APN 005-670-40

GRANTEE'S ADDRESS:

P.O. Box 215 Lund, Nevada 89317 世1043のつらっよつ DOC # 0218879

/07/2011 11:31

Official Record
Recording requested By
STEWART TITLE OF NV

Eureka County - NV Mike Rebaleati - Recorder

Fee: **\$42.00** RPTT: **\$39.00**

Page 1 of 4 Recorded By: FES

Book- 525 Page- 0178



GRANT, BARGAIN AND SALE DEED

WITNESSETH:

TOWNSHIP 28 NORTH, RANGE 52 EAST, M.D.B.&M.

Section 3: SE1/4NW1/4; SW1/4NW1/4

-1.-

EXCEPTING THEREFROM all petroleum, oil, natural gas and products derived therefrom, lying in and under said land, as reserved by Southern Pacific Land Company, in Deed recorded March 9, 1950, in Book 24, Page 42, Deed Records, Eureka County, Nevada.

FURTHER EXCEPTING THEREFROM an undivided one-half (1/2) interest of all other mineral rights, lying in and under said land, as reserved by Oscar Rudnick, et al, in Deed recorded April 23, 1956, in Book 25, Page 2, Deed Records, Eureka County, Nevada.

TOGETHER WITH ALL AND SINGULAR, the tenements, hereditaments and appurtenances thereunto belonging and in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD, ALL AND SINGULAR, the said premises together with the appurtenances, unto the said Grantee, and to its heirs and assigns forever.

IN WITNESS WHEREOF, the said Grantor has hereunto set his hand the day and year first above written.

X ary w. Smith

			The state of the s	The second second					
STATE C)F		}						
COUNTY	OF) ss)	3.	_				
	On	ı/			_'	2011,	personally	appea.	rec
before	me,	a Notary	Public,	GARY	W.	SMITH,	personally	known	or
proved	to me	to be the	person	whose	nam	ne is su	bscribed to	the ab	ove
The state of the s									

SEE ATTACHED ACKNOWLEDGEMENT

instrument who acknowledged that he executed the instrument. NOTARY PUBLIC SEE ATTACHED ACKNOWLEDGEMENT -3-

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California	
County of Alameda —	
On 10-29-2011 -before me, <u>Samar</u>	tha kahealani muler norary public — (Here insert name and title of the officer)
personally appeared <u>Gary wwne</u>	, Smith,
the within instrument and acknowledged to me	vidence to be the person(s) whose name(s) is/are subscribed to that he/she/they executed the same in his/her/their authorized (s) on the instrument the person(s), or the entity upon behalf of ent.
I certify under PENALTY OF PERJURY under is true and correct.	the laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal.	Samantha Kahealani Miller COMM. #1948351 m
SXX00 mel	ALAMEDA COUNTY Aly Comm. Exp. AUG 15, 2015
Signature of Notary Public	(Notary Seal)
· / /	
ADDITIONAL	OPTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT Grant, bargain and (Title or description of attached document) Sale deed (Title or description of attached document continued)	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorised capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.
Number of Pages 3 Document Date 10 29 11 APN - 805 - 670 - 40 -	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
(Additional information)	The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization.
CAPACITY CLAIMED BY THE SIGNER Individual (x) Corporate Officer	Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ho/she/they; is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible.
(Title) □ Partner(s)	Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk.
☐ Attorney-in-Fact ☐ Trustee(s)	Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.

Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Securely attach this document to the signed document

