

**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number

- a) 03-022-04
- b) _____
- c) _____
- d) _____

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>178124</u>
Book:	<u>347</u> Page: <u>281</u>
Date of Recording:	<u>5-22-02</u>
Notes:	_____

2. Type of Property:

- a) Vacant Land
- b) Single Family Res.
- c) Condo/Twnhse
- d) 2-4 Plex
- e) Apt. Bldg.
- f) Comm'l/Ind'l
- g) Agricultural
- h) Mobile Home
- i) Other

Payoff deed for contract dated: 2/25/93

3. Total Value/Sales Price of property:

\$3,450.00
 Deed in Lieu of Foreclosure Only (value of property) \$
 Transfer Tax Value: \$3,450.00
 Real Property Transfer Tax Due: \$4.55
 (Tax is computed at 65¢ per \$500 value)

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 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, 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% per month.

Pursuant to NRS 375.030, Buyer and Seller shall be jointly and severally liable for any additional amount owed. Clemen's Title Guarantee Co., Trustee

Signature By Kathryn Carnat Capacity Seller
 Kathryn Carnat, Trust Officer

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Cattlemen's Title Guarantee
 Address: 1930 S. Dobson Road #2
 City: Mesa
 State: AZ Zip: 85206

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Lon and Nancy Sellard
 Address: PO Box 211153
 City: Crescent Valley
 State: NV Zip: 89821

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER/BUYER)

Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)