hereditament's, and appurtenances thereunto belonging or appertaining, and the reversion and revisions, remainder and remainders, rents, issues, and profits thereof.

In Witness Whereof, I/WE have hereunto set my hand/our hands this 20 day of June 2000

Judith C Mayer Lynn  
 Signature of Grantor  
Judith C Mayer Lynn  
 Print or type name here

\_\_\_\_\_  
 Signature of Grantor  
 \_\_\_\_\_  
 Print or type name here

STATE OF NEVADA }  
 COUNTY OF ELKO }

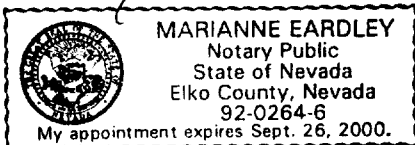
On this 16<sup>th</sup> day of JUNE, 2000  
 personally appeared before me, a Notary Public

JUDITH C. MAYER LYNN

personally known to me to be the person whose name(s) is subscribed to the above instrument who acknowledged that she executed the instrument.

Witness my hand and official seal

Marianne Eardley  
 Notary Public



(Notary Stamp)

RECORDING REQUESTED BY AND MAIL TO  
 NAME Kit Lorre Benadam  
 ADDRESS P.O. Box 342  
 CITY/ST/ZIP Silver Springs, NV 89429

If applicable mail tax statements to

NAME Kit Benadam  
 ADDRESS P.O. Box 342  
 CITY/ST/ZIP Silver Springs, NV 89429

SPACE BELOW THIS LINE FOR RECORDERS USE ONLY

BOOK 335 PAGE 172  
 OFFICIAL RECORDS  
 RECORDED AT THE REQUEST OF  
Judith Mayer-Lynn  
 00 JUN 27 PM 12:48

EUREKA COUNTY NEVADA  
 M.N. REBALEATI, RECORDER  
 FILE NO. 174848 FEES 7.00

# State of Nevada Declaration of Value

1. Assessor Parcel Number(s)  
 a) 05-210-35  
 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>174848</u>
Book: <u>335</u>	Page: <u>172</u>
Date of Recording:	<u>6/27/00</u>
Notes:	_____

3. Total Value/Sales Price of Property: \$ 3,000.00  
 Deduct Assumed Liens and/or Encumbrances: ( \_\_\_\_\_ )  
 (Provide recording information: Doc/Instrument #: \_\_\_\_\_ Book: \_\_\_\_\_ Page: \_\_\_\_\_ )

Transfer Tax Value per NRS 375.010, Section 2: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 3.90

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: Judith C Mayer Lynn  
 Print Name: Judith C Mayer Lynn  
 Address: 1010 Skyline  
 City: Battle Mtn  
 State: NV Zip: 89820  
 Telephone: (775) 635-2050  
 Capacity: Owner - Seller

Buyer Signature: Kit Lorre Benadam  
 Print Name: Kit Lorre Benadam  
 Address: P.O. Box 342  
 City: Silver Springs  
 State: NEVADA Zip: 89429  
 Telephone: (1) 577-0131  
 Capacity: Buyer

**COMPANY REQUESTING RECORDING**

Co. Name: \_\_\_\_\_ Esc. #: \_\_\_\_\_

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