

**DOC # 0232234**

11/14/2016

03:08 PM

**Official Record**

Recording requested By  
VICTOR REYNOLDS

**Eureka County - NV**

**Lisa Hoehne - Recorder**

Fee: \$15.00

Page 1 of 2

RPTT: \$1.95

Recorded By: CH

Book- 597 Page- 0311

APN #: 003-253-03

Recording Requested by:  
ROBERT ALLEN SCHLEIGER  
1126 SW 12TH AVENUE APT. 412  
PORTLAND, OR. 97205

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



0232234

## Grant Deed

GRANT DEED, made this 2 day of November, 2016 by and between  
ROBERT ALLEN SCHLEIGER  
Whose Address is:  
1126 SW 12TH AVENUE APT. 412  
PORTLAND, OR. 97205

("GRANTOR(S)") and  
Victor D. Reynolds II  
Whose Address is:  
428 Yale st  
San Francisco, Ca 94134

("GRANTEE(S)"),  
THE GRANTOR(S), for and in consideration of \$382.00  
Three Hundred Eighty Two 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:  
Lots 9 & 10 Block BB Nevelco Inc. #2

Also known as street and number:  
T29N,R48E SEC. 15 LOTS 9 & 10

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 [Signature]  
Print Name Robert Allen Schleiger  
Capacity Grantor

Signature \_\_\_\_\_  
Print Name \_\_\_\_\_  
Capacity \_\_\_\_\_

Signature \_\_\_\_\_  
Print Name \_\_\_\_\_  
Capacity \_\_\_\_\_

Signature \_\_\_\_\_  
Print Name \_\_\_\_\_  
Capacity \_\_\_\_\_

STATE OF Oregon )

COUNTY OF Multnomah )

On 03 November 2016 before me Kaleesa Diane Thanasouk, personally appeared Robert Allen Schleiger

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 [Signature]  
Print Name Kaleesa Diane Thanasouk

[NOTARY SEAL]



My Commission Expires 30 July 2019

Certificate of Appointment Number \_\_\_\_\_ (For Nevada Notaries Only)

STATE OF NEVADA  
DECLARATION OF VALUE FORM

Recording requested by  
VICTOR REYNOLDS

Eureka County - NV  
Lisa Hoehne - Recorder

Page 1 of 1 Fee: \$15.00  
Recorded By: CH RPTT: \$1.95  
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- 1. Assessor Parcel Number(s)
  - a) 003-293-03
  - b) \_\_\_\_\_
  - c) \_\_\_\_\_
  - d) \_\_\_\_\_

- 2. Type of Property:
 

a) <input checked="" type="checkbox"/> Vacant Land	b) <input type="checkbox"/> Single Fam. Res.
c) <input type="checkbox"/> Condo/Twnhse	d) <input type="checkbox"/> 2-4 Plex
e) <input type="checkbox"/> Apt. Bldg	f) <input type="checkbox"/> Comm'l/Ind'l
g) <input type="checkbox"/> Agricultural	h) <input type="checkbox"/> Mobile Home
<input type="checkbox"/> Other	

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

- 3. Total Value/Sales Price of Property \$ 382.00
- Deed in Lieu of Foreclosure Only (value of property) \_\_\_\_\_
- Transfer Tax Value: \$ ~~145~~ 3.90
- Real Property Transfer Tax Due \$ 0

- 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 Grantee

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION (REQUIRED)**

**BUYER (GRANTEE) INFORMATION (REQUIRED)**

Print Name: ROBERT ALLEN SCHLIGER  
 Address: 1126 SW 12th Ave Apt 412  
 City: PORTLAND  
 State: OR Zip: 97205

Print Name: Victor D Reynolds  
 Address: 425 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: \_\_\_\_\_