

DOC # 0214525

01/25/2010

09:27 AM

Official Record

Recording requested By
ROBERT L STRANG

Eureka County - NV
Mike Rebaleati - Recorder

Fee \$15.00

Page 1 of 2
Recorded By: FES

RPTT:

Book- 497 Page- 0208



0214525

A. P. No. 005-420-29

When recorded mail to:

Mr. and Mrs. Robert L. Strang
370 Bluebird Way
Burlison, TN 38015

Mail tax statements to:

Grantee

**AFFIRMATION PURSUANT TO
NRS 111.312(1)(2) AND 239B.030(4)**

X Pursuant to NRS 239B.030, the undersigned, hereby affirm(s) that the below document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons.

-OR-

_____ The undersigned, hereby affirm(s) that this document, including any exhibits, hereby submitted for recording does contain the social security number of a person or persons as required by the following: _____.

Carole M. Payer

Signature

Agent

Carole M. Payer

Print Signature

Attorney

Title

DEED

THIS INDENTURE WITNESSETH: That ROBERT L. STRANG, Personal Representative of the Estate of GERALDINE H. STRANG, in consideration of the sum of Ten Dollars (\$10.00), the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell

and convey to ROBERT L. STRANG and ELIZABETH A. STRANG, husband and wife, as joint tenants with right of survivorship, whose address is 370 Bluebird Way, Burlison, Tennessee 38015, all that real property situate in the County of Eureka, State of Nevada, described as follows:

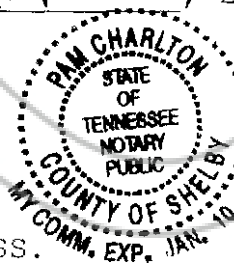
TOWNSHIP 29 NORTH, RANGE 48 EAST, M.D.B.&M.

SECTION 1: NE 1/4 of Lot 1

TOGETHER WITH all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

This conveyance is made pursuant to Order of the Seventh Judicial District Court of the State of Nevada, in and for the County of Eureka, dated October 16, 2009, Case No. PR0909-188, a certified copy of which is recorded concurrently herewith.

DATED 12-21-09, 2009



[Signature]
Robert L. Strang, Personal
Representative of the
Estate of Geraldine H. Strang

STATE OF TENNESSEE)

) SS.

COUNTY OF SHELBY)

This instrument was acknowledged before me on 12-21-09, 2009, by Robert L. Strang, as Personal Representative of the Estate of Geraldine H. Strang.

[Signature]
Notary Public

Exp. 1-10-2012



STATE OF NEVADA
DECLARATION OF VALUERecording requested By
ROBERT L. STRANG

Eureka County - NV

Mike Rebaleati - Recorder

Page 1 of 1 Fee \$15.00
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1. Assessor Parcel Number (s)

- a) 005-420-29
-
- 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 | | |

FOR RECORDERS OPTIONAL USE ONLY

Notes: _____

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: Transfer made pursuant to a will.

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 Grantee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED) Robert L. Strang, Pers.

Print Name: Rep. of Estate of Strang

Address: 370 Bluebird Way

City: Burlison

State: TN Zip: 38015

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Robert L. and Elizabeth A. Strang

Address: 370 Bluebird Way

City: Burlison

State: TN Zip: 38015

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: Carole M. Pope Escrow # _____

Address: 301 Flint Street

City: Reno State: NV Zip: 89501

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)