

GRANT, BARGAIN, and SALE DEED

APN: 003-451-06

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO  
Name: Lesley + Tami Standridge  
Address: HC 66 Box 2-12  
City/State/Zip: Beowawe, NV 89821

DOC # 0225109

10/30/2013 10:15 AM

Official Record

Recording requested By  
LESLEY & TAMI STANDRIDGE

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$15.00 Page 1 of 2  
RPT: \$27.30 Recorded By: FES  
Book- 556 Page- 0371



THIS INDENTURE WITNESS That the GRANTOR(S): \_\_\_\_\_

David Paul Singelyn for and in consideration of  
seven thousand two Dollars (\$7,000.00) the receipt of which is hereby  
acknowledged, do hereby GRANT, BARGAIN, SALE AND CONVEY to GRANTEE(S):  
Lesley Nolan Standridge and Tami Dee Standridge whose address is  
(if applicable): HC 66 Box 2-12, situate in  
the City of Beowawe, County of Eureka, State of Nevada.

All that certain property in the County of Eureka, State of Nevada bounded and described as follows:  
(Set forth legal description)

T31N-R49E Sec 13  
Parcel # 003-451-06

Together with all and singular hereditament and appurtenances thereunto belonging or in any way  
appertaining to. In Witness Whereof, I/We have hereunto set my hand/our hands on 10-22-2013

Signature of Grantor

Signature of Grantor

DAVID Singelyn  
Print or type name here

Print or type name here

STATE OF NEVADA )

COUNTY OF EUREKA )

This instrument was acknowledged before me on (date) \_\_\_\_\_

By (person(s) appearing before notary public) \_\_\_\_\_

Notary Public

My Commission expires: \_\_\_\_\_

(Notary Stamp)

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

State of California

County of RIVERSIDE

On 10-22-13 before me, XIOMARA MARTINEZ, NOTARY PUBLIC  
Date Here Insert Name and Title of the Officer

personally appeared DAVID P. SINGELYN  
Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Xiomara Martinez  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

**Description of Attached Document**

Title or Type of Document: GRANT, BARGAIN, AND SALE DEED.

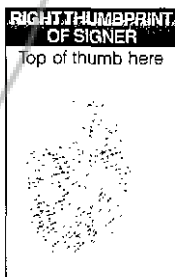
Document Date: 10-22-2013 Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

- Individual
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: \_\_\_\_\_



Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

- Individual
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: \_\_\_\_\_



Signer Is Representing: \_\_\_\_\_



STATE OF NEVADA  
DECLARATION OF VALUE FORM

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LESLEY & TAMI STANDRIDGE

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

- a) 003-451-06
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

2. Type of Property:

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

FOR RECORDER'S OPTIONAL USE ONLY  
 Book: \_\_\_\_\_ Page: \_\_\_\_\_  
 Date of Recording: \_\_\_\_\_  
 Notes: \_\_\_\_\_

3. Total Value/Sales Price of Property

\$ 7,000.00  
 Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due \$ 27.30

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section \_\_\_\_\_
- b. Explain Reason for Exemption: \_\_\_\_\_

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 David Paul Singelyn

Capacity Buyer

Signature \_\_\_\_\_

Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION  
(REQUIRED)

Print Name: David Paul Singelyn  
 Address: Po Box 934  
 City: Lake Elsinore  
 State: CA Zip: 92531

BUYER (GRANTEE) INFORMATION  
(REQUIRED)

Print Name: Lesley + Tami Standridge  
 Address: HC 66 Box 272  
 City: Beowawe  
 State: NV Zip: 89821

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

Print Name: \_\_\_\_\_ Escrow #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_