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 Recorded By: LLH

Nevada.

Book- 563 Page-



0252

0227032

GRANT DEED

APN: 003-452-01

BARGAIN, SELL and CONVEY to Grantees, GRANTEES, JAMES A. LEFEVER and RITA R. LEFEVER, TRUSTEES, TEAM SURREAL FAMILY TRUST dated October 5, 2013.

Grantors, FOR NO CONSIDERATION, do hereby GRANT,

JAMES LEFEVER and RITA LEFEVER, husband and wife

as joint tenants with right of survivorship, the undersigned

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.

1 xuary, 2014

JAMES LEFÉVER

Executed this () day of t

RITA LEFEVER

STATE OF NEVADA

COUNTY OF _ Clark

This instrument was acknowledged before me on <u>28th February 2014</u>, 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.

Notary Public

James Oudzinsk

Printed Name

RETURN TO and MAIL TAX STATEMENTS TO: James A. Lefever & Rita R. Lefever, Trustees 1313 Silent Sunset Avenue North Las Vegas, NV 89084 My Commission Expires: Ol-22-2017

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JAMES DUDZINSKI NOTARY PUBLIC STATE OF NEVADA IV Commission Expires: 01-22-17

Certificate No: 13-10405-1

STATE OF NEVADA DECLARATION OF VALUE FORM ficial 1. Assessor Parcel Number(s) Recording requested By JAMES LEFEVER a) 003-452-01 b) Eureka County - NV c) Mike Rebaleati - Recorder d) 2. Type of Property: Page 1 Fee \$14.00 of 1 Recorded By LLH RPTT a) Vacant Land Single Fam. Res. b)[Book - 563 Page - 0252 c) Condo/Twnhse d) 2-4 Plex Comm'l/Ind'l e) Apt. Bldg f) Date of Recording: Agricultural Mobile Home Notes: g) Other 3. Total Value/Sales Price of Property \$0.00Deed 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 cirantor Signature Capacity \ **SELLER (GRANTOR) INFORMATION** BUYER (GRANTEE) INFORMATION (REQUIRED) (REQUIRED) Print Name: JAMES LEFEVER and RITA LEFEVER Print Name: TEAM SURREAL FAMILY TRUST Address: 1313 SILENT SUNSET AVENUE Address: 1313 SILENT SUNSET AVENUE City: NORTH LAS VEGAS City: NORTH LAS VEGAS State: NV Zip: 89084 State: NV Zip: 89084 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