

APN: 002-038-28

Recording requested by and mail documents and tax statements to:

Name: Cindy LaRoche

Address: 247 Country Club Dr

City/State/Zip: Crescent Valley, NV 89815

DED106mk

Nevada Legal Forms & Tax Services, Inc.  
www.nevadalegalforms.com

EUREKA COUNTY, NV

RPTT: \$58.50 Rec: \$35.00

Total: \$93.50

CINDY LAROCHELLE

2018-235864

08/24/2018 12:12 PM

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LISA HOEHNE, RECORDER

RPTT: GRANT, BARGAIN, and SALE DEED

THIS INDENTURE WITNESS that: Gloria L. Nielsen

(hereinafter called GRANTOR(S)) in consideration of Ten dollars

Dollars \$ 10.00, the receipt of which is hereby acknowledged, do hereby

GRANT, BARGAIN, SALE and CONVEY to: Cindy Lee LaRoche

(hereinafter called GRANTEE(S)) all that real property situated in the City of Crescent Valley

County of Eureka, State of Nevada, bounded and described as follows:

(Set forth legal description and commonly known address).

**COMMONLY KNOWN ADDRESS:**

455 fourth street  
Crescent Valley, Nevada

Roll # 3478

District 2

Parcel # 002-038-28

**LEGAL DESCRIPTION:**

Lot 4 of Block 22 of Crescent Valley Ranch & Farms, Unit No. 1, as per Map Recorded in Eureka County as File #34081 in the office of the County Recorder County of Eureka, State of Nevada  
Parcel Number 002-038-28

Together with all and singular hereditament and appurtenances thereunto belonging or in any way appertaining to.

In Witness Whereof, I/We have hereunto set my hand/our hands on 22 day of August, 2018.

Gloria L. Nielsen  
Signature of Grantor

\_\_\_\_\_  
Signature of Grantor

Gloria L. Nielsen  
Print or Type Name Here

\_\_\_\_\_  
Print or Type Name Here

STATE OF

} Nevada  
}

COUNTY OF

} Nye  
}

On this 22 day of August, 2018, personally appeared before me, a Notary Public, Gloria Louise Nielsen,

☐ 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.

Nakia D. Celius  
Notary Public



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

**1. Assessor Parcel Number(s)**

a) 002-038-28  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

**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  
i) ☒ Other Improved Land

**FOR RECORDER'S OPTIONAL USE ONLY**

Book: \_\_\_\_\_ Page: \_\_\_\_\_

Date of Recording: \_\_\_\_\_

Notes: \_\_\_\_\_

**3. Total Value/Sales Price of Property**

\$15,000

Deed in Lieu of Foreclosure Only (value of property) \_\_\_\_\_

Transfer Tax Value: \$ 56.50 x 2

Real Property Transfer Tax Due \$ 56.50

**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 Cindy LaRachelle Capacity Buyer

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

**SELLER (GRANTOR) INFORMATION**

**(REQUIRED)**

Print Name: Gloria Nielsen  
Address: 1409 Blaine Street  
City: Emmett  
State: MT Zip: 59817

**BUYER (GRANTEE) INFORMATION**

**(REQUIRED)**

Print Name: Cindy LaRachelle  
Address: 247 Country Club  
City: Spring Creek  
State: NV Zip: 89815

**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