

EUREKA COUNTY, NV
LAND-GRT
RPTT:\$313.95 Rec:\$37.00
Total:\$350.95

2024-253088
09/13/2024 01:27 PM

Pgs=3

MICHAEL LOUIS SHARKOZY



00021183202402530880030030

KATHERINE J. BOWLING, CLERK RECORDER

APN: 02-057-06
Return document to:
Michael Louis Sharkozy
5018 Tenabo Ave
Crescent Valley, NV 89821

Mail tax statements to:
Michael Louis Sharkozy
5018 Tenabo Ave
Crescent Valley, NV 89821

In compliance with NRS 239B.030, I, the undersigned, hereby affirm that this document submitted for recording does not contain a Social Security number.

GRANT DEED

This GRANT DEED, executed this 24th day of May, 2024, by the grantor,
JoAnne Thomas
150 Steger Dr.
South Lebanon, OH 45065

for the consideration of

in hand paid, does hereby grant, bargain, and sell forever to the grantee,
Michael Louis Sharkozy
5018 Tenabo Ave
Crescent Valley, NV 89821

all right, title, and interest in and to the following real property situated in the County of Eureka, State of Nevada, legally described as:
LOT 8, BLOCK 32, CRESCENT VALLEY RANCH & FARMS, UNIT 1

Commonly known as: 5018 Tenabo Ave, Crescent Valley, NV 89821

Source of title:

Being the same property described in the conveyance recorded December 14, 2006 at Book 0449, Page 0053 as Document no. 0207306 in the office of the Recorder of Eureka County, Nevada.

THIS CONVEYANCE is made subject to: taxes for the present fiscal year and subsequently, covenants, conditions, restrictions, exceptions and reservations, easements, encumbrances, leases or licenses, rights and rights of way record, if any.

IN WITNESS WHEREOF, the grantor has signed and sealed these presents on the day first above written.

Signed, sealed and delivered in the presence of:

[Signature]
Signature
JoAnne Thomas
Print name
Grantor
Capacity

Michael V. Caldwell
Signature
Michael V. CALDWELL
Print name
FRIEND
Capacity

Signature

Print name

Capacity

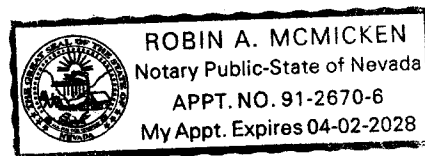
Carol J Caldwell
Signature
Carol J Caldwell
Print name
Friend
Capacity

Construe all terms with the appropriate gender and quantity required by the sense of this deed.

STATE OF Nevada)
COUNTY OF Elko)

This instrument was acknowledged before me on the 24 day of May, 2024, by JoAnne Thomas

Robin A. McMicken
Notary Public
Robin A. McMicken
Print name
My commission expires:
April 2, 2028



**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

a) APN: 02 - 057 - 06
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

Deed in Lieu of Foreclosure Only (value of property) \$ 80,485

Transfer Tax Value: \$

Real Property Transfer Tax Due \$ 313.95

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 [Signature] Capacity Grantee

Signature _____ Capacity _____

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

Print Name: JoAnne Thomas
Address: 150 Steger Dr.
City: South Washoe
State: Ohio Zip: 45065

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

Print Name: Michael Shaboy
Address: 5018 Lenox Ave
City: Crescent Valley
State: NV Zip: 89821

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

Print Name: _____ Escrow #: _____

Address: _____

City: _____ State: _____ Zip: _____

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED