

APN: 005-610-02
Recording Requested By
and Return to:
Slagowski Ranches, Inc.
HC 65 Box 30
Carlin, NV 89822

DOC # 0223769
02/04/2013 11:47 AM
Official Record
Recording requested By
CARL & SHARON SLAGOWSKI
Eureka County - NV
Mike Rebaleati - Recorder
Fee: \$15.00 Page 1 of 2
RPTT: \$29.25 Recorded By: FES
Book- 547 Page- 0135



The undersigned affirms that this document does not contain a social security number.

Grantee's Address/
Mail tax statement to:
HC 65 Box 30
Carlin, NV 89822

GRANT DEED

FOR CONSIDERATION RECEIVED, **CARL F. SLAGOWSKI** and **SHARON A. SLAGOWSKI**, as Trustees of **CARL F. and SHARON A. SLAGOWSKI FAMILY TRUST**, Grantor, grants, bargains, sells and transfers to **SLAGOWSKI RANCHES, INC.**, a Nevada Corporation, and to the successors and assigns of the Grantee, forever, the property located in the County of Eureka, State of Nevada, described as follows:

Township 28 North, Range 49 East, M.D.B.&M.

Section 5: All

Together with all buildings and improvements thereon.

Together with all and singular the tenements, hereditaments, easements, and appurtenances thereunto belonging or in anywise appertaining, and the reversions, remainders, rents, issues and profits thereof, or of any part thereof.

SUBJECT TO all taxes and assessments, reservations, exceptions, easements, rights of way, limitations, covenants, conditions, restrictions, terms, liens, charges and licenses affecting the property of record.

GOICOECHEA, DIGRAZIA, COYLE & STANTON, LTD.
ATTORNEYS AT LAW
530 IDAHO STREET - P.O. BOX 1358
ELKO, NEVADA 89801
(775) 738-8091

TO HAVE AND TO HOLD the property with the appurtenances to the Grantee, and to the successors and assigns of the Grantee, forever.

SIGNED this 4th day of February, 2013.

GRANTOR:

CARL F. and SHARON A. SLAGOWSKI
FAMILY TRUST

BY: Carl Slagowski
CARL F. SLAGOWSKI, Trustee

BY: Sharon A. Slagowski
SHARON A. SLAGOWSKI, Trustee

STATE OF NEVADA)
 : SS.
COUNTY OF Eureka)

This instrument was acknowledged before me on Feb. 4th, 2013, by CARL F. SLAGOWSKI and SHARON A. SLAGOWSKI.

Sara G. Simmons
NOTARY PUBLIC

 SARA G. SIMMONS
Notary Public - State of Nevada
Appointment Recorded In Eureka County
No: 97-0349-6 - Expires July 17, 2016

GOICOECHEA, DIGRAZIA, COYLE & STANTON, LTD.
ATTORNEYS AT LAW
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**STATE OF NEVADA
DECLARATION OF VALUE FORM**

DOC # DV-223769

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Official Record

1. Assessor Parcel Number(s)

- a) 005-610-02
- b) _____
- c) _____
- d) _____

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2. Type of Property:

- a) Vacant Land
- b) Single Fam. Res.
- c) Condo/Twnhse
- d) 2-4 Plex
- e) Apt. Bldg
- f) Comm'l/Ind'l
- g) Agricultural
- h) Mobile Home
- Other _____

Page 1 of 1 Fee: \$15.00
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Notes: _____

3. Total Value/Sales Price of Property

Deed in Lieu of Foreclosure Only (value of property) \$ 32,125.00 *7017*
Transfer Tax Value: \$ 32,125.00 *7017*
Real Property Transfer Tax Due \$ 126.75 *29.25*

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 9
- b. Explain Reason for Exemption: Grantor owns 50% of Grantee corporation.
RPTT computed on 50% interest

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 parties agree that 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 Grantor
Carl F. Slagowski
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)
Print Name: Carl F. and Sharon A. Slagowski Family Trust
Address: HC 65 Box 30
City: Carlin
State: NV Zip: 89822

(REQUIRED)
Print Name: Slagowski Ranches, Inc.
Address: HC 65 Box 30
City: Carlin
State: NV Zip: 898223

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

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

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED