

<b>A.P.N. No.:</b>	005-040-15
<b>R.P.T.T.</b>	\$0.00
<b>File No.:</b>	
<b>Recording Requested By:</b>	
<b>Mail Tax Statements To:</b> <i>Same as below</i>	
<b>When Recorded Mail To:</b>	
Jeffrey Dent	
8015 International Dr #275	
Orlando, FL 32819	

**EUREKA COUNTY, NV**  
RPTT:\$0.00 Rec:\$35.00  
\$35.00 Pgs=2  
**2018-236422**  
**11/20/2018 10:10 AM**  
COPENHAVER & MCCONNELL, PC  
**LISA HOEHNE, RECORDER** E03

## GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That

**JoAnn E Swanson a married woman, spouse of former owner Harold R Swanson**

for valuable consideration, the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell and Convey to

**Jeffrey D Dent an unmarried man,**

all that real property situated in the County of Eureka, State of Nevada, bounded and described as follows:

TOWNSHIP 31 NORTH, RANGE 48 EAST, M.D.B.&M.

Section 21: SW1/4SE1/4;

EXCEPTING THEREFROM all petroleum, oil, natural gas and products derived therefrom, within or underlying said land or that may be produced therefrom, and all rights thereto, as reserved by Southern Pacific Land Company, in deed recorded September 24, 1951, in Book 24, Page 168, Deed Records of Eureka County, Nevada.

**\*SUBJECT TO:**

1. Taxes for the fiscal year;
2. Reservations, restrictions, conditions, rights, rights of way and easements, if any of record on said premises.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and any reversions, remainders, rents, issues or profits thereof.

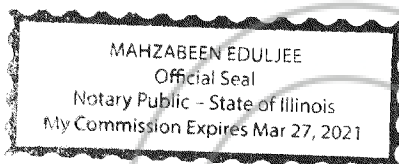
Dated: 11-10-18

JoAnn E Swanson  
JoAnn E Swanson

State of Illinois )  
County of Dupage ) ss

This instrument was acknowledged before me on the 10th day of November, 2018  
By: JoAnn E Swanson

Signature: MAH ZABEEN EDULJEE  
Notary Public



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
a) 005-040-15  
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 \$ \_\_\_\_\_  
b. Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )  
c. Transfer Tax Value: \$ 0.00  
d. Real Property Transfer Tax Due \$ 0.00

4. **If Exemption Claimed:**

- a. Transfer Tax Exemption per NRS 375.090, Section 3  
b. Explain Reason for Exemption: Deed to eliminate spousal interest of former owner and recognize true status of ownership

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 [Signature]  
JoAnn E Swanson  
Signature [Signature] Capacity [Signature]  
Jeffrey D Dent

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

Print Name: JoAnn E Swanson  
Address: 520 60<sup>th</sup> Street  
City: Downers Grove  
State: IL Zip: \_\_\_\_\_

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

Print Name: Jeffrey D Dent  
Address: 8015 International Dr #275  
City: Orlando  
State: FL Zip: 32819

**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