

DOC # 0227032

03/07/2014 1:00 PM

Official Record

Recording requested By
JAMES LEFEVER

Eureka County - NV
Mike Rebaleati - Recorder

Fee: \$14.00 Page 1 of 1
RPTT: Recorded By: LLH

Book- 563 Page- 0252

Verified Trust



0227032

APN: 003-452-01

GRANT DEED

JAMES LEFEVER and RITA LEFEVER, husband and wife as joint tenants with right of survivorship, the undersigned Grantors, FOR NO CONSIDERATION, do hereby GRANT, BARGAIN, SELL and CONVEY to Grantees,

GRANTEES, JAMES A. LEFEVER and RITA R. LEFEVER, TRUSTEES, TEAM SURREAL FAMILY TRUST dated October 5, 2013,

the following described real property in the County of EUREKA, State of NEVADA:

Unit 1 Parcel # 15 Pioneer Pass Section 13 T31N R49E MDB & M

SUBJECT TO: Current taxes, leases or licenses, exceptions and reservations, encumbrances, restrictions, and conditions, if any; rights of way and easements either of record or actually existing on said premises.

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

TO HAVE AND TO HOLD said premises, together with the appurtenances, unto said Grantees and to their heirs and assigns forever.

EXEMPT TRANSFER per NRS 375.090, Section 7: Transfer without consideration to or from a trust if Certificate of Trust is presented at time of transfer.

Executed this 08 day of February, 2014, at Clark County, Nevada.

[Signatures of James Lefever and Rita Lefever]

JAMES LEFEVER RITA LEFEVER

STATE OF NEVADA
COUNTY OF Clark

This instrument was acknowledged before me on 28th February 2014, by JAMES LEFEVER and RITA LEFEVER, 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.

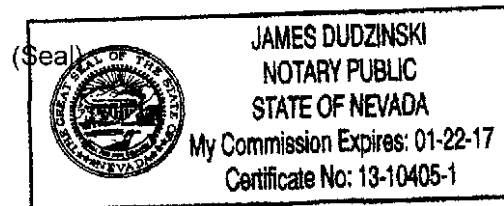
[Signature of Notary Public]

Notary Public

James Dudzinski

Printed Name

My Commission Expires: 01-22-2017



RETURN TO and MAIL TAX STATEMENTS TO:
James A. Lefever & Rita R. Lefever, Trustees
1313 Silent Sunset Avenue
North Las Vegas, NV 89084

STATE OF NEVADA
DECLARATION OF VALUE FORM

DOC # DV-227032

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1. Assessor Parcel Number(s)

- a) 003-452-01
- 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 \$14.00
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Date of Recording: _____
Notes: _____

- 3. Total Value/Sales Price of Property \$ 0.00
- Deed in Lieu of Foreclosure Only (value of property) (0.00)
- Transfer Tax Value: \$ 0.00
- Real Property Transfer Tax Due \$ 0.00

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 7 _____
- b. Explain Reason for Exemption: A Transfer of title to or from a trust without consideration

5. Partial Interest: Percentage being transferred: 100.00 %

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

Signature _____ Capacity Grantor

SELLER (GRANTOR) INFORMATION (REQUIRED)

Print Name: JAMES LEFEVER and RITA LEFEVER
Address: 1313 SILENT SUNSET AVENUE
City: NORTH LAS VEGAS
State: NV Zip: 89084

BUYER (GRANTEE) INFORMATION (REQUIRED)

Print Name: TEAM SURREAL FAMILY TRUST
Address: 1313 SILENT SUNSET AVENUE
City: NORTH LAS VEGAS
State: NV Zip: 89084

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

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