

Recording Requested By:  
LANDL LLC

EUREKA COUNTY, NV  
RPTT:\$52.65 Rec:\$37.00  
\$89.65 Pgs=2  
LANDL LLC  
LISA HOEHNE, CLERK RECORDER

**2020-240708**  
**06/03/2020 08:13 AM**

When recorded mail to:  
Christopher Deitche  
26077 Bent Oak dr  
Hockley TX 77447

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APN: 005-130-25  
Page 1 of 2

Prior Instrument Number: 232869

### **Grant Deed**

For good and valuable consideration of Ten Dollars (\$10.00), the receipt and sufficiency of which is hereby acknowledged, I or we, LANDL LLC, (GRANTORS), an Indiana limited liability company, does hereby convey to Christopher Deitche and Kimberly Deitche (GRANTEES), joint tenancy with rights of survivorship, the following described real property situated in Eureka (COUNTY), Nevada (STATE):

S1/2 of W1/2 of E1/2, Section 31, Township 31 North, Range 50 East, M.D.B. & M. TOGETHER WITH any and all buildings and improvements situate thereon. TOGETHER WITH the tenements, hereditament and appurtenances thereunto belonging or in anywise appertaining, the reversion and reversion, remainder and remainders, rents, issues, and profits thereof.

SUBJECT TO: Existing taxes, assessments, covenants, conditions, restrictions, rights of way and easements of record.


And the GRANTOR binds itself and its successors to warrant the title against its acts and none other, subject to the matters above set forth.

**Signature Page to Follow**

APN: 005-130-25

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DATED: 8/26/19

BY:   
Gary Wilson Asset Manager

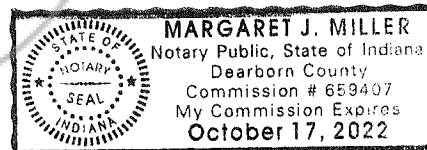
STATE OF Indiana )  
 ) ss.  
COUNTY OF Dearborn )

On August 26, 2019, before me, the undersigned Notary Public, personally appeared Gary Wilson, 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.

My Commission Expires: 10/17/2022  
Margaret J. Miller

Notary Public



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

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

- a) 005-130-25  
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 RECORDER'S OPTIONAL USE ONLY**

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

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

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

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

\$ 13,400

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

Transfer Tax Value: \_\_\_\_\_

\$ 13,400

Real Property Transfer Tax Due \_\_\_\_\_

\$ 52.65

**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 [Signature] Asset Manager

Capacity Grantor

Signature \_\_\_\_\_

Capacity \_\_\_\_\_

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

Print Name: LANDL LLC  
Address: 100 Industrial De STELLS  
City: Lawrenceburg  
State: IN Zip: 47025

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

Print Name: Chris and Kimberly Deitche  
Address: 26077 Bent Oak Dr  
City: Hockley  
State: TX Zip: 77447

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

Print Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_

Escrow #: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED