

APN #: 3-301-16
Recording Requested by:
Allen Buss and Betty Buss
645 Ashley lane
Owattona MN, 55060
Return Document To:
Victor D. Reynolds II
428 Yale st
San Francisco CA, 94134
Mail Tax Statement To:
Victor D. Reynolds II
428 Yale st
San Francisco CA, 94134

DOC # 0231970

09/23/2016

01:28 PM

Official Record

Recording requested By
VICTOR REYNOLDS

Eureka County - NV

Lisa Hoehne - Acting Recorder

Fee: \$15.00 Page 1 of 2
RPTT: \$3.90 Recorded By: LH
Book- 596 Page- 0001



0231970

Grant Deed

GRANT DEED, made this 31st day of August, 2016 by and between
Allen Buss and Betty Buss
645 Ashley lane
Owattona MN, 55060

("GRANTOR(S)") and
Victor D. Reynolds II
428 Yale st
San Francisco CA, 94134

("GRANTEE(S)"),
THE GRANTOR(S), for and in consideration of \$105
one hundred five dollars and zero cents

the receipt and sufficiency of which is hereby acknowledged and received, does hereby remise,
release and grant unto the GRANTEE(S) and his/her heirs and assigns, the following premises
located in the County of Eureka

State of Nevada - legally described as follows:
Township 29North, Range48 East Section 9;
El Cortez Ranch #1
District 4.0 Lot 5

Also known as street and number:

IN WITNESS WHEREOF, the grantor has executed this deed on the date set forth above.

☐ I or, ☒ (We), the undersigned, hereby affirm that this document submitted for recording does not contain a Social Security Number

Signature Allen Buss
Print Name Allen Buss
Capacity Grantor

Signature Betty Buss
Print Name Betty Buss
Capacity Grantor

Signature _____
Print Name _____
Capacity _____

Signature _____
Print Name _____
Capacity _____

STATE OF Minn.)

COUNTY OF Nodge)

On Sept 2nd 2016, before me Allen Buss + Betty Buss, personally appeared _____

Personally known to me (or 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.

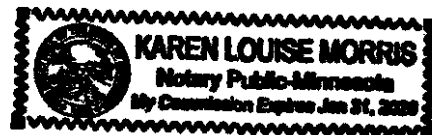
WITNESS my hand and official seal.

Signature Karen L. Morris

Print Name Karen L. Morris

My Commission Expires 1-31-2020

[NOTARY SEAL]



Certificate of Appointment Number _____ (For Nevada Notaries Only)

STATE OF NEVADA
DECLARATION OF VALUE FORM

DOC # DV-231970

09/23/2016

01:28 PM

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1. Assessor Parcel Number(s)

- a) 3-301-16
b) _____
c) _____
d) _____

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VICTOR REYNOLDS

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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
Recorded By: LH RPTT: \$3.90

Book- 596 Page- 0001

Date of Recording: _____

Notes: _____

3. Total Value/Sales Price of Property

\$ 1050

Deed in Lieu of Foreclosure Only (value of property) _____

Transfer Tax Value: _____

\$ 3.90

Real Property Transfer Tax Due _____

\$ _____

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 [Signature]

Capacity Buyer

Signature _____

Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: ALLEN and BETTY BOSS

Address: 645 ASHLEY LANE

City: OWATONNA

State: MN Zip: 55060

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Victor Reynolds

Address: 428 YALE ST

City: SAN FRANCISCO

State: CA Zip: 94134

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