

DOC # 0210732

10/04/2007 1:22 PM

Official Record  
Recording requested by  
MICHAEL FIPPS

Eureka County - NV  
Mike Rebaleati - Recorder  
Fee: \$15.00 Page 1 of 2  
RPTT: \$273.00 Recorded By: LLH  
Book- 0464 Page- 0367



0210732

APN: 01-037-91  
Recording requested by and mail documents and  
tax statements to:

Name: Michael Fipps  
Address: 4475 Reservoir Rd  
City/State/Zip: Fallon NV 89406

### GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That Pamela D. Lyninger  
who aquired title as Pamela D. Fipps  
in consideration of \$ 10.00, the receipt of which is hereby acknowledged, do  
hereby Grant, Bargain, Sell and Convey to Michael and DeAnn Fipps

all that real property situate in the Eureka County of Eureka  
State of Nevada, bounded and described as follows:

Lots 13, 14, 15, 16, 17 and 18 Block 18,  
as the same are described on the official  
records of Eureka County, Nevada; subject to  
all existing easements to Eureka County, Nevada  
Parcel Number 01-037-91

**WARNING: THE COUNTY RECORDER MAY CHARGE AN ADDITIONAL FEE IF YOU  
WRITE WITHIN THE 1" MARGINS OF THIS DOCUMENT OR VIOLATE ANY OTHER  
RECORDING REQUIREMENTS IMPOSED BY YOUR COUNTY RECORDER.**

Together with all and singular hereditament and appurtenances thereunto belonging or in any way appertaining to.

In Witness Whereof, I/We have hereunto set my hand/our hands on 4<sup>th</sup> day of October, 2007.

Pamela and D. King  
Signature of Grantor


Signature of Grantor

Print or Type Name Here

Print or Type Name Here

STATE OF  
COUNTY OF  
On this 4<sup>th</sup> day of October, 2007 Pamela and D. King personally appeared  
before me, a Notary Public,  
 personally known to me OR  proved to me on the basis of satisfactory evidence to be the  
person(s) described in and who executed the foregoing instrument in the capacity set forth therein,  
who acknowledged to me that they executed the same freely and voluntarily and for the uses and  
purposes therein mentioned. Witness my hand and official seal.

Cheryl A. Morrison  
Notary Public  
My commission expires: 10/22/08  
Consult an attorney if you doubt this forms fitness for your purpose.

 CHERYL ANN MORRISON  
Notary Public - State of Nevada  
Appointment Recorded in Eureka County  
No: 04-93163-8 - Expires October 22, 2008

**STATE OF NEVADA  
DECLARATION OF VALUE**

FOR  
Do:  
Bo:  
Da  
No

**DOC # DV-210732**

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

a) 01-037-91  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

**2. Type of Property:**

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

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

\$ 69,929  
Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
Transfer Tax Value: \$ \_\_\_\_\_  
Real Property Transfer Tax Due: \$ 273.00

**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 Michael J. Fipps Capacity \_\_\_\_\_  
Signature Del Fipps Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**

**BUYER (GRANTEE) INFORMATION**

(REQUIRED)  
Print Name: Pamela D. Lyninger  
Address: P.O. Box 232  
City: Eureka  
State: NV Zip: 89316

(REQUIRED)  
Print Name: Michael J. Fipps  
Address: 4475 Reservoir Rd  
City: Fallon  
State: NV Zip: 89406

**COMPANY/PERSON REQUESTING RECORDING**

(REQUIRED IF NOT THE SELLER OR BUYER)

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