

 **SASHA BOWERS**  
Notary Public, State of Texas  
Comm. Expires 04-16-2028  
Notary ID 134853540

**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

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

a) 005-010-10  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

**2. Type of Property:**

a) ☒ Vacant Land      b) ☐ Single Fam. Res.  
c) ☐ Condo/Townhome      d) ☐ 2-4 Plex  
e) ☐ Apt. Bldg      f) ☐ Comm./Inst'l  
g) ☐ Agricultural      h) ☐ Mobile Home  
i) ☐ Other \_\_\_\_\_

**FOR RECORDER'S 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 \_\_\_\_\_

\$ 8500.00  
\_\_\_\_\_  
\$ 8500  
\$ 33.15  
+ 37 = 70.15

**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 Kent Taylor Capacity seller

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

**SELLER (GRANTED) INFORMATION  
(REQUIRED)**

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

**BUYER (GRANTED) INFORMATION  
(REQUIRED)**

Print Name: Jolen Hughes & Cameron Playfair  
Address: P.O. Box 163  
City: St. Kitts, Alberta  
State: CANADA Zip: T0M 0X0

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

Print Name: SELLER Reason #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED**