

JOINT TENANCY DEED

APN: #002-18-23

DOC # 0212232

08/14/2008

03:52 PM

Official Record

Recording requested By
RAFAEL COLLAZO

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 of 1

RPTT:

Recorded By: FS

Book- 0475 Page- 0205



0212232

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Rafael Collazo
Address: P.O. Box 211205
City/State/Zip: Crescent Valley, NV, 89821

THIS INDENTURE made this 14 day of August, 2008, by and between
Rafael Collazo + Leann Sweet hereinafter referred to as Grantor(s), and
Rafael Collazo + Leann Sweet hereinafter referred to as Grantees,
whose address is (if applicable): P.O. Box 211205, situate in the
City of Crescent Valley, County of Eureka, State of Nevada.

WITNESSETH:

For valuable consideration received, Grantor(s) does by these presents grant, bargain and sell unto said Grantees as joint tenants with rights of survivorship and not as tenants in common, and their assigns and heirs and assigns of the survivor forever, all that certain real property situate in the County of Eureka, State of Nevada that is described as follows:

(Set forth legal description) 4042 Eureka Ave - Block 20 Lot 18

CVR + Fu #1

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 there-unto belonging or appertaining and the reversion and reversions, remainder and remainders, rents, issue 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(s) has caused this conveyance to be executed the day and year first above written.

Rafael Collazo
Signature of Grantor

Leann Sweet
Signature of Grantor

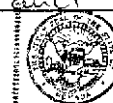
STATE OF NEVADA)
COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) Aug. 14, 2008

By (person(s) appearing before notary public) Rafael Collazo and Leann Sweet

Kathy Bacon-Bowling
Notary Public

My Commission expires: May 11, 2011



KATHY BACON-BOWLING
Notary Public - State of Nevada
Appointment Recorded in Eureka County
No: 07-3652-8 - Expires May 11, 2011

(Notary Stamp)

STATE OF NEVADA
DECLARATION OF VALUE

DOC # DV-212232

08/14/2008

03:52 PM

Official Record

1. Assessor Parcel Number (s)

a) #002-18-23
b) _____
c) _____
d) _____

FOR RECO

Document/
Book:
Date of Re
Notes:

Recording requested By
RAFAEL COLLAZO

Eureka County - NV

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Page 1 of 1 Fee: \$14.00

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Book- 0475 Page- 0205

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:

\$ _____
\$ _____
\$ _____
\$ _____

4. If Exemption Claimed:

a. Transfer Tax Exemption, per NRS 375.090, Section: #3

b. Explain Reason for Exemption:

True Status of ownership

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 _____ Capacity _____

Signature Heanna Sweet Capacity Buyer

SELLER (GRANTOR) INFORMATION

(REQUIRED)

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

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Heanna Sweet
Address: P.O. Box 211205
City: Crescent Valley
State: NV Zip: 89821

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)