

RECORDING REQUESTED BY :
Timothy C. Paris)
P.O. Box 2234)
Martinez, CA. 94553)

TIMONTHY C PARIS



LISA HOEHNE, CLERK RECORDER

SEND FUTURE TAX STATEMENTS TO:
AND WHEN RECORDED MAIL TO:
KENT TAYLOR)
5402 Bull Run Circle)
Austin, Texas 78727)

GRANT DEED

Timothy C. Paris , as Grantor for the consideration of Three Thousand Dollars (\$3,000.00) , hereby conveys, grants and deeds to **Kent Taylor**, as Grantee, the following property locally known as, and furthermore described as: **Apn#005-200-14 , T30N, R48E, Section 17 SE4NW4NW4, Eureka County, Nevada.**

On this 23 day of December 2019, in the County of Contra Costa State of California , I/we herewith sign this Grant Deed.

Timothy C. Paris

TIMOTHY c. PARIS

State of _____)
) ss

County of _____)

On this the _____ day of _____, 2019, before me, the undersigned, a notary public in and for said County and State, personally appeared TIMOTHY C. PARIS , 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 entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

**See Attached
for
Notarization**

Signature of Notary

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

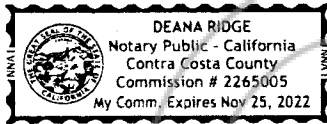
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Contra Costa
On 12/23/2019 before me, Deana Ridge, Notary Public
Date Here Insert Name and Title of the Officer
personally appeared Timothy C Paris
Name(s) of Signer(s)

who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Deana Ridge
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

a) 005-200-14
 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'/Ind'l
 g) Agricultural h) Mobile Home
 Other

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____
 Date of Recording: _____
 Notes: _____

3. Total Value/Sales Price of Property

\$ 3000.

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

Transfer Tax Value: _____

\$ 3000.

Real Property Transfer Tax Due _____

\$ 11.70

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)**

Print Name: Timothy Paris
 Address: P.O. Box 2234
 City: Martinez
 State: CA Zip: 94533

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

Print Name: Kent Taylor
 Address: 5402 Bull Run Circle
 City: Altamira
 State: TX Zip: 78727

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: Buyer Escrow #: _____
 Address: _____
 City: _____ State: _____ Zip: _____

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED