

APN#: 002-019-03, 002-043-03
Escrow No. 23-119854

**MAIL TAX STATEMENT TO AND
WHEN RECORDED RETURN TO:**

Teren Mitton
155 Spring Creek Ct
Spring Creek, NV 89815

EUREKA COUNTY, NV
RPTT:\$35.10 Rec:\$37.00
\$72.10 Pgs=4
WFG NEVADA - RW
KATHERINE J. BOWLING, CLERK RECORDER

2023-250748

06/16/2023 02:06 PM

GRANT, BARGAIN, SALE DEED

R.P.T.T. \$35.10

THIS INDENTURE WITNESSETH: That

Karen J. Burgum, a widow,

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

Teren Mitton, a single man,

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

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

- SUBJECT TO:
1. Taxes for the fiscal year 2022-2023.
 2. Rights of way, reservations restrictions, easements and conditions of record.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in
anywise appertaining.

WITNESS my hand this 6 day of June, 2023.

Karen J. Burgum
Karen J. Burgum

STATE OF California
COUNTY OF San Bernardino

This instrument was acknowledged before me this 14 day of June, 2023 by Karen J. Burgum.

VERENICE MONTANA
Notary Public for Nevada CALIFORNIA

My Commission Expires: JUNE 15, 2025

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 San Bernardino }

On June 6, 2023 before me, Verenice Montoya, Notary Public
(Here insert name and title of the officer)

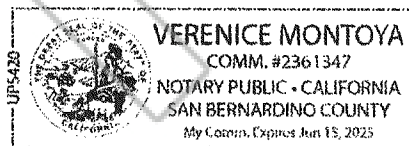
personally appeared Karen J Burgum
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) 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]
Notary Public Signature

(Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Grant, Bargain, Sale Deed

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 3 Document Date 06/06/2023

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~ is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.

EXHIBIT "A"
LEGAL DESCRIPTION

PARCEL 1:

LOT 11 IN BLOCK 10, AS SHOWN ON THE MAP OF CRESCENT VALLEY RANCH AND FARMS, UNIT NO. 1 FILED IN THE OFFICE OF THE COUNTY RECORDER OF EUREKA COUNTY, NEVADA ON APRIL 6, 1959 AS FILE NO. 34081.

PARCEL 2:

LOT 2 IN BLOCK 24, AS SHOWN ON THE MAP OF CRESCENT VALLEY RANCH AND FARMS, UNIT NO. 1 FILED IN THE OFFICE OF THE COUNTY RECORDER OF EUREKA COUNTY, NEVADA ON APRIL 6, 1959

APN: 002-019-03, 002-043-03

**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessors Parcel Number(s)

a) **002-019-03**

b) **002-043-03**

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

**FOR RECORDER'S OPTIONAL USE
ONLY**

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

☐ Other _____

3. Total Value/Sales Price of Property:

\$9,000.00

Deed in Lieu of Foreclosure Only (value of property)

(_____)

Transfer Tax Value:

\$9,000.00

Real Property Transfer Tax Due:

\$35.10

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 _____

Capacity Grantor

Signature T. Mitton

Capacity Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: **Karen J. Burgum**

Address: **P.O. Box 295**

City: **Victorville**

State: **CA**

Zip: **92393**

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: **Teren Mitton**

Address: **155 Spring Creek Court**

City: **Spring Creek**

State: **NV**

Zip: **89815**

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

Print Name: **WFG National Title Insurance Company**

Escrow #: **23-119854**

Address: **905 Railroad Street Suite 204**

City: **Elko**

State: **NV**

Zip: **89801**

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED