

Official RecordRecording requested By
MAXINE P REBLEATI

Eureka County - NV

Mike Rebaleati - Recorder

Fee \$15.00

Page 1 of 2

RPTT: \$25.35

Recorded By: FES

Book- 0469 Page- 0018

GRANT, BARGAIN, AND SALE DEED

APN: 1-201-02

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO:

NAME: Maxine P. Rebaleati
ADDRESS: P.O. Box 633
CITY/STATE/ZIP: Eureka, NV 89316



0211608

THIS INDENTURE made this 22nd day of October, 2007, by and between MAXINE P. REBALEATI hereinafter referred to as Grantor and ANTHONY ROWLEY hereinafter referred to as Grantee, whose address is: P.O. BOX 238, Eureka, NV 89316, situate in the City of Eureka, County of Eureka, State of Nevada.

WITNESSETH:

For valuable consideration received, the Grantor hereby grants, bargains, and sells unto said Grantee, as a single male, all that certain real property situate in the County of Eureka, State of Nevada that is described as follows:

ALL OF LOT SIX(6) IN BLOCK 29 as the same are delineated and described on the office map or plat of the Town site of Eureka here on November 19, 1937 and Map number 127447 which both are on file in the Office of the County Recorder of Eureka County of Eureka, Nevada together with all improvements thereon situated.

SUBJECT TO taxes for the present fiscal year, and subsequently, covenants, conditions, restrictions, exceptions and reservations, easements, encumbrances, leases or licenses, rights and right of way of record, if any.

TOGETHER WITH the tenements, hereditaments and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD said premises, together with the appurtenances, unto said Grantee as joint tenants with rights of survivorship and not as tenants in common and their assigns and the heirs and assigns of the survivor forever.

IN WITNESS WHEREOF, Grantor has caused this conveyance to be executed the day and year first above written.

Maxine P. Rebaleti
Signature of Grantor
MAXINE P. REBALEATI

STATE OF NEVADA)

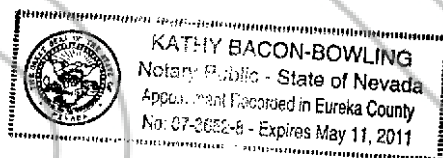
COUNTY OF EUREKA)

This instrument was acknowledged before me on January 14, 2008

By

Kathy Bacon-Bowling
Notary Public

My Commission expires: May 11, 2011



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number (s)

a) 01-201-02
b) _____
c) _____
d) _____

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'l/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) \$

Transfer Tax Value: \$

Real Property Transfer Tax Due: \$

6085.00

\$

\$

25.35

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 Maxine P. Rebaleati Capacity Agent
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: MAXINE P. Rebaleati
Address: PO Box 633
City: Eureka
State: NV Zip: 89316

BUYER (GRANTEE) INFORMATION

(REQUIRED)

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

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

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

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)

FO
Dc
Bc
Dc
Ni

DOC # DV-211608

01/14/2008

04:03 PM

Official Record

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