

# JOINT TENANCY DEED

APN: 001-136-10

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: CECILE JOHNSTON  
Address: P.O. BOX 247  
City/State/Zip: EUREKA / NEVADA / 89316

DOC # 0217110

05/17/2011

03:08 PM

Official Record

Recording requested By  
CECILE JOHNSTON

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

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RPTT:

Recorded By: FES

Book- 514 Page- 0224



0217110

THIS INDENTURE made this        day of MAY, 2011, by and between  
CECILE JOHNSTON hereinafter referred to as Grantor(s), and  
THOMAS G. JOHNSTON hereinafter referred to as Grantees,  
whose address is (if applicable): 1260 E. FAIRBROOK ST., situate in the  
City of MESA, County of MARICOPA, State of ARIZONA.

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) PARCEL NUMBER 001-136-10 EU

PROPERTY LOCATION: 351 SOUTH SPRING STREET, BLOCK 7, LOT 23

PARCEL # CONTAINING DESCRIPTIVE / DOCUMENT DATA: 000-482-54, LAND USE: 200

TOTAL ACRES: 2.00 ; SQUARE FT.: 8542

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.

[Signature]  
Signature of Grantor

\_\_\_\_\_  
Signature of Grantor

STATE OF NEVADA )  
COUNTY OF EUREKA )

This instrument was acknowledged before me on (date) May 17, 2011

By (person(s) appearing before notary public) Cecile Johnston

Notary Public

My Commission expires: 7/17/2012



SARA G SIMMONS  
NOTARY PUBLIC, STATE OF NV  
EUREKA COUNTY • NEVADA  
CERTIFICATE # 97-0349-8  
APPL. EXP. JULY 17, 2012

(Notary Stamp)

STATE OF NEVADA  
DECLARATION OF VALUE

DOC # DV-217110

05/17/2011

03:08 PM

Official Record

1. Assessor Parcel Number (s)

a) 001-136-10  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

FOR RECO

Document/  
Book:  
Date of Re:  
Notes:

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Page 1 of 1 Fee: \$14.00  
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2. Type of Property:

a) <input type="checkbox"/>	Vacant Land	b) <input checked="" 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: \$

\$ 63,600  
\$  
\$  
\$

4. If Exemption Claimed:

a. Transfer Tax Exemption, per NRS 375.090, Section: FIVE

b. Explain Reason for Exemption: MOTHER ADDING SON TO JOINT

TENANCY DEED

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 Cecile Johnston Capacity GRANTOR  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: CECILE JOHNSTON  
Address: P.O. BOX 247  
City: EUREKA  
State: NV Zip: 89316

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: THOMAS JOHNSTON  
Address: 1260 E. FORTBROOK St.  
City: MESA  
State: AZ Zip: 85203

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)