11/07/2011

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STATE OF NE				
	arcel Number(s)			\wedge
a)				
p)				\ \
c) d)				\ \
				\ \
2. Type of Pro	•	— а		\ \
· 	cant Land b)	Single Family I	Residence	_ \ \
	ndo/Twnhse d)	2-4 Plex		
· · -	artment Bldg. f)	Commercial/In	dustrial	
· · · · · · · · · · · · · · · · · · ·	ricultural h)	Mobile Home		
i) L Ot	her			\
	/Sales Price of Propert			\$10,000.00
	eu of Foreclosure Only	y (Value of Property)	()
Transfer 7				\$10,000.00
•	erty Transfer Tax Due		\ /-	\$39.00
4. If Exemption		ND0 075 000 0		/
	sfer Tax Exemption, po	74.	CTION:	
•	ain Reason for Exempt	-	%	
o. Faitiarintei	est: Percentage being	transferred: 100	70	
NRS 375.110 th be supported to Furthermore, the may result in a p	at the information provo by documentation if of e disallowance of any benalty of 10% of the to RS 375.030, the Buy	rided is correct to the called upon to sub claimed exemption ax due plus interest a	best of their info stantiate the inf or other determin at 1% per month.	rsuant to NRS 375.060 and rmation and belief, and can formation provided herein ation of additional tax due, I severally liable for any
Signature:	Mary 12.	Smith	Capacity:	Grantor
	Gary W. Smith	Appace	-	
Signature:			Capacity:	Grantee
		s surviving trustee	of	
	the Dorris Family	and the second s		
	dated August 25, 2	2003		
SELLER (GI	RANTOR) INFORMA	ATION BUY	ER (GRANTEE)	INFORMATION
Print Name:	Gary W. Smith	Print Na	ame: <u>Laura M.</u>	Dorris
Address:	426 Devon Court	Addres	s: P. O. Box	¢ 215
City/State/Zip	San Ramon, CA 945	83 City/Sta	3. <u>1.0.00</u>	
COMPANY			te/Zip Lund, NV	89317
	FRSON REQUEST	ING RECOPDING	te/Zip Lund, NV	
Company Nar	ERSON REQUEST		te/Zip Lund, NV	
Company Nar			te/Zip Lund, NV	the Seller or Buyer)



STATE OF	NEVADA			DOC #	DV-218	
	TION OF VALUE			Offic		cord
	or Parcel Number(s)		Recording r	eguested By	
a) b)				STEWART TIT		
c) —				Eure	ka County - N	1
d)				Mike Reb	aleati - Recor	der
2. Type of	Property			Page 1 of	2 Fee: \$42.0	
a) X	Vacant Land	b) Single	e Family Resid	Recorded By Book-525		10
c)	Condo/Twnhse	d) 2-4 P	lex	2	, dage	\
e)	Apartment Bldg.	f) Com	mercial/Industrial			/
g) -	Agricultural	h) Mobil	e Home			The same of
i)	Other				7	The same of
3. Total V	alue/Sales Price of	Property		1	310,000.00	1000
	in Lieu of Foreclosu		Property) ()	1
Trans	fer Tax Value		<u> </u>		10,000.00	
Real	Property Transfer T	ax Due:	_		\$39.00	
4. If Exen	nption Claimed:			_/ /		
a.	Transfer Tax Exemp	otion, per NRS 375	i.090, Section:			
b. I	Explain Reason for	Exemption:				
5. Partial	Interest: Percentag	e being transferre	d: <u>100 %</u>			
be support Furthermore may result i Pursuant t	10 that the informati ed by documentat e, the disallowance n a penalty of 10% (to NRS 375.030, the amount owed.	ion if called upo of any claimed ex of the tax due plus	n to substantia emption or othe interest at 1% p	te the inform r determination er month.	nation provided I on of additional ta	herein. ix due,
	\ \		1	O	Grantor	
Signatur		*41-		Capacity:		
Signatur	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ram (Capacity:	Grantee	
r		orris, as surviving amily Trust (Irre)				
	dated Augu		ocable)			
		ō				
SELLER	(GRANTOR) INF	ORMATION	BUYER (GI	RANTEE) IN	FORMATION	
Print Nan	ne: <u>Gary W. Smi</u> t	h)	Print Name:	Laura M. Do	rris	
Address:	426 Devon C	ourt /	Address:	P. O. Box 2	15	
City/State	e/Zip <u>San Ramon,</u>	CA 94583	City/State/Zip	Lund, NV 89	9317	
COMPAN	YY/PERSON REC	UESTING RECO	ORDING (requi	ired if not the	e Seller or Buve	r)
Company		rt Title of Nevada			043029-27	<u></u>
The state of the s	665 Campton S					
City			State:	NV 7	'in 89315	