APN:003-202-04

Recording requested by and mail documents and tax statements to:

Name: Roy V. Ferris

Address: 1545 Palisade Drive

City/State/Zip: Reno, Nevada 89509

DED119

Nevada Legal Forms & Tax Services, Inc.

www.nevadalegalforms.com

Official Record Recording requested By ROY FERRIS

Eureka County - NV

Sara Simmons - Recorder Page 1 Fee: \$15.00 Recorded By RPTT: \$3.90

Book- 589 Page- 0125

SPECIAL WARRANTY DEED RPTT:

For the consideration of Zero (\$ 0.00) Dollars, and other valuable considerations, the Granton (Seller), whose name(s) are, Family Wealth Planning Inc. Defined Benefit Pension Plan & Trust, does hereby convey to Grantee (Buyer), whose name is: Roy V. Ferris, a Single Man, the following real property whose address is: 1545 Palisade Drive, Reno, Nevada 89505 (Set forth legal description and commonly known address)

NEVELCO INC.#2, T29N, R48E Sec. 15, Block E, Lots 8 & 9.

SUBJECT TO all taxes, assessments, reservations in patents, all easements, rights of way, encumbrances liens, covenants, conditions, restrictions, obligations and liabilities that may appear of record. And the Grantor hereby binds itself and its successors to warrant and defend the title, as against all acts of the Grantor herein and no other, subject to the matters above set forth.

In Witness Whereof, my hand has been set on
Print Name and Title for Company for Family Wealth Planning Inc. Defined Benefit Pension Plan & Trust
Nevada Legal Forms & Tax Services, Inc. Registrant's Name: Angelica Janet Kleinfeldt Registrant Certificate No.: NVDP20143419 3901 W. Charleston Blvd., Las Vegas, Nevada 89102 (702) 870-8977
2.11.202
STATE OF NUMBER) COUNTY OF CIAME) On this / day of march , 20 /6 , personally appeared
before me, a Notary Public, <u>VAh</u> F. Wise cup
□ personally known to me OR □ proved to me on the basis of satisfactory evidence to be the
person(s) described in and who executed the foregoing instrument in the capacity set forth therein,
who acknowledged to me that they executed the same freely and voluntarily and for the uses and
purposes therein mentioned. Witness my hand and official seal.
SUSAN DAVIS Notary Public State of Nevada No. 11-6156-1
Notary Public My Appt. Exp. Nov. 8, 2019 My Commission expires: ///8//9
Consult an attorney if you doubt this forms fitness for your purpose.

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Special Warranty Deed

STATE OF NEVADA	DOC # DV-230997
DECLARATION OF VALUE FORM	03/14/2016 08:41 AM
1. Assessor Parcel Number(s)	Official Record
a) 003-202- 0 4 b)	Recording requested By ROY FERRIS
c)	Eureka County - NV
d)	Sara Simmons - Recorder
2. Type of Property:	[
a) Vacant Land b) Single Fam. Res.	Page 1 of 1 Fee \$15.00 Recorded By: LH RPTT: \$3.90
c) Condo/Twnhse d) 2-4 Plex	Book - 589 Page - 0125
e) Apt. Bldg f) Comm'l/Ind'l	L
g) Agricultural h) Mobile Home Other	Notes:
3. Total Value/Sales Price of Property	\$ Ø = ØØ
Deed in Lieu of Foreclosure Only (value of property	
Transfer Tax Value:	\$ 589.00
Real Property Transfer Tax Due	\$ 3.90
4. If Exemption Claimed:	
a. Transfer Tax Exemption per NRS 375,090, Sect	ion
b. Explain Reason for Exemption:	
5. Partial Interest: Percentage being transferred: /O	
The undersigned declares and acknowledges, un NRS 375.060 and NRS 375.110, that the information or	
information and belief, and can be supported by docume	
information provided herein. Furthermore, the parties a	
exemption, or other determination of additional tax due,	
due plus interest at 1% per month. Pursuant to NRS 37.	
jointly and severally liable for any additional amount ov	
	_
Signature / Gry, V. Ferres	Capacity Ounds
Signature	Capacity
CELLED CODANICADA INCODA ATION DI	SANTO ANTENNO SERVICIO E ANTENNO
SELLER (GRANTOR) INFORMATION BU	YER (GRANTEE) INFORMATION (REQUIRED)
Print Name: defined Benefit lewion Alant Trust Print	nt Name: Roy Vo FERRIS
Address: 3218 Rolling Acros Circle Add	dress: 1545/ PALISAVE Drive
	y: Dono
State: NevAdA Zip: State	te: <i>NevAdA</i> Zip: 89509
	- • •
COMPANY/PERSON REQUESTING RECORDING	G (required if not seller or buyer)
Print Name: Esc	row #:
Address:	<u></u> .
City: Stat	te:Zip:
AS A PUBLIC RECORD THIS FORM MAY BE	E BECORDED/MODORIT MED