

1 OR THE CONSIDERATION of TEN DOLLARS (\$10.00), and
2 other valuee consideration, the receipt of which is acknowledge

3 The Rasmuss Trust P. O. Box 112, Eureka, NV. 89316

4 herein refeed to as Grantor, does hereby grant, bargain and
5 sell to Robt Andrews and Pamela F. Lockwood Andrews 380 El Centro

6 P. O. Box 5 Eureka, Nevada, 89316

7 herein refeed to as Grantee, and their assigns, forever, the
8 property ar premises located in the County of Eureka, State
9 of Nevada, scribed as follows:

10
11 Lot of Parcel G of Large Division Map of the E. 1
12 S. 1 T. 20N., R. 53E. M.D.B.&M.. File # 96029, Eureka, CO.
13 APN07-392-06.

14
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16
17 XCEPTING THEREFROM all the oil and gas in and
18 nder said land, reserved by the United States
19 f America in Patent, recorded April 15, 1966,
20 n Book 10, Page 331, Official Records, Eureka
21 ounty, Nevada; and all minerals by the Grantor
22 ereof.

23 ogether with all buildings and improvements
24 hereon.

25 UBJECT TO all taxes and other assessments,
26 eservation, exceptions, and all easements
27 ights of way, liens, covenants, conditions
28 nd restrictions, as may appear of record.

29 OGETHER with the tenements, hereditaments,
30 nd appurtenances thereunto belonging or in
31 therwise appertaining, and the reversion and
32 everisions, remainder and remainders, rents,
33 ssues and profits thereof.

34 O HAVE AND TO HOLD the described premises to
35 rantee, and his heirs and assigns of, forever.

(1)

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IN WITNESS WHEREOF; the Grantors have signed this
Deed this th day of June 2000

GRANTEE'S ADDRESS:
P. O. Box 77
Eureka, Nevada 89316

GRANTEE'S SIGNATURE

Robert Andrews
Robert Andrews

Pamela F. Lockwood Andrews
Pamela F. Lockwood Andrews

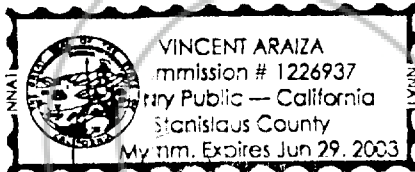
GRANTOR'S ADDRESS:
P. O. Box 112
Eureka, Nevada 89316

GRANTORS' SIGNATURE
Rasmussen Trust by

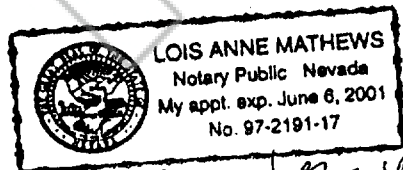
Earl A. Rasmussen
Earl A. Rasmussen, Trustee

Lavernia C. Rasmussen
Lavernia C. Rasmussen, Trustee

NOTARY SEAL:



Clara Rasmussen



Lois Anne Mathews

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Earl Rasmussen
00P-5 AM 10:27
EUREKA COUNTY NEVADA
M.N. SALEATH RECORDER
FEE \$8.00

17527

(2) - and last - BOOK 336 PAGE 529

State of Nevada
Declaration of Value

1. Assessor Parcel Number(s)
a) 07-392-06
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 _____
3. Total Value/Sales Price of Property: _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument #: 175127

Book: 336 Page: 528

Date of Recording: 9-5-00

Notes: _____

\$ 35,000.00
(_____)

Deduct Assumed Liens and/or encumbrances: _____
(Provide recording information: Doc/Instrument #: _____ Book: _____ Page: _____)

Transfer Tax Value per NRS 3010, Section 2: _____
Real Property Transfer Tax Due: _____

\$ _____
\$ 35,000.00 45.60

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) and 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

Seller Signature: _____

Print Name: _____

Address: _____

City: _____

State: _____

Telephone: () _____

Capacity: _____

BUYER (GRANTEE) INFORMATION

Buyer Signature: Rasmussen Trust

Print Name: RASMUSSEN TRUST

Address: Box 112

City: EUREKA, NV

State: _____ Zip: 89316

Telephone: (775) 237-5475

Capacity: _____

COMPANY REQUESTING RECORDING

Co. Name: _____ Esc. #: _____

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