

APN: 007-393-10
R.P.T.T.: 0

Recording Requested By:
Robert W. Christensen
Tamara A. Christensen

Mail Tax Statements and
Recorded Documents
To:
Robert W. Christensen
Tamara A. Christensen
2 Sunshine St.
Ruth, NV 89319

EUREKA COUNTY, NV
LAND-DUD
Rec:\$37.00
Total:\$37.00
ROBERT & TAMARA CHRISTENSEN

2023-250104
05/12/2023 09:18 AM
Pgs=3



DEED UPON DEATH

We, Robert W. Christensen and Tamara A. Christensen, husband and wife as joint tenants, hereby convey to **Kailah Mykell Henderson**, a married woman as her sole and separate property, and **Korry Byron Clarke**, a single man, as joint tenants, effective on our deaths, all right, title and interest in the real property commonly known as 579 El Cajon, Eureka, County of Eureka, State of Nevada, and more particularly described as:

**Parcel No.: 007-393-10, Parcel B of Lot 2 of Parcel F, Property Location:
Town Section/Lot 17, Block 20, Range 53**

SUBJECT TO taxes for present fiscal year, subsequently, covenants, conditions, restrictions, exceptions and reservations, easements, encumbrances, leases of licenses, rights and right of way record, if any.

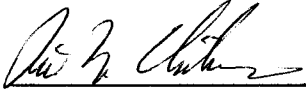

TOGETHER WITH the tenements, hereditaments and appurtenances thereunto belonging or appertaining and the reversion and reversions, remainder and remainders, rents, issue and profits thereof.

TO HAVE AND TO HOLD said premises, together with appurtenances, unto said Grantees as joint tenants with right of survivorship and not as tenants in common and their assigns and the heirs and assigns of survivor forever.

THIS DEED IS REVOCABLE. THIS DEED DOES NOT TRANSFER ANY OWNERSHIP UNTIL THE DEATH OF THE GRANTOR(S). THIS DEED REVOKES ALL PRIOR DEEDS BY THE GRANTOR(S) WHICH CONVEY THE SAME REAL PROPERTY PURSUANT TO NRS 111.655 TO 111.699, INCLUSIVE, REGARDLESS OF WHETHER THE PRIOR DEEDS FAILED TO CONVEY THE ENTIRE INTEREST OF THE GRANTOR(S) IN THE SAME REAL PROPERTY.

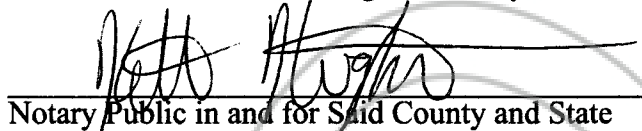
THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT SUBMITTED FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

IN WITNESS WHEREOF, Grantors have caused this conveyance to be executed on the day and year below.

 5/10/23
ROBERT W. CHRISTENSEN **DATE**
 5/10/23
TAMARA A. CHRISTENSEN **DATE**

~~X~~
State of Nevada)
County of White Pine) ss.

On this 10th day of May, 2023, before me, a Notary Public, personally appeared **ROBERT W. CHRISTENSEN AND TAMARA A. CHRISTENSEN**, who proved to me on the basis of satisfactory evidence to be the persons whose names are subscribed to this instrument, and acknowledged that they executed it.


Notary Public in and for Said County and State



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

- a) 007-393-10
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. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property)

Transfer Tax Value:

Real Property Transfer Tax Due:

\$ _____
(_____
\$ _____
\$ _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section # 10
b. Explain Reason for Exemption: Conveyance of real property by deed which becomes effective upon the death of the grantors pursuant to NRS 111.655 to 111.699.

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 Grantor

Signature [Signature] Capacity Grantor

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

Robert W. Christensen

Print Name: Tamara A. Christensen

Address: 2 Sunshine St.

City: Ruth

State: Nevada Zip: 89319

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

Kailah Mykell Henderson and Korry Byron Clarke

Print Name: _____

Address: _____

City: _____

State: _____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)