Recording Requested By

178090

Order No.

Escrow No.

AND WHEN RECORDED MATO:

Name

Jesus J. Solis

P.O. Box 492

Street

Eureka, NV 89316

Address City & State

SPACE ABOVE THIS LINE FOR RECORDER'S USE

INDIVIDUAL GRANT DEED

A.P.N.

	1311 1131
The undersigned grantor (s) declare (1-074-10
Documentary transfer tax is \$-1.10-	City
(X) computed on full value of prety conveyed, or	\ \
() computed on full value less v: of liens and encumbrances remaining at time of sale.	\ \
(x) Unincorporated area: (\(\lambda\)	_ \ \
FOR A VALUABLE CONSIDERA'N, receipt of which is hereby acknowledged,	7
KENNETH R. CAMPBELL AND J. UALEENE CAMPBELL, trustees or their successors in trust,	
CAMPBELL LIVING TRUST, datetarch 16, 2001, and any amendments thereto as the sole and sepa	rate property of
Jacqualeene Campbell	
hereby GRANT(s) to Jesus J. Solis	
the following described real property he town of Eureka County of Eureka, State of Neveda;	
	9
LEGAL DESCRIPTION ATTACHEIERETO AS EXHIBIT " A" AND MADE A PART HEREOF	
LEGAL DESCRIPTION ATTACHETERETO AS EXHIBIT A AND MADE A PART HEREOF	
Dated March 11, 2002	
CTATE OF CALIFORNIA	~ · · · · ·
STATE OF CALIFORNIA,)SS. SOCOLAGILENO	an abold hunter
COUNTY OF Alameda JACOBAILEENE CAMPBELL,	and bell hustee
JACODAILEINE CAMP BELL,	INUSTEE
On March 11, 2002 before me,	Ill many
D. Werth personally appeared KENNETH R. CAMPBELL, TR	HETEE
D. Werth, personally appeared KENNETH R. CAMPBELL, TR	USIEE
Learnelane Common Trustee and Vanua Common Trustee	
Jacqualeene Campbell, Trustee and Kennet, Campbell, Trustee	
personally known to me (or proved to me he basis of satisfactory	
evidence) to be the person(s) whose namet/are subscribed to the	المممم
within instrument and acknowledged to mat he/she/they executed D. WEF COMM. # 1	RTH T
The same in institution authorized capacity, and that by	CALIFORNIA (1
his/her/their signature(s) on the instrument person(s), or the entity	OUNTY A
upon behalf of which the person(s) acted, suted the instrument.	N. 21, 2004 -4

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WITNESS my hand and official scal.

D. WERTH
COMM. # 1250834
NOTARY PUBLIC CALIFORNIA Q
ALAMEDA COUNTY
COMM. EXP. JAN. 21, 2004

(This area for official notarial seal)

MAIL TAX STATEMENTS TO:

Signature <

TO

NAME

ADDRESS

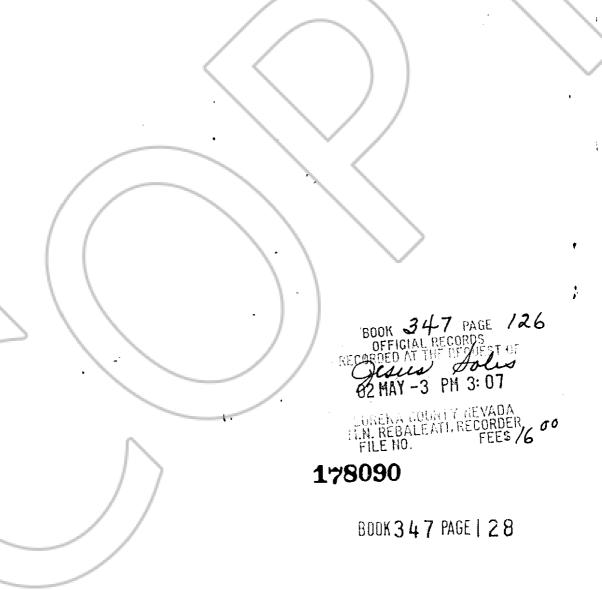
CITY, STATE, ZIP



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281 Spring St. A portion of Lots 26d 27 in Block 4, APN 1-074-10, described as follows:

Commencing at a point at the northst corner, Lot 29, Block 4 of the Plat of the Townsite of Eureká, Nevada, approved by the Servisor of Surveys, United States Department of the Interior, General Land Office, Novcer 19, 1937, thence South 18° 06′ E., a distance of 48.6 feet to the true point of beginn, thence North 71° 45′ #., a distance of 46.42 feet, thence South 18° 06′ E., a distance 50 feet, thence South 71° 45′ W., a distance of 46.42 feet thence North 18° 06′ W., a disce of 50 feet to the true point of beginning, all within the Townsite of Eureka, Eureka Ccty, Nevada. As the same more fully appear from the Official Map now on file in the Off of the County Recorder, Eureka County, Nevada.



STATE OF NEVAA DECLARATION C VALUE

1. Assessor Parcel Numbes)		Document/Instrument#:	178090
a) 001-074-10		Book: 347	Page: /26
b)		Date of Recording:	5/3/12
c)		Notes:	
d)			
c) Cando/Twnhse e	Single Fam Ro d) 2-4 Plex Comm'l/Ind'l Mobile Home		
3. Total Value/Sales Priof	Property:	s 800	10.00
Deed in Lieu of Foreclos O		• 000	
	my (value of property)	\$ 7 0 C \$ \$	
Transfer Tax Value:			
Real Property Transfer Tou	e:	\$10,40	
4. <u>If Exemption Claimed:</u> a. Transfer Tax Exempti pe b. Explain Reason for Expt			
5. Partial Interest: Percerge The undersigned declares and and NRS 375.110, that the immediate, and can be supported deprovided herein. Furthermother of additional tax due, may ret in	knowledges, under pena ation provided is correct ocumentation if called u e disallowance of any cla	to the best of their pon to substantiate aimed exemption, o	information and the information r other determination
D 44- NDO 075 000 4D			
Pursuant to NRS 375.030, 1 B	uyer and Seller shall b	e jointly and sever	rally liable for any
additional amount owed.		۲ // //	
Signature / /Q/2/2	of Jon	Capacity_	
Signature		Capacity	
SELLER (GRANTOR) HO	RMATION BILL	VER GRANTEE) INFORMATION
(REQUIRED)	, ,	(REQUIRED)	THE CHIMATION
Print Name: 1055	A/ic Print	Name:	
Address: 12000	$\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ Addre		
City: / E/J 2	KOLSAN City:	. / / 	71
State: Z	\$9316 State:	/ /	Zip:
COMPANY/PERSON RIU	ESTING RECORDIN	ig /	
(REQUIRED IF NOT THE SELLER CUY			
Print Name:		Escrow #	#
Address:			
City:	State:		Zip:
	om.c.		

(AS A PUBLIC FORD THIS FORM MAY BE RECORDED)