

**APN#:** 005-070-18

**Recording Requested by and Return To:**

**Name:** SETH VAN WAGONER

**Address:** 848 N RAINBOW BLVD A-1

**City/State/Zip:** LAS VEGAS, NV 89107

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EUREKA COUNTY, NV

RPTT:\$5.85 Rec:\$35.00

Total \$40.85

SETH VAN WAGONER

**2018-236289**

**10/31/2018 02:52 PM**

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LISA HOEHNE, RECORDER

DEED

(TITLE of Document)

A.P.N.S.:  
005-070-18

When Recorded Return To:  
Mail Tax Statements To:  
Seth Van Wagoner  
Las Vegas, NV 89107

### WARRANTY DEED

For Valuable Consideration of Ten Dollars (\$10.00) and good and other valuable consideration, receipt of which is hereby acknowledged,

**The Grantor: Jason Carrodine**, an individual, hereby GRANTS, BARGAINS, SELLS and WARRANTS to: **Seth Van Wagoner**, an individual (Grantee) common title, interest, and claim to the following real estate in the County of Eureka, State of Nevada, with the following legal descriptions:

**THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 35, TOWNSHIP 31N, RANGE 48E OF EUREKA COUNTY NEVADA**

APNS:  
005-070-18 (10 Acres)

Subject to:

1. All general and special taxes for the current fiscal year.
2. Covenants, Conditions, Restrictions, Reservations, Rights, Rights of Way and Easements now of record.

TOGETHER with all tenements, hereditaments and appurtenances, including easements, mineral rights and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

  
**JASON CARRODINE**

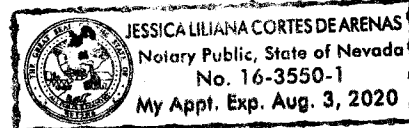
STATE OF NEVADA  
COUNTY OF CLARK

On 10-26-18, before me, Jessica Cortes de Arenas, notary public, personally appeared **JASON CARRODINE** personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

  
Notary Public Signature

My commission expires: 08-3-2020.



(SEAL ABOVE)

**STATE OF NEVADA  
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)

a. 005-070-18  
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  
Other \_\_\_\_\_

FOR RECORDERS OPTIONAL USE ONLY  
Book \_\_\_\_\_ Page: \_\_\_\_\_  
Date of Recording: \_\_\_\_\_  
Notes: \_\_\_\_\_

3.a. Total Value/Sales Price of Property \$ 1500.00  
b. Deed in Lieu of Foreclosure Only (value of property ( \_\_\_\_\_ )  
c. Transfer Tax Value: \$ \_\_\_\_\_  
d. Real Property Transfer Tax Due \$ 5.85

4. **If Exemption Claimed:**

a. Transfer Tax Exemption per NRS 375.090, Section \_\_\_\_\_  
b. Explain Reason for Exemption: \_\_\_\_\_

5. Partial Interest: Percentage being transferred: 100 %

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 *Seth Van Wagoner* Capacity: GRANTEE, BUYER

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

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

Print Name: JASON CARRODINE  
Address: 9341 POLWARTH CT  
City: LAS VEGAS  
State: NEVADA Zip: 89178

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

Print Name: SETH VAN WAGONER  
Address: 848 N RAINBOW BLVD A-1  
City: LAS VEGAS  
State: NEVADA Zip: 89107

**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