RPTT	A		
111 1 1	$\overline{}$		

## DEED OF GIFT

I, LYNNE A. HUN (MOTHER)	, the UNDERSIGNED GRANTOR, DECLARE;
For and in good considerat of the love and affection	
DANIEL P. HASSON (SON)	("Grantee"), and also for the better support,
maintenance, protection, and livelihi of said Grantee , do heirs and assigns the following desced real property in the C (set forth legal description and commonly kn street address if known)	("Grantee"), and also for the better support, hereby grant to Grantee, and to ounty ofEUREKA, State of Nevada.
, , ,	T QUARTER OF THE SOUTHEAST QUARTER
SECTION 29 BUNSHIP 29,	N RANGE 48E
APN # 3-141-8	
	\·\
ASSESSOR'S PARCEL NO.3 - 141 - 28	<del>- }</del> \ '
In Witness Whereof, I/We have hereunto say hand/our hands this	day of 7/ovember. 19 2001
Perma-a part	/ /
(Signature)	(Signature)
(Print or type name here) P.O. BOX 16 HALLECK, NV	(Print or type name here)
P.O. DON , ~ HALLER, 100	
STATE OF NEVADA	RECORDING REQUESTED BY AND MAIL TO
COUNTY OF CCC (	NAME DANIEL P HANSSON ADDRESS CITY/ST/ZIP 3250 PLUMAS 51-204 RENO, NV 89509 - 4740 If applicable mail tax statements to
On this $2/\frac{5}{2}$ day of $NOVEMB_{2}$ , 19 $200/$ personally appeared before me, a Notary Pt	RENO, NV 89509 - 4740.  If applicable mail tax statements to
* LYNKE A HUN *	NAME AI/A
	ADDRESS ///T CITY/ST/ZIP
personally known to me to be the person we name(s) is subscribed	SPACE BELOW THIS LINE FOR RECORDERS USE ONLY
to the above instrument who acknowledged S he executed the instrument	
Witness my hand and official scal	BOOK 346 PAGE 98 OFFICIAL RECORDS
Delin linscid	RECORDED AT THE REQUEST OF CAME! HANSSON
(Notary Public)  DEBRA UISSCHEIU	02 FEB 13 PM 1: 03
Notary Public - Novad: (Notary Stamp)  ELKO COUNTY  My Appt. Exp. May 15, 21	EUREKA COUNTY NEVADA M.N. REBALEATI, RECORDER FILE NO. FEES /4
No. 90-1082-6	177767

Nevada Legal Forms • Deed.Gift • DEC3
CONSULT AN ATTORNEY IF YOU DOUBT THIS MS FITNESS FOR CONTROL PAGE 98
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## STATE OF NEVAA DECLARATION C VALUE

Elko County Recorder 571 Idaho St., Rm. 103 Elko, NV 89801-3770

		FOF	R RECORDERS OPTIONAL USE ONLY
1. Assessor	Parcel Numbis)	Dα	ocument/Instrument#: /77767
a) <u>3-141                                   </u>	·	Boo	
		Dat	ate of Recording: 2 -/3 - 02
d)		Not	otes:
4)		·	
2. Type of Pr	onerhe	<u> </u>	
a) [X]	M	Single Fam Res.	
9 💆	Condo/Twnhse d)	2-4 Plex	
e) 🗀	Apt, Bldg. f) 🦳	Comm'l/Ind'I	^
9) [	Agricultural h)	Mobile Home	/\
,			
3. Total Val	ue/Sales Pricof Property:	\$	\ \
Deed in Li	eu of Foreclos Only (value o	f property) \$	
Transfer Ta	ax Value:	f property) \$ \$ \$	
	erty Transfer Toue:	<del></del>	
(Tax is o	computed at * per \$500	walua)	
4. If Exempti	on Claimed:	value	
	fer Tax Exempti per NRS 375.0	90 Section:	
b. Explai	n Reason for Exption:	GIFTED	FROM MOTHER TO SON
·	,		1.00 Joh
provided herei	n. Furthermorne disallowand ix due, may ret in a penalty o	ce of any claimed of 10% of the tax	to substantiate the information ed exemption, or other determination due plus interest at 1% per month. Intly and severally liable for any
additional am	ount owed.	The state of the s	
Signature			_Capacity
Signature_			_Capacity
		7	_ output.iv
SELLER (GI	RANTOR) INTRMATION	RIVER	(GRANTEE) INFORMATION
	QUIRED)	DOTEN	(REQUIRED)
Print Name:	LYNNEHUNT	Print Name	
Address:	PO BOX 46	Address:	3250 PLUMAS ST- #204
City:	ITALLECK	City:	125 / 201 / 201 125 / 201
State:	NU Zi 89824	State:	
Ounc.	3/32/	otate.	<u> </u>
COMPANY	PERSON REJESTING RE	COPDING	/
	OT THE SELLER OR/ER)	-COKDING	/
Print Name:	77 THE SELLER OR ER)		Eccou #
Address:			Escrow #
		State	<b>19</b>
City:		State:	Zip:
//	S A PUBLIC RERD THIS FORM	MAY BE RECOR	DED)
· · · · · · · · · · · · · · · · · · ·	TITLE THE PARTY OF	THE PLANT OF THE PARTY OF THE P	~~~/