



STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

- a) 007-391-03
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

2. Type of Property:

- a) \_\_\_\_\_ Vacant
- b) \_\_\_\_\_ Single Fam. Res.
- c) \_\_\_\_\_ Condo/Twnhs
- d) \_\_\_\_\_ 2 - 4 Plex
- e) \_\_\_\_\_ Apt. Bld.
- f) \_\_\_\_\_ Comm'l/Ind.
- g) \_\_\_\_\_ Agri.
- h) \_\_\_\_\_ Mobile Hm.
- i) \_\_\_\_\_ Other \_\_\_\_\_

FOR RECORDERS OPTIONAL USE ONLY

Doc./Ins. No. 176467  
 Book 341 Page 209  
 Recording Date 5-16-01  
 Notes \_\_\_\_\_

3. Total Value/Sales Price of property:

\$ 28,000.00

Deduct Assumed Liens and Encumbrances \_\_\_\_\_

Provide Recording Information: Doc. No. \_\_\_\_\_

Book \_\_\_\_\_ Page \_\_\_\_\_

Transfer Tax Value per NRS 75.010 Sec. 2 \$ 28,000.00

Real Property Transfer Tax \$ 36.40

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section \_\_\_\_\_

b. Explain Reason for Exemption: \_\_\_\_\_

5. Partial Interest: Percent: being transferred: 100 %

The undersigned Seller (Grantor)/Buyer (Grantee), declares and acknowledges, under penalty of perjury, pursuant to 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: *Barbara S Reuter*  
 Print Name: Barbara S Reuter, VP Financial Services  
 Address: P O Box 2288 895 Sie Way  
 City: Hawthorne  
 State: Nevada Zip: 89515  
 Phone: ( 775 ) 945-2421  
 Capacity: \_\_\_\_\_

Buyer Signature: \_\_\_\_\_  
 Print Name: Jimmie L Neuenswander  
 Address: P O Box 352  
 City: Eureka  
 State: Nevada Zip: 89316  
 Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Capacity: \_\_\_\_\_

COMPANY REQUESTING RECORDING

Co. Name: \_\_\_\_\_ Escrow No. \_\_\_\_\_

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