

EUREKA COUNTY, NV  
RPTT:\$21.45 Rec:\$37.00  
\$58.45 Pgs=2

**2022-247940**  
**04/05/2022 11:13 AM**

VACANT LAND USA  
LISA HOEHNE, CLERK RECORDER

**MAIL TAX STATEMENT WHEN RECORDED:**

Joe W. Stafford  
709 E Grant Ave.  
Boley, OK 74829

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**SPECIAL WARRANTY DEED**

**THE GRANTOR**

- Vacant Land USA, LLC 30 N Gould St Sheridan WY, 82801

For and in consideration of : \$10 and other good and valuable  
consideration grants

**To the GRANTEE:**

Joe W. Stafford, 709 E Grant Ave, Boley, OK 74829  
-

the following described real estate situated in the County of Eureka,  
State of Nevada:

003-095-09

Lot 5 of Block 10 of Crescent Valley Ranch and Farm Unit 4 as platted  
of record in Eureka County, State of Nevada, 003-095-09. Township 30  
Range 48 Section 21, 257 N 11<sup>th</sup> Street

Subject to existing taxes, assessments, liens, encumbrances, covenants, conditions,  
restrictions, rights of way and easements of record the grantor hereby covenants  
with the Grantee that Grantor is lawfully seized in fee simple of the above  
granted premises and has good right to sell and convey the same.

Grantor Signature:

DATED: 4/1/2022

Monica Patricia Moran Morales

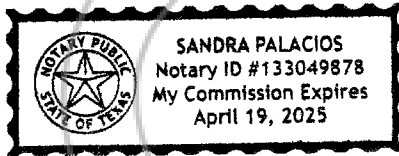
Monica Patricia Moran Morales  
Authorized Representative

### ACKNOWLEDGEMENT

On this 1st day of April before me appeared Monica Patricia Moran Morales ~~to me personally known~~ *who proved to me on the basis of satisfactory evidence*, who being by me duly sworn, did she that she is the Authorized Representative of Vacant Land USA, LLC a Wyoming Limited Liability Company and that said instrument was signed on behalf of said Limited Liability Company and said Monica Patricia Moran Morales acknowledged said instrument to be the free act and deed of said Limited Liability Company.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal at my office in

STATE OF Texas, COUNTY OF Travis, ss:



[Signature]

Notary Public  
Signature of person taking  
acknowledgment

Notary Public  
Title (and Rank)

My commission expires:

4/19/2025

**STATE OF NEVADA  
DECLARATION OF VALUE**

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

- a. 003-095-09  
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

**FOR RECORDERS OPTIONAL USE ONLY**

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

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

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

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

\$ 5477

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

c. Transfer Tax Value: \$ 5477

d. Real Property Transfer Tax Due \$ 21.45

**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 Anne Samuel Capacity: Seller

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

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

Print Name: Vacant Land USA LLC  
Address: 500 Westover Dr #11802  
City: Sanford  
State: NC      Zip: 27330

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

Print Name: Joe W Stafford  
Address: 709 E Grant Ave  
City: Boley  
State: OK      Zip: 74829

**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