



**STATE OF NEVADA  
DECLARATION OF VALUE**

01600010342(CVB-1034)

**1. Assessor Parcel Number (s)**

- a) 2 047 02
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>184-803</u>
Book:	<u>373</u> Page: <u>202</u>
Date of Recording:	<u>1-8-04</u>
Notes:	_____

**2. Type of Property:**

- |  |              |                             |                 |
|--|--------------|-----------------------------|-----------------|
| a) <input checked="" type="checkbox"/> | Vacant Land  | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/>            | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex        |
| e) <input type="checkbox"/>            | Apt. Bldg.   | f) <input type="checkbox"/> | Comm'/Ind'l     |
| g) <input type="checkbox"/>            | Agricultural | h) <input type="checkbox"/> | Mobile Home     |
| i) <input type="checkbox"/>            | Other        |                             |                 |

**3. Total Value/Sales Price of Property:**

Deed in Lieu of Foreclosure Only (value of property)	\$	<u>9950.00</u>
Transfer Tax Value:	\$	_____
Real Property Transfer Tax Due: (Tax is computed at 65¢ per \$500 value)	\$	<u>39.00</u>

**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, the 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, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature *Marilyn Perkins* Capacity SELLER  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**

**BUYER (GRANTEE) INFORMATION**

(REQUIRED)  
Print Name: CATTLEMEN'S TITLE GUARANTEE CO.  
Address: 1930 S. DOBSON RD STE -2  
City: MESA  
State: AZ Zip: 85202

(REQUIRED)  
Print Name: JERRY AND MARILYN PERKINS  
Address: PO BOX 211007  
City: 713 SEVENTH STREET  
State: NV Zip: 89821  
CRESCENT VALLEY, NV 89821

**COMPANY/PERSON REQUESTING RECORDING**

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